Return of Organization Exempt From Income Tax

For the 2017 calendar year, or tax year beginning 01-01-2017 , and ending 12-31-2017

DLN: 93493099002168

2017

OMB No 1545-0047

Form **990**

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

▶ Do not enter social security numbers on this form as it may be made public
 ▶ Information about Form 990 and its instructions is at www.irs.gov/form990

Open to Public Inspection

3 Check if applicable □ Address change □ Name change	C Name of organization DEDICATED TO LEARNING	D Employer identification number 45-5376335
☐ Initial return☐ Final return/terminated	Doing business as	
☐ Amended return ☐ Application pending	Number and street (or P O box if mail is not delivered to street address) Room/suite 21522 MAGNOLIA STREET	E Telephone number (714) 992-1010
	City or town, state or province, country, and ZIP or foreign postal code WALNUT, CA 91789	G Gross receipts \$ 1,306,740
Ţ	Name and address of principal officer	A Alberta - Austria Galerian Cons
1		
À		
·_ *	≜ <	
	_	
-		
_		
. <u>2</u>		
•		1
T		
<u> </u>		
J. C		
-		
_		
, e		
	• • • • • • • • • • • • • • • • • • • •	
	J. G	
4		

Form 990 (Page 2
Part III	Statement of Program Service Accomplishments	
	Check if Schodille O contains a recogne or note to any line in this Best III	
<u> </u>		
	19—	
_		
7		
1)		
		·
an normani	- 	
·÷		
١.		
1		
F		
<u>. Last</u>		h-2

Checklist of Required Schedules

Page 3

Nο

Nο

No

Nο

Nο

Nο

Nο

Nο

Nο

No

Nο

Nο

Nο

Nο

Νo

Nο

No

Nο

Form **990** (2017)

17

Yes

Yes

3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? 4

assessments, or similar amounts as defined in Revenue Procedure 98-19? 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, No to provide advice on the distribution or investment of amounts in such funds or accounts? Nο 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, Nο

7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🛸 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets? 8 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian

for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

11a Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸 11b Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported 11d Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸 12a 12b If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

12a Did the organization obtain separate, independent audited financial statements for the tax year? b Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a

14a Did the organization maintain an office, employees, or agents outside of the United States? . . . **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,

business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

14b 15

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19

Form	990 (2017)			Page 4
Par	t IV Checklist of Required Schedules (continued)			
20-	Dillian and the control of the contr		Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
- 3c	P. J. E. J. C. J. J. C. J. J. M.			
- • •				
1				
) }	·- ·4 ·-			
Ti				
.[
	· · · · · · · · · · · · · · · · · · ·			
· · • • • •	the state of the s			
- (- (-) (1			
_				
١.				
Ĩ 4				

	990 (2017)			Page :
Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			П
	Check if Schedule O contains a response of note to any line in this Part V	•	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0			
Ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 127			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		No
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			140
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		No
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		No
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		No
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
D	against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a		No
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
, à	Is the organization licenced to iccue qualified health plans in more than one state? Mote. See the instructions for			
£7 2 ~				
L	•			
	[

orm	990 (2017)			Page 6
Par	Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "No" 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	·	nse to li	nes 🗸
Se	Check if Schedule O contains a response or note to any line in this Part VI	• •		
_			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 3			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 3			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		No
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		No
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12c		No
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a		No
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure	100		
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records ►NANCY HOGG 21522 MAGNOLIA STREET WALNUT, CA 91789 (714) 992-1010			

Part VII

vear

(F)

Estimated

amount of other

compensation

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax

 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

• List all of the organization's current key employees, if any See instructions for definition of "key employee" • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)

who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

• List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000

of reportable compensation from the organization and any related organizations

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the

organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest

than one box, unless person

compensation

compensated employees, and former such persons 🗹 Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (A) (B) (C) (D) (E) Name and Title Average Position (do not check more Reportable Reportable

hours per

	week (list any hours for related		oth a direct	n of tor/t	ficer rust	ee)	1	from the organization (W- 2/1099-	from related organizations (W- 2/1099-	compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trust⊌ë	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
(1) BARBARA FALCONER	3 50			x				0	0	0
Secretary	0 00									
(2) RAY MCMULLIN	0 50			,,						
President	0 00			×				0	0	0
(3) NANCY HOGG Vice President	10 00			x				0	0	0
										Form 990 (2017)
										FULLIN 990 (2017)

	990 (Page 8
Par	t VII	Section A. Officers, Direc		s, Key I	Emp	loye (C)		and I	High	nest Compensate	(E)	
	(A) Name and Title		(B) Average hours per week (list any hours for related	Position (do not check more than one box, unless person is both an officer and a director/trustee) Position (do not check more than one box, unless person is both an officer and a director/trustee) Reportable compensation compensation from the organization (W- organization (W								(F) Estimated amount of other compensation from the
			organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated emptovies	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
											_	
		otal		 n A .				▶				
<u>d</u> 1	Γotal ((add lines 1b and 1c)	<u> </u>					▶				
2		number of individuals (including portable compensation from the			e list	ed a	bove	e) who	rece	eived more than \$1	00,000	
												Yes. No
恒												
The o	<i>i</i> organiz	zation is not a private foundation	n because it is (For line:	s 1 th	roug	gh 1	2, che	ck or	nly one box)		
1		A church, convention of church	nes, or association	on of ch	urche	es de	scri	bed in	sect	tion 170(b)(1)(A)(i).	
2		A school described in section	170(b)(1)(A)(ii). (Att	ach S	Sche	dule	E (Foi	m 9	90 or 990-EZ))		
3		A hospital or a cooperative hos	spital service org	ganızatıd	on de	scrib	ed i	n sect	ion	170(b)(1)(A)(iii)		
4		A medical research organization name, city, and state	on operated in co	onjunctio	on wi	th a	hos	pital di	escri	bed in section 17 0	D(b)(1)(A)(iii). Ent	er the hospital's
5		An organization operated for the (b)(1)(A)(iv). (Complete Par		ollege o	r univ	versi	ty o	wned o	or op	perated by a govern	mental unit describe	ed in section 170
6		A federal, state, or local gover		nmental	unıt	desc	rıbe	d in se	ectio	on 170(b)(1)(A)(v).	
7		An organization that normally section 170(b)(1)(A)(vi).			art of	fits	supp	ort fro	m a	governmental unit	or from the general	public described in

Part \		<u> </u>	Pevenue									Page 9
Part	77	Check if Schedule		a recno	onse or note to ar	w line in th	ue Dart VIII					
		Check if Schedule	Contains	a respo	nise of flote to a	(/	A) evenue	Rela ex	(B) ated or empt action	(C) Unrelated business revenue	d s	(D) Revenue excluded from ax under sections
	1 -	Federated campaign		10				rev	/enue			512-514
at st				1a		-						
ran		Membership dues .		1b		-						
. G		Fundraising events		1c		-						
iffs ar /		d Related organization		1d		-						
m .6	•	Government grants (co	ntributions)	1e		_						
Sis	f	 All other contributions, and similar amounts no 	gıfts, grants, t ıncluded	1f								
outi her		above		11		-						
Contributions, Gifts, Grants and Other Similar Amounts	٩	Noncash contribution in lines 1a-1f \$	ns included									
Cor	h	Total.Add lines 1a-1f			•		0					
					Busine	ss Code						T
Program Service Revenue	2a	PROGRAM SERVICE REVE	ENUE			611710	1,3	06,740	1,306	5,740		
ا <u>چ</u>												
- L	b											
ž	d			_								
ε	e			_		+						
gra	f	All other program ser	vice revenue	:								
ě	g.	Total.Add lines 2a-2f			▶	1,306,740						
	3]	Investment income (in	cluding divid	lends, ı	nterest, and othe	ir						
		ımılar amounts)				<u> </u>	(
		Income from investme Royalties				▶						
	٠,		(ı) Rea		(II) Personal	-						
	6a	Gross rents	.,		. ,	\dashv						
		Less rental expenses				4						
	D	Less Tental expenses										
	c	Rental income or (loss)										
	d	Net rental income or	(loss)			_	(
			(ı) Securit		(II) Other							
	7a	Gross amount from sales of			. ,							
		assets other than inventory										
		·				_						
	b	other basis and										
	c	sales expenses Gain or (loss)				\dashv						
		Net gain or (loss)			•	\dashv	(
	8a	Gross income from fu	_									
Other Revenue		(not including \$ contributions reported		of								
र		See Part IV, line 18		. a								
۳		Less direct expenses		b								
hei		Net income or (loss) f Gross income from ga			ents •	_		1				
5	Ju	See Part IV, line 19										
	_			а								
		Less direct expenses		b			(
,		Net income or (loss) f Gross sales of invento		activit	ies >	_		1				
		returns and allowance										
				a								
		Less cost of goods so		b			(
-	С	Net income or (loss) f Miscellaneous I		invent	ory ► Business Code							
}	11		· · · · · · · · · · · · · · · · · · ·		Business code	\dashv						
	b				-							
	c											
	d	All other revenue .				_					$\overline{}$	
		Total. Add lines 11a-			>							
	12	Total revenue. See	Instructions				(1			\rightarrow	
			23. 3113	. •			1,306,740)	1,306,740			

Section 501	(c)(3) and 501(c)(4)	organizations must complete all columns	All other organizations must complete column (

	line in this Deat TV	•	olete column (A)	_
Check if Schedule O contains a response or note to any	line in this Part IX	(B)	(C)	<u> L</u>
not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	(D) Fundraisingexper
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	383,120	383,120		
Grants and other assistance to domestic individuals See Part IV, line 22	0			
Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	0			
Benefits paid to or for members	0			
Compensation of current officers, directors, trustees, and key employees	0			
Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
Other salaries and wages	655,564	655,564		
Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	0			
Other employee benefits	0			
Payroll taxes	85,742	85,742		
Fees for services (non-employees)				
Management	0			
Legal	0			
Accounting	6,125	6,125		
Lobbying	0			
Professional fundraising services See Part IV, line 17	0			
Investment management fees	0			

11

12

13

14

15

16

17

18

19

20

21

23

24

25

26

27

28

29

34

Liabilities 22 Page **11**

0

0

0

0 0

1,498

0

0

0

0

0

67.094

12.296

12,296

54.798

67.094

Form **990** (2017)

Check if Schedule O contains a response or note to any line in this Part IX

Less accumulated depreciation

Investments—publicly traded securities .

Intangible assets

Other assets See Part IV, line 11 .

Grants payable . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Unrestricted net assets

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

Total liabilities. Add lines 17 through 25 .

Total liabilities and net assets/fund balances

Investments—other securities See Part IV, line 11 .

Total assets.Add lines 1 through 15 (must equal line 34) .

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

complete lines 27 through 29, and lines 33 and 34.

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

Investments—program-related See Part IV, line 11

1	Cash-non-interest-bearing	83,401	1	65,596
2	Savings and temporary cash investments		2	0
3	Pledges and grants receivable, net		3	0
4	Accounts receivable net		4	0

(A)

Beginning of year

2.497

85.898

10c

11

12

13

14

15

16

17

18

19

20

21

22 23

24

25

26

27

28

29

34

9.681

9.681

76,217

85,898

Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part 5 II of Schedule L Loans and other receivables from other disqualified persons (as defined under

10b

section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) 6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L . Assets Notes and loans receivable, net . Inventories for sale or use . 8

9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 10a 6,242 basis Complete Part VI of Schedule D

4.744

Fund Balances Organizations that do not follow SFAS 117 (ASC 958), check here

and complete lines 30 through 34. Assets or 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building or equipment fund . . . 31 32 Retained earnings, endowment, accumulated income, or other funds 32 Net 76.217 54,798 33 Total net assets or fund balances 33

Form	990 (2017)		Page 12
Pai	t XI Reconcilliation of Net Assets		_
	Check if Schedule O contains a response or note to any line in this Part XI		🗆
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,306,740
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,328,159
3	Revenue less expenses Subtract line 2 from line 1	3	-21,419
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	76,217
5	Net unrealized gains (losses) on investments	5	
١	By the description of the second control of	<u></u>	
1			
1			
٠,			
· <u> </u>			
_			
•		T	
<u>. </u>	P		
	Ft. 1		
	— <u> </u>		
* *	grant and the state of the stat		1
,			
A record			

Additional Data

Software Version: 2017v2.2

Software ID: 17005038

EIN: 45-5376335

Form 990 (2017)

Name: DEDICATED TO LEARNING

Form 990, Part III, Line 4a: CONTRIBUTE REVENUES TO EDUCATIONAL PROGRAMS TO BENEFIT STUDENTS AND TEACHERS

efil	e GR	APHIC pri	nt - DO NOT PROCESS	As Filed Data -		DLN:	93493099002168
SCHEDULE A (Form 990 or 990EZ)			Complete if the org	janization is a secti 4947(a)(1) nonexei	s and Public Suppo on 501(c)(3) organization or mpt charitable trust.		2017
•		f the Treasury	I and the second	Schedule A (Form	90 or Form 990-EZ. 990 or 990-EZ) and its instru ov/form990.	ctions is at	Open to Public Inspection
Nam	e of t	_{nue Service} he organiza	ıtion	www.irs.yo	<u> </u>	Employer identi	
DEDIC	CATED	TO LEARNING				45-5376335	
	rt I				must complete this part.) S		
_	organiz		a private foundation because i	•		(A)(:)	
1		•	•		lescribed in section 170(b)(1)	(A)(I).	
2 3					edule E (Form 990 or 990-EZ))		
4		,	·	_	bed in section 170(b)(1)(A)(a hospital described in section 1	•	Enter the beental's
7	Ш		, and state		a nospital described in Section 1	./0(b)(1)(A)(III).	
5			ation operated for the benefit (iv). (Complete Part II)	of a college or univer	sity owned or operated by a gov	ernmental unit desc	cribed in section 170
6				governmental unit des	scribed in section 170(b)(1)(A)(v).	
7					support from a governmental u	nit or from the gen	eral public described in
8			70(b)(1)(A)(vi). (Complete l ity trust described in section	•	Complete Part II)		
9		An agrıcult	ural research organization des	cribed in 170(b)(1)((A)(ix) operated in conjunction he name, city, and state of the c		
10	✓	from activition investment 30, 1975	ties related to its exempt func income and unrelated busine See section 509(a)(2). (Con	tions—subject to cert ss taxable income (le nplete Part III)	of its support from contribution ain exceptions, and (2) no more as section 511 tax) from busines	than 331/3% of its ses acquired by the	support from gross
11		_		•	public safety See section 509		
13	1	, - ^ ~ <u>~ ~~~~</u> }	ption excepted and enerated	avaluation for the har	nafit of to naufound the firestions		the m
' 							
						Ä.	
	1	1	1 1				
	T	T EV.	MT				
1							
4	(E						
ــــ							
					,		
		7					

	Support Schedule for 0 (b)(1)(A)(ix)	_					
	(Complete only if you che III. If the organization fai						ity under Par
	Section A. Public Support	' '		, ,		,	
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	(or fiscal year beginning in) ► Gifts, grants, contributions, and		. ,	. ,		. ,	
-	membership fees received (Do not						
	include any "unusual grant ")						
2	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from						
•	line 4						
	Section B. Total Support						
	Calendar year	(a)2013	(b) 2014	(c)2015	(d)2016	(e) 2017	(f)Total
_	(or fiscal year beginning in) ▶		· ,	· · /	ļ ` <i>'</i>	ļ , ,	— `
7							
8	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties and						
	income from similar sources						
9	Net income from unrelated business						
Say-	<u>-</u>						
- (
, !							
U							
_	,						
_ 	ı 1						
星	<u> </u>						
ľ	*						
. *	14,						
	1111						

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	(or fiscal year beginning in) ► Gifts, grants, contributions, and	(-,	(-,	()	(-,	(-/	(-,
1	membership fees received (Do not						0
	include any "unusual grants")						
2	Gross receipts from admissions,						
	merchandise sold or services	050 000		4.450.654			
	performed, or facilities furnished in	953,902	1,083,246	1,153,651	1,168,206	1,306,740	5,665,745
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
_	are not an unrelated trade or						0
	business under section 513						U
4	Tax revenues levied for the						
_	organization's benefit and either						
	paid to or expended on its behalf						0
_	The confuse of a common on females.						
5	The value of services or facilities furnished by a governmental unit to						0
	the organization without charge						ŭ
6	Total. Add lines 1 through 5	953,902	1,083,246	1,153,651	1,168,206	1,306,740	5,665,745
7a	Amounts included on lines 1, 2, and						0
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of						0
	\$5,000 or 1% of the amount on line						Ü
	13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						5,665,745
	from line 6)						
	ection B. Total Support	T				<u> </u>	
	Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9		953,902	1,083,246	1,153,651	1,168,206	1,306,740	5,665,745
10a	Gross income from interest,	333,332	1,003,210	2,255,651	1,100,200	1,500,7 10	3,003,713
104	dividends, payments received on						0
	securities loans, rents, royalties and						U
	income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30,						0
	1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						0
	whether or not the business is regularly carried on						
12	_ T						
12	or loss from the sale of capital						0
	assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c,	953,902	1,083,246	1,153,651	1,168,206	1,306,740	5,665,745
	11, and 12) First five years. If the Form 990 is fo	r the organization	's first second th	urd fourth or fifth	tay year as a sec	tion 501(c)(3) ora	anization
14	<u>-</u>	i tile organization	is mist, second, th	ira, ioaren, or men	tax year as a sec	.cioii 301(c)(3) oig	
	check this box and stop here	Sunnort Perce	entage				
15	Public support percentage for 2017 (lin			column (f))		15	100 000 %
16	Public support percentage from 2016 S	. , ,		· //		16	100 000 70
	ection D. Computation of Invest					10	
17	Investment income percentage for 20:			ine 13. column (f))	17	0 %
1/	Investment meeting percentage for 20.			25, 551411111 (1)	,	17	0 70
	O1- 407 (200 00) 11 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7						

	describe the designation If historic and continuing relationship, explain	1	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2	
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination	3b	
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a	
b c	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support	4b	
1			
ी देश कर जा			
,			;
I)			

1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E					
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)		
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3	4				
5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6				
7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8				
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1				
а	Average monthly value of securities	1a				
b	Average monthly cash balances	1 b				
C	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
е	Discount claimed for blockage or other factors (explain in detail in Part VI)					
2	Acquisition indebtedness applicable to non-exempt use assets	2				
3	Subtract line 2 from line 1d	3				
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4				
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6	Multiply line 5 by 035	6				
7	Recoveries of prior-year distributions	7				
Ŷ.	Migimum Accot Amount Saddlina 7 to line (1)	_ o _				
ð-						
) desired						

Qualified set-aside amounts (prior IRS approval require					
Other distributions (describe in Part VI) See instructio	ns				
Total annual distributions. Add lines 1 through 6					
Distributions to attentive supported organizations to wh details in Part VI) See instructions	sive (provide				
Distributable amount for 2017 from Section C, line 6					
Line 8 amount divided by Line 9 amount					
Section E - Distribution Allocations (see instructions) (i) (ii) (iii)					
	Other distributions (describe in Part VI) See instruction Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to whole details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see	Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is respondetails in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see (i))	Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see instructions) Fycess Distributions Underdistributions		

details in Part VI) See instructions	Terraine organization is respons	sive (provide	
9 Distributable amount for 2017 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
а			
b From 2013			

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2017	Distributable Amount for 2017
Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			

Schedule A (Form 990 or 990-EZ) (2017)

i Carryover from 2012 not applied (see

j Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2017 from Section D, line 7

a Applied to underdistributions of prior years b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4 5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

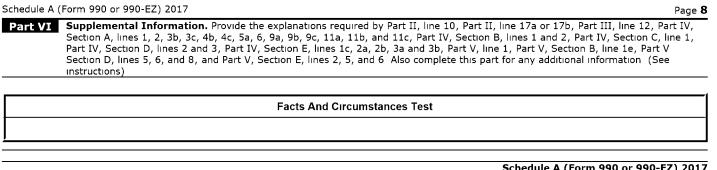
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2018. Add lines

a Excess from 2013. **b** Excess from 2014. c Excess from 2015. **d** Excess from 2016. e Excess from 2017.

instructions)

See instructions

3j and 4c 8 Breakdown of line 7



efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Supplemental Financial Statements ▶ Complete if the organization answered "Yes," on Form 990,

Open to Public

DLN: 93493099002168 OMB No 1545-0047

Department of the Treasury

(Form 990)

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Inspection Name of the organization **Employer identification number** DEDICATED TO LEARNING 45-5376335 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Cat No 52283D

Schedule D (Form 990) 2017

Pai	t IIII	Organizations Maintaining Col	lections of Art,	Histori	ical T	reası	ires, or	Other	<u>Similar A</u>	ssets	(continued)
3		the organization's acquisition, accession (check all that apply)	n, and other records	, check	any of	the fo	llowing t	hat are a	significant	use of it	s collection
а		Public exhibition		d		Loan	or excha	inge prog	rams		
b		Scholarly research		е		Othe	r				
c		Preservation for future generations									
4	Provide Part	de a description of the organization's col XIII	lections and explain	how the	ey furtl	her the	e organız	atıon's ex	empt purpo	ose in	
5		g the year, did the organization solicit o s to be sold to raise funds rather than to							ılar	□ Y	es 🗆 No
Pa	rt IV	Escrow and Custodial Arrange					_				
		Complete if the organization answ X, line 21.	vered "Yes" on Fo	rm 990	, Part	IV, li	ine 9, or	reporte	d an amoi	unt on	Form 990, Part
1a		e organization an agent, trustee, custodi ded on Form 990, Part X?	an or other intermed	diary for	contri	bution	s or othe	r assets ı	not	□ Y	es 🗆 No
b	If "Y∈	es," explain the arrangement in Part XIII	and complete the f	ollowing	table		[-	Amount	
С	Begin	nning balance					[1c			
d	Addıt	ions during the year					[1d			
е	Dıstrı	butions during the year					[1e			
f	Endın	ng balance					[1f			
2 a	Did th	he organization include an amount on Fo	orm 990, Part X, line	21, for	escrov	v or cu	ıstodıal a	ccount lia	bility?	□ Y	es 🗆 No
b	If "Ye	es," explain the arrangement in Part XIII	Check here if the e	explanat	ion has	s been	provided	l ın Part)	«III		
Pa	art V	Endowment Funds. Complete If	the organization	answer	ed "Y	es" oı	n Form 9	990, Par	t IV, line :	10.	
			(a)Current year	(b) P	rıor yea	ır	(c)Two ye	ars back	(d)Three ye	ars back	(e)Four years back
1a	Beginn	ing of year balance				_					
b	Contrib	outions									
С	Net inv	estment earnings, gains, and losses									
d	Grants	or scholarships									
	and pr	expenditures for facilities ograms									
f	Admını	strative expenses									
g	End of	year balance									
2	Provid	de the estimated percentage of the curre	ent year end balance	e (line 1	g, colu	mn (a)) held as	5			
а	Board	d designated or quasi-endowment 🕨									
b	Perm	anent endowment 🟲									
С	Temp	orarily restricted endowment >									
	The p	percentages on lines 2a, 2b, and 2c shou	ild equal 100%								
За		here endowment funds not in the posses nization by	ssion of the organiza	ition tha	t are h	eld an	ıd admını	stered fo	r the		Yes No
	-	nrelated organizations								3	a(i)
		elated organizations									a(ii)
b		es" on 3a(II), are the related organization		on Sche	dule R	? .				.	3b
4	Descr	ribe in Part XIII the intended uses of the	organization's endo	wment	funds						<u> </u>
Pa	rt VI	Land, Buildings, and Equipme									
		Complete if the organization answ								art X, lı	
	Descri	ption of property (a) Cost or oth (investme		t or other	basis (otner)	(c) Acci	imulated d	epreciation		(d) Book value
1a	Land										
b	Buildin	gs									
c	Leaseh	nold improvements									
d	Equipm	nent				6,242			4,744		1,498
e	Other										
Tot	al. Add	lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, colui	mn (B)	, line .	10(c)).		>		1,498

Part VII Investments—Other Securities. Complete if the or See Form 990, Part X, line 12.	rganızatıon	answere	d "Yes" on Form 9	90, Part IV, line 11b.
(a) Description of security or category (including name of security)	В	(b) ook alue		od of valuation of-year market value
1) Financial derivatives 2) Closely-held equity interests 3)Other				
A)				
В)				
C)				
D)				
E)				
F)				
G)				
H)				
otal. (Column (b) must equal Form 990, Part X, col (B) line 12)	•			
Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form	n 990, Part	IV, line 1	1c. See Form 990	, Part X, line 13.
(a) Description of investment	(b) Book		(c) Meth	od of valuation of-year market value
1)				, , , , , , , , , , , , , , , , , , ,
2)				
3)				
4)				
5)				
6)				
7)				
8)				
9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	•			
Part IX Other Assets. Complete if the organization answered 'Yes (a) Description	s' on Form 9	90, Part IV	, line 11d See Form	990, Part X, line 15 (b) Book value
1)				
2)				
3)				
4)				
5)				
6)				
7)				
8)				
9)				
otal. (Column (b) must equal Form 990, Part X, col (B) line 15)				. •
Other Liabilities. Complete if the organization answers See Form 990, Part X, line 25.	ered 'Yes'	on Form 9	990, Part IV, line 1	l1e or 11f.
. (a) Description of liability 1) Federal income taxes		(b) Book v	/alue	
PAYROLL TAXES			12,293	
ounding 3)			3	
4)				
5)				
6)				
7)				
8)				
9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. Liability for uncertain tax positions In Part XIII, provide the text of the	•		12,296	

1

2

Total revenue, gains, and other support per audited financial statements . . .

Amounts included on line 1 but not on Form 990. Part VIII, line 12

Schedule D (Form 990) 2017

1

Page 4

_		, , , ,			
а	Net unrealized gains (losses) on in	vestments	2a		
b	Donated services and use of faciliti	ies	2b		
С	Recoveries of prior year grants .		2c		
d	Other (Describe in Part XIII) .		2d		
е	Add lines 2a through 2d			. 2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Pa	art VIII, line 12, but not on line 1			
а	Investment expenses not included	on Form 990, Part VIII, line 7b .	4a		
b	Other (Describe in Part XIII) .		4b		
С	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c.	(This must equal Form 990, Part I, line 12)		5	
Par		enses per Audited Financial Statem		per Return	1.
		ation answered 'Yes' on Form 990, Part			
1	Total expenses and losses per audi	ited financial statements		1	
2	Amounts included on line 1 but not	t on Form 990, Part IX, line 25			
а	Donated services and use of faciliti	es	2a		
b	Prior year adjustments		2b		
C	Other losses		2c		
d	Other (Describe in Part XIII) .		2d		
е	Add lines 2a through 2d			2e	1
3	Subtract line $\mathbf{2e}$ from line 1			3	
4	Amounts included on Form 990, Pa	art IX, line 25, but not on line 1:			
а	Investment expenses not included	on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII) .		4b		
c	Add lines 4a and 4b			4c	
5	Total expenses Add lines 3 and 40	c. (This must equal Form 990, Part I, line 18)	5	
Pai	t XIII Supplemental Infor	mation			
		rt II, lines 3, 5, and 9, Part III, lines 1a and			4, Part X, line 2, Part
ΧI,	lines 2d and 4b, and Part XII, lines 2	2d and 4b Also complete this part to provide	any additional informati	on	
	Return Reference	Explanation			

Schedule D (Fo	orm 990) 2017	Page 5	
Part XIII	Supplemental Info		
Return Reference		Explanation	
			Schedule D (Form 990) 2017

Grants and Other Assistance to Organizations, Governments and Individuals in the United States Complete if the organization anewered "Yes," on Form 990, Part IV, line 21 or 22. PARTAI General Information on Grants and Assistance Implication and Information on Grants and Assistance Implication and Information on Grants and Assistance Implication and Information on Grants and Assistance Implication and Information on Grants and Assistance Implication and Information on Grants and Assistance Implication Information In	efile GRAPHIC pri	nt - DO	NOT PROCESS	As Filed Data -					DLI	N: 934930990	02168
Canal Companies of the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? No	Schedule I (Form 990) Department of the Treasury Internal Revenue Service	Grants and Other Assistance to Organizations, Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. ► Attach to Form 990. Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990 .							0	2017 Open to Public	
Part II General Information on Grants and Assistance 10 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	Name of the organization	NG								ation number	_
Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and reserved the grants or assistance? Describe me Part IV the organization productor's productor's productor's productory is productory and that received more than \$5,000. Part II can be duplicated if additional space is needed (a) Name and address of organization or government (b) EIN (c) IRC section (if applicable) (d) Amount of feash grant assistance organization or government (c) Amount of assistance organization or government (b) EIN (c) IRC section (if applicable) (d) Amount of feash grant gr	Part I General	Inform	ation on Grants	and Assistance				45	-5376335		
(a) Name and address of organization or government (b) EIN (c) IRC section (ff applicable) (d) Amount of cash organization or government (book, FMV, appraisal, other) (look, FMV, appraisal, other) (h) Purpose of grant or assistance or assistance of grant or assistance	the selection crite Describe in Part I'	eria used t IV the org	to award the grants anızatıon's proceduı	or assistance? res for monitoring the u	se of grant funds in the U	nited States			0, Part IV, line		
2)	(a) Name and addre organization	ess of		(c) IRC section	(d) Amount of cash	cash	(book, FMV, appraisal,				f grant
3)	(1) See Addıtıonal Data	ı									
4)	(2)										
5) 6) 7) 8) 9) 10)	(3)										
6)	(4)										
7)	(5)										
8)	(6)										
9) 10)	(7)										
10)	(8)										
	(9)										
11)	(10)										
	(11)										
12)	(12)										
	3 Enter total number	er of othe	r organizations liste	d in the line 1 table.							0

Schedule I (Form 990) 2017						Page 2
Part III Grants and Other As			als. Complete if the org	janization answered "Yes	on Form 990, Part IV, line 22	
(a) Type of grant or assist		(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
Part IV Supplemental	Information	n. Provide the inf	ormation required in	Part I, line 2; Part III	, column (b); and any other ac	lditional information.
Return Reference	Explanation	on				
Grantmaker's Description of How Grants are Used	ORGANIZAT	TION'S MANAGEMENT	MONITOR THE GRANT	ELIGIBILITY AND CALCU	ILATIONS	

Additional Data

(a) Name and address of

CHAPARREL MIDDLE SCHOOL

1405 S SPRUCE TREE DR

21400 E PATHFINDER RD

DIAMOND BAR H S

WALNUT, CA 91765

DIAMOND BAR, CA 91765

(b) FIN

95-6003446

95-6003446

Software ID: 17005038 **Software Version:** 2017v2.2 **EIN:** 45-5376335 Name: DEDICATED TO LEARNING

Form 990, Schedule I, Part II	Grants and Other Assistance to	Domestic Organizations and I	Domestic Governments.

organization	(-,	ıf applıcable	grant	cash	(book, FMV, appraisal,	l
or government		, ,		assistance	other)	

(c) IRC section

organization	(5) 2111	if applicable	grant	cash	(book, FMV, appraisal,	ı
or government			3	assistance	other)	ĺ
_					·	ı
						Ĺ

61,050

22,600

Domestic Organizations and Domestic Governments.							
(d) Amount of cash	(e) Amount of non-	(f) Method of valuation	Γ				

or assistance

(h) Purpose of grant

(g) Description of

non-cash assistance

FUND PUBLIC **EDUCATIONAL**

PROGRAMS

PROGRAMS

FUND PUBLIC

EDUCATIONAL

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 26-0820637 15.000 FUND PUBLIC FRIENDS OF YIMBO

22,000

IEDUCATIONAL

FUND PUBLIC

PROGRAMS

PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1715 YERMO PLACE

FROSTIG CENTER

971 N ALTADENA PASADENA, CA 91107

FULLERTON, CA 92833

95-2098575

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 95-6003446 16.050 FUND PUBLIC SOUTH POINTE MIDDLE SCHOOL **IEDUCATIONAL**

IEDUCATIONAL

PROGRAMS

20671 LARKSTONE DRIVE PROGRAMS WALNUT, CA 91789 SUZANNE MIDDLE SCHOOL 95-6003446 17.500 FUND PUBLIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

525 SUZANNE ROAD

WALNUT, CA 91789

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance D PUBLIC

FDUCATIONAL

PROGRAMS

VEYAR ELEMENTARY SCHOOL 20222 VEYAR WALNUT, CA 91789	95-6003446	25,050	0		FUND PUBLIC EDUCATIONAL PROGRAMS
WALNUT HIGH SCHOOL	95-6003446	33,200	0		FUND PUBLIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

400 N PIERRE ROAD WALNUT, CA 91789

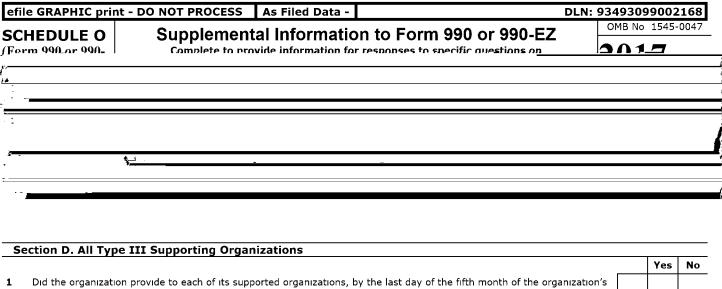
(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable arant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

PROGRAMS

WALNUT VALLEY USD 95-6003446 141,485 0 FUND PUBLIC 880 LEMON AVENUE EDUCATIONAL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

WALNUT, CA 91789



Return Reference Explanation

Form 990. NO DOCUMENTS AVAILABLE TO THE PUBLIC

990 Schedule O, Supplemental Information

Form 990, Part VI, Line
19 Other
Organization
Documents
Publicly
Available