DLN: 93493298005258 OMB No 1545-0047 Return of Organization Exempt From Income Tax

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

Form 990	
% J	

Department of the Treasur Internal Revenue Service

foundations) ▶ 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 A For the 2017 calendar year, or tax year beginning 04-01-2017 , and ending 03-31-2018 C Name of organization PORTLAND REGIONAL EDUCATIONAL D Employer identification number B Check if applicable \square Address change TELECOMMUNICATIONS CORPORATION ☐ Name change Doing business as VOQAL PORTLAND ☐ Initial return ☐ Final return/terminate E Telephone number ☐ Amended return Number and street (or P O box if mail is not delivered to street address) Room/suite ☐ Application pending (303) 532-2852 City or town, state or province, country, and ZIP or foreign postal code BOULDER, CO $\,$ 803066060 $\,$ **G** Gross receipts \$ 1,763,255 Name and address of principal officer H(a) Is this a group return for JOHN SCHWARTZ ☐Yes **☑**No subordinates? PO BOX 6060 **H(b)** Are all subordinates BOULDER, CO 803066060 ☐ Yes ☐No ıncluded? Tax-exempt status 501(c)(3) **✓** 501(c) (4) **◄** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) Website: ► WWW PRETC ORG **H(c)** Group exemption number ▶ L Year of formation 1983 M State of legal domicile OR Part I Summary 1 Briefly describe the organization's mission or most significant activities THE CORPORATION IS ORGANIZED AND WILL BE OPERATED EXCLUSIVELY FOR "CHARITABLE, SCIENTIFIC AND EDUCATION- AND "SOCIAL WELFARE" PURPOSES WITHIN THE MEANING OF SECTIONS 501(C)(3) AND 501(C)(4), RESPECTIVELY, OR THE INTERNAL REVENUE CODE TO THIS END, THE NONPROFIT SHALL UNDERTAKE ACTIVITIES TO SUPPORT THE PROVISION OF QUALITY AND DIVERSE INSTRUCTIONAL MEDIA CONTENT AND CAPABILITIES TO EDUCATORS AND STUDENTS, INCLUDING, BUT NOT LIMITED TO, DATA SERVICES AND INSTRUCTIONAL VIDEO PROVIDED TO ACCREDITED EDUCATIONAL INSTITUTIONS AND GOVERNMENTAL ORGANIZATIONS ENGAGED IN THE FORMAL EDUCATION OF ENROLLED STUDENTS, FOSTER OPEN, HONEST AND OUTSPOKEN MEDIA THAT HELP USERS TO BE A POPULAR DEMOCRATIC CHECK ON BOTH GOVERNMENT POWER AND CONCENTRATED PRIVATE PRIVILEGE, EXPAND THE DISSEMINATION OF MEDIA, AND POINTS OF VIEW CARRIED BY THEM, THAT OFFER DISSENTING, ALTERNATIVE, OR CRITICALLY CONSTRUCTIVE INFORMATION AND CONCEPTS TO THE MARKETPLACE OF IDEAS IN BOTH LOCAL AND GLOBAL CONTEXTS, ENGAGE IN Activities & Governance ADDITI Check this box $\blacktriangleright \Box$ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . Number of independent voting members of the governing body (Part VI, line 1b) 3 4 5 0 Total number of individuals employed in calendar year 2017 (Part V, line 2a) Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12 . 7a -6,115 7b Net unrelated business taxable income from Form 990-T, line 34 -6,115 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . Program service revenue (Part VIII, line 2g) . 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 690,623 190,775 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 393,698 416.173 1,084,321 606,948 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . 88,000 114,500 14 Benefits paid to or for members (Part IX, column (A), line 4) . 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0 0 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . 288,609 276,512 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 376,609 391,012 19 Revenue less expenses Subtract line 18 from line 12 . 707,712 215,936 Assets or d Balances Beginning of Current Year **End of Year** 4,509,555 4,782,242 20 Total assets (Part X, line 16) . 68,943 21 Total liabilities (Part X, line 26) . 63,510 Net assets or fund balances Subtract line 21 from line 20 4,446,045 4,713,299 Signature Block

Sign

Signature of officer

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

	Туре	or print name and title Print/Type preparer's name	Preparer's signature	Date	Check 🗆
Paid		ROBERT E FABRY CPA	ROBERT E FABRY CPA	2018-10-18	self-emplo

Paid	Print/Type preparer's name ROBERT E FABRY CPA	Preparer's signature ROBERT E FABRY CPA	Date 2018-10-18	Check I if self-employed	PTIN P00757821			
Preparer	Firm's name ► WIPFLI LLP	Firm's name ► WIPFLI LLP						
Use Only	Firm's address ► 7887 E BELLEVIE\	Phone no (303) 759-0089					
,	ENGLEWOOD, CO							

2018-10-18

Date

Form	990 (2017)					Page 2				
Par	t IIII Statem	ent of Program Service	Accomplis	hments						
	Check If	Schedule O contains a respor	se or note to a	any line in this Part III		🗹				
1	Briefly describe	the organization's mission								
WELF END, AND TO A STUE POW DISS	FARE" PURPOSES THE NONPROFIT CAPABILITIES TO CCREDITED EDUG DENTS, FOSTER O ER AND CONCEN' ENTING, ALTERN	WITHIN THE MEANING OF SI SHALL UNDERTAKE ACTIVIT DEDUCATORS AND STUDENT CATIONAL INSTITUTIONS AN PPEN, HONEST AND OUTSPOK TRATED PRIVATE PRIVILEGE,	ECTIONS 501(C LES TO SUPPO S, INCLUDING O GOVERNMEN LEN MEDIA THA EXPAND THE	C)(3) AND 501(C)(4), F DRT THE PROVISION O , BUT NOT LIMITED TO , TALL ORGANIZATIONS AT HELP USERS TO BE DISSEMINATION OF MI	TABLE, SCIENTIFIC AND EDUCATION RESPECTIVELY, OR THE INTERNAL R F QUALITY AND DIVERSE INSTRUCT , DATA SERVICES AND INSTRUCTIO ENGAGED IN THE FORMAL EDUCATI A POPULAR DEMOCRATIC CHECK OF EDIA, AND POINTS OF VIEW CARRIE EPTS TO THE MARKETPLACE OF IDE	EVENUE CODE TO THIS IONAL MEDIA CONTENT NAL VIDEO PROVIDED ON OF ENROLLED N BOTH GOVERNMENT D BY THEM, THAT OFFER				
	Did the organiza	ation undertake any significar	t program ser	vices during the year w	which were not listed on					
_	-	990 or 990-EZ?	t program ser	vices during the year w	mich were not iisted on	☐ Yes ☑ No				
	•	e these new services on Sch	dule O							
3	Did the organization cease conducting, or make significant changes in how it conducts, any program									
	services? .					🗌 Yes 🗹 No				
	If "Yes," describ	e these changes on Schedule	0							
4	Section 501(c)(is are required	to report the amount	largest program services, as measu of grants and allocations to others, t					
4a	(Code) (Expenses \$	12,506	including grants of \$	3,000) (Revenue \$)				
	See Additional Da					, 				
4b	(Code) (Expenses \$	129,921	ıncludıng grants of \$	111,500) (Revenue \$)				
	See Additional Date	ta								
4c	(Code See Additional Da) (Expenses \$ ta		including grants of \$) (Revenue \$)				
4d		services (Describe in Schedul	•			,				
	(Expenses \$		ding grants of	<u> </u>) (Revenue \$)				
4e	Total program	service expenses 🟲	142,4	27						

or X as applicable

Section 501(c)(3) organizations.

Page 3

No

Νo

Νo

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No

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Νo

Nο

No

Nο

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Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

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

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

ın Part X, line 16? *If "Yes," complete Schedule D, Part IX* 😼

b Was the organization included in consolidated, independent audited financial statements for the tax year?

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

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

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

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

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . .

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

Did the organization receive or hold a conservation easement, including easements to preserve open space,

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?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🥞

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

assessments, or similar amounts as defined in Revenue Procedure 98-19?

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11a

11b

11c

11d

11e

11f

12a

12b

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14a

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Yes

No

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25b

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28a

28b

28c

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35a

35b

36

37

Yes

Yes

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Yes

Par	Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	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? If "Yes," complete Schedule J	23	Yes	
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		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.			

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?

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

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?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . 🔀 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

instructions for applicable filing thresholds, conditions, and exceptions)

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or 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 8			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
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]		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
3-3	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 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
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	30		
та	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)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
		30		
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?	6a		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 service provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b		
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		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
	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		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	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	1		
	Section 501(c)(12) organizations. Enter	1		
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for			
b	additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in	13a		
	which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

orm '	990 (2017)			Page 6
Part	8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	·	nse to li	
C = .	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		✓
Sec	ction A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 4		163	110
	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
	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	Yes	
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
	Did the organization have members or stockholders?	6		No
	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	Yes	
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
	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?	8 b		No
	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
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	<u>e Code</u>		
			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	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
	Did the organization have a written whistleblower policy?	13		No
	Did the organization have a written document retention and destruction policy?	14		No
	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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
L6a	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
	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		
Sec	ction C. Disclosure			
	List the States with which a copy of this Form 990 is required to be filed▶			
L8	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)			
L9	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			
	State the name, address, and telephone number of the person who possesses the organization's books and records ▶BECKY SCHOTT 825 DELAWARE AVE SUITE 500 LONGMONT, CO 80501 (303) 532-2852			
			arm 00	n /2017\

Form 990 (2017) Part VII 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 compensated employees, and former such persons

L Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (A) (B) (D) (F) (C) (E) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless person amount of other compensation compensation week (list is both an officer and a from the from related compensation director/trustee) organizations any hours organization from the for related (W- 2/1099-(W- 2/1099organization and Highest employ individual to or director organizations MISC) MISC) related Institutional below dotted organizations emplo nest compensated line) Ø. trustee P Trustee 4 50 (1) JOHN SCHWARTZ 164,368 39,142 DIRECTOR & P 45 50 1 00 (2) ALICE ELLIS GAUT Х 0 0 DIRECTOR & E 2 50 (3) CHARLES MARR Х 0 0 0 Х DIRECTOR 2.50 (4) THOM HARTMANN 0 Ω Χ DIRECTOR 3 50 (5) ADAM MILLER Х 127,874 27,310 COO/SECRETAR 47.50 6 00 (6) PATRICIA DWYER Х O 92,847 12,115 CFO (THRU 9/ 44 00 2 00 (7) BARBARA HUNTER Х 37,598 13,661 CFO (HIRED 8 48 00

Form 990 (2017) Page 8 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F) (A) (B) (C) (D) (E)

Name and Title	Average hours per week (list any hours		ne b	ox, u n off	t che inles ficer	s pers	on		Reportable compensation from related organizations (W-	Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated emptoxies	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
1b Sub-Total	art VII, Sectio	nΑ.				*			422,687	92,228
Total number of individuals (including of reportable compensation from the	but not limited				bove	e) who	rece	eived more than \$10	00,000	

d	Total (add lines 1b and 1c)	7		
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶			
			Yes	
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on			

			Yes	No				
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3		No				
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes					
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No				
Se	Section B. Independent Contractors							
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of com	pensa	ition	·				

from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) (B) Name and business address Description of services

(C) Compensation EBS SUPPORT SERVICES, MGMT SUPPORT 183,583 POBOX 6060 BOULDER, CO 80306

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 1

	90 (2017)							Page 9
Part \								
	Check if Schedul	le O contains a r	esponse or r	note to any	Ine in this Part VII (A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1a Federated campaig	ns	1a			revenue		512-514
Contributions, Gifts, Grants and Other Similar Amounts	b Membership dues		1b					
Gra not	c Fundraising events	[1c	-				
ts. FA	d Related organizatio	ons	1d					
Gif	e Government grants (co	ontributions)	1e					
ns, Sim	f All other contributions	, gifts, grants,						
utio	and similar amounts n above	ot included	1f					
를 돌	g Noncash contribution	ons included						
no pu	in lines 1a-1f \$ h Total.Add lines 1a-1	If	_	•				
I					Code			
JE .	2a			Business				
- F								
<u>-</u>	ь —							
Ž.	d							
E	е ———							
Program Service Revenue	f All other program se	rvice revenue				I		
\$	gTotal. Add lines 2a-2f	f	>					
	3 Investment income (ii similar amounts) .			and other	167,34	13		167,343
	4 Income from investme			eeds 🕨				
	5 Royalties			. ▶	465,72	25		465,725
	C- Curre weath	(ı) Real	(11) F	Personal	_			
	6a Gross rents							
	b Less rental expenses							
	c Rental income or				_			
	(loss)							
	d Net rental income o	(i) Securitie		Other				
	7a Gross amount			Other	-			
	from sales of assets other	1,179	,739					
	than inventory							
	b Less cost or other basis and	1,156	,307					
	sales expenses C Gain or (loss)	23	,432		_			
	d Net gain or (loss)		<u> </u>	•	23,43	23,4	32	
	8a Gross income from fi		I .					
nue	contributions reporte							
e v	See Part IV, line 18		а					
ğ	b Less direct expensec Net income or (loss)		b		J			
Other Revenue	9a Gross income from g			• •				
0	See Part IV, line 19		J					
	b Less direct expense		a b		-			
	c Net income or (loss)			. •	_			
	10aGross sales of invent			-				
	returns and allowand	ces	 a					
	b Less cost of goods s	sold	ь					
	c Net income or (loss)	from sales of in	ventory .	. •				
	Miscellaneous	Revenue	Busin	ess Code				
	11aOTHER REVENUE			900099	, 	71		71
	L-			E12000		50	60	
	b K-1 FREE SPEECH M	IEDIA, LLC		512000	-6	-1	60	
	C V 1 EDC CURRERT	EDVICES 11.5		561000	-6,11	15	-6,1	15
	C K-1 EBS SUPPORT S	DERVICES, LLC		501000	-0,11		-0,1	
	d All other revenue .		+		-43,44	18 -43,4	48	+
	e Total. Add lines 11a			>	<u> </u>	<u>'</u>		
	12 Total revenue. See	Instructions .			-49,55			+
					606,94	-20,0	76 -6,1	15 633,139

orm 990 (2017)				Page 10
Part IX Statement of Functional Expenses section 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	ınızatıons must comp	lete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX			<u> </u>
Do not include amounts reported on lines 6b, 'b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	114,500	114,500		
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management	183,583	16,389	167,194	
b Legal	35,240		35,240	
c Accounting	2,500		2,500	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	14,549		14,549	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion				
13 Office expenses	4	4		
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	5,154	24	5,130	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	4,120		4,120	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a ROYALTY EXPENSE	18,200		18,200	
b FELLOWSHIP REIMBURSEMENTS	9,900	9,900		
c DUES AND SUBSCRIPTIONS	1,989	1,610	379	
d LICENSE, PERMITS AND FEES	1,273		1,273	
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	391,012	142,427	248,585	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

educational campaign and fundraising solicitation
Check here ► ☐ if following SOP 98-2 (ASC 958-720) Form **990** (2017)

32

33

34

Net

End of year

32

33

34

4,713,299

4.782.242

Form **990** (2017)

4,446,045

4.509.555

Page **11**

202

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

		2099 01 700.		
1	Cash-non-interest-bearing	241,608	1	498,468
2	Savings and temporary cash investments	513,032	2	481,800
3	Pledges and grants receivable, net		3	

Beginning of year

4 Accounts receivable, net 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

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 basis Complete Part VI of Schedule D b Less accumulated depreciation 10b 10c 3.070.351 11 Investments—publicly traded securities . 11 Investments—other securities See Part IV, line 11 . 12 12 684.564 13 13 Investments—program-related See Part IV, line 11 14 14 Intangible assets 15

3.145.462 656,310 15 Other assets See Part IV, line 11 . 4,509,555 4.782.242 16 **Total assets.**Add lines 1 through 15 (must equal line 34) . . . 16 17 Accounts payable and accrued expenses 26,235 17 18 18 Grants payable . . . 19 37,275 19 Deferred revenue . . .

20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

31,668 37,275 Liabilities persons Complete Part II of Schedule L . 22 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties . Other liabilities (including federal income tax, payables to related third parties, 25 25 and other liabilities not included on lines 17-24)

Complete Part X of Schedule D

63,510 26 Total liabilities. Add lines 17 through 25 . 26 68,943 Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

complete lines 27 through 29, and lines 33 and 34. 4.446.045 27 27 Unrestricted net assets

Fund Balances 4.713.299 28 28 Temporarily restricted net assets 29 29 Permanently restricted net assets

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

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

☐ Both consolidated and separate basis

2c

3a

3b

No

Form 990 (2017)

Separate basis

Audit Act and OMB Circular A-133?

Consolidated basis

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

Additional Data

Software ID:

Software Version:

EIN: 84-1360071

Form 990 (2017)

Name: PORTLAND REGIONAL EDUCATIONAL

TELECOMMUNICATIONS CORPORATION

THE ORGANIZATION PROVIDES FREE OR LOW COST WIRELESS INTERNET (AS DESCRIBED IN SCHEDULE O) VOQAL'S EDUCATION VENTURE FUND SEEKS TO REDUCE

Form 990, Part III, Line 4a:

OPPORTUNITY GAPS IN EDUCATION BY LOCATING AND FUNDING TECHNOLOGY START-UPS WITH IDEAS TO REDUCE GAPS

Form 990, Part III, Line 4b: GRANTS IN SUPPORT OF THE ORGANIZATION'S PHILANTHROPIC VALUES

Form 990, Part III, Line 4c: THE ORGANIZATION PROVIDED DATA SERVICES TO EDUCATIONAL AND NON PROFIT ENTITIES THROUGH ITS INVESTMENT IN MOBILE CITIZEN, LLC. THE PROGRAM REVENUE AND EXPENSES FLOWING THROUGH TO THE ORGANIZATION FROM MOBILE CITIZEN SCHEDULE K-1 WERE 177,433 AND 220,881 RESPECTIVELY, NETTING TO A

LOSS OF (43,448)

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Supplemental Financial Statements

Complete if the organization answered "Yes," on Form 990,
 Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
 ► Attach to Form 990.

2017

DLN: 93493298005258

Department of the Treasury Internal Revenue Service

(Form 990)

Information about Schedule D (Form 990) and its instructions is at <u>www.irs.gov/form990</u>.

Open to Public Inspection

	TLAND REGIONAL EDUCATIONAL				Employer luc	entification number
	ECOMMUNICATIONS CORPORATION				84-1360071	
Pa	rt I Organizations Maintaining Donor Advi	sed Funds or O	ther	Similar Funds o	r Accounts.	
	Complete if the organization answered "Ye					
		(a) Dono	r advi:	sed funds	(b)Fund	s and other accounts
	Total number at end of year					
	Aggregate value of contributions to (during year)					
i	Aggregate value of grants from (during year)					
	Aggregate value at end of year					
;	Did the organization inform all donors and donor advisconganization's property, subject to the organization's ex Did the organization inform all grantees, donors, and do	clusive legal contro	ol?			🗌 Yes 🗌 No
,	charitable purposes and not for the benefit of the donor private benefit?					
Pa	rt III Conservation Easements. Complete if the	ne organization a	nswe	ed "Yes" on Forr	n 990, Part IV	, line 7.
	Purpose(s) of conservation easements held by the orga	nızatıon (check all	that ap	ply)		
	\square Preservation of land for public use (e g , recreatio	n or education)		Preservation of an	historically imp	ortant land area
	Protection of natural habitat			Preservation of a d	ertified historic	structure
	Preservation of open space					
!	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservat	ion co	ntribution in the for		ation at the End of the Year
а	Total number of conservation easements				2a	it the End of the real
b	Total acreage restricted by conservation easements				2b	
c	Number of conservation easements on a certified histori	ıc structure ınclude	d ın (a	1	2c	
d	Number of conservation easements included in (c) acqu structure listed in the National Register		•		2d	
1	Number of conservation easements modified, transferred tax year ▶	ed, released, exting	uished	, or terminated by	the organizatior	n during the
	Number of states where property subject to conservation	on easement is loca	ted ▶			
	Does the organization have a written policy regarding t and enforcement of the conservation easements it hold		ing, in	spection, handling	of violations,	☐ Yes ☐ No
,	Staff and volunteer hours devoted to monitoring, inspec	cting, handling of v	iolatioi	ns, and enforcing co	onservation ease	ements during the year
	Amount of expenses incurred in monitoring, inspecting, \$ \\$	handling of violation	ons, ar	d enforcing conser	vation easemen	ts during the year
;	Does each conservation easement reported on line 2(d) and section 170(h)(4)(B)(ii)?	above satisfy the	require	ments of section 1	70(h)(4)(B)(ı)	
1	· / / / /		- ال. سريم	may/amila === d =		∐ Yes ∐ No
ı	In Part XIII, describe how the organization reports cons balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemer	footnote to the or				
ar	Organizations Maintaining Collections Complete of the organization answered "Yes				er Similar As	ssets.
a	If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its final	public exhibition, e	ducati	on, or research in f		
b	If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for pub following amounts relating to these items					
(i) Revenue included on Form 990, Part VIII, line 1				▶ \$	
(i	i)Assets included in Form 990, Part X				▶ \$	
:	If the organization received or held works of art, historic following amounts required to be reported under SFAS				ncıal gaın, provi	de the
а	Revenue included on Form 990, Part VIII, line 1	, , , ,			▶ \$	
b	Assets included in Form 990, Part X				· —	
<u> </u>	7.55555 Meladed III Torrill 550, Tale A					

Par		Organizations Maintai	ning Collection	ons of Art,	, Histori	ical T	reas	ures, or	Other	Similar	· Assets (contin	ued)	
3		the organization's acquisition (check all that apply)	, accession, and	other record	ds, check	any of	the f	ollowing t	hat are	a significa	nt use of it	s colle	ction	
а		Public exhibition			d		Loar	n or excha	ange pro	grams				
b		Scholarly research			e		Othe	er						
c		Preservation for future gener	ations											
4	Provide Part	de a description of the organiz KIII	ation's collection	s and explai	ın how th	ey furtl	her th	ne organız	ation's e	exempt pu	irpose in			
5		g the year, did the organizations to be sold to raise funds rati								mılar	□ Y	es	□ N-	0
Pai	rt IV	Escrow and Custodial Complete if the organiza X, line 21.			orm 990), Part	IV,	line 9, or	report	ed an an	nount on	Form	990,	Part
1a		e organization an agent, truste ded on Form 990, Part X?	ee, custodian or o	other Interm	edıary for	contri	butio	ns or othe	er assets	not	□ Y	es	□ N	0
ь	If "Ye	es," explain the arrangement i	n Part XIII and c	omplete the	following	table					Amount			_
С	Begin	ning balance							1c					
d	Addıt	ions during the year							1d					
е	Dıstrı	butions during the year							1e					
f	Endın	ig balance							1 f					_
2 a	Dıd tl	ne organization include an am	ount on Form 99	0, Part X, lır	ne 21, for	escrov	v or c	ustodial a	ccount l	iability?	□ Y	es	□ N	0
b	If "Ye	s," explain the arrangement i	n Part XIII Chec	k here if the	explanat	ion has	s beer	n provided	d in Part	XIII				
Pa	rt V	Endowment Funds. Co	mplete if the c	rganızatıor	n answei	red "Y	es" c	n Form	990, Pa	ırt IV, lın	e 10.			
			(a)	Current year	(b)P	rıor yea	ır	(c)Two ye	ears back	(d)Three	years back	(e) Fo	ur year	s back_
	_	ing of year balance												
		outions												
		estment earnings, gains, and	losses											
		or scholarships												
е		expenditures for facilities ograms												
		strative expenses												
g	End of	year balance												
2		de the estimated percentage o	•	ar end balan	ce (line 1	g, colu	mn (a	a)) held a	s					
а		d designated or quasi-endowm	nent 🟲											
b		anent endowment 🟲												
c	Temp	orarily restricted endowment	>											
_		percentages on lines 2a, 2b, ar												
3а		here endowment funds not in nization by	the possession o	t the organiz	zation tha	t are h	eld ai	nd admini	stered f	or the		Г	Yes	No
	-	nrelated organizations									3	a(i)	103	
	(ii) r	elated organizations									3	a(ii)		
b		es" on 3a(II), are the related o	-				? .					3b		
4	Descr	ribe in Part XIII the intended i	uses of the organ	ization's end	dowment	funds								
Pai	rt VI	Land, Buildings, and E		"Voo" on F	OOC	\ Dowt		11.	C 0 0 F 0	000	Dowt V. Ju	na 10		
	Descri	Complete if the organiza	Cost or other basi		ost or other	•				depreciatio		(d) Boo		<u> </u>
		parama proposa,	(investment)					ļ , ,						
1a	Land													
b	Buildin	gs						1						
С	Leaseh	old improvements												
d	Equipn	nent												
Tota	ıl. Add	lines 1a through 1e (Column ((d) must equal F	orm 990, Pa	rt X, colui	mn (B)	, line	10(c)) .		>				

Schedule D (Form 990) 2017					Page
Part VII Investments—Other Securities. Comple See Form 990, Part X, line 12.	ete if the organizat	ion answered "	Yes" on For	m 990, Part	IV, line 11b.
(a) Description of security or category (including name of security)		(b) Book value	(c) Method of valuation Cost or end-of-year market value		
(1) Financial derivatives					
(2) Closely-held equity interests (3)Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•				
Part VIII Investments—Program Related.		nut T) / lune 11 e	Con Form	000 Port V	l.no. 12
Complete if the organization answered 'Yo (a) Description of investment	(b) Book			Method of va	
(1)INDEPENDENT SPECTRUM, LLC		438,378	Cost or e	nd-of-year n C	narket value
(2)EBS SUPPORT SERVICES, LLC		127,689		C	
(3)FREE SPEECH MEDIA, LLC (4)MOBILE CITIZEN, LLC		55,920 21,335		C C	
(5)SCHOOL RUNNER LLC		6,505		С	
(6)PAIRIN, INC (7)EDUCATION MODIFIED LLC		3,251 3,232		C C	
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	•	656,310			
Part IX Other Assets. Complete if the organization a (a) De		m 990, Part IV, lii	ne 11d See F		t X, line 15 (b) Book value
(1)	·				
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organization		es' on Form 990	D, Part IV, lı	<u> </u> ne 11e or 1	1f.
See Form 990, Part X, line 25. (a) Description of liability		(b) Book valu	те		
1) Federal income taxes					
(2)					
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 th	► Lext of the footnote	to the organizat	ion's financial	statements	that reports the
organization's liability for uncertain tax positions under FIN 4					

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

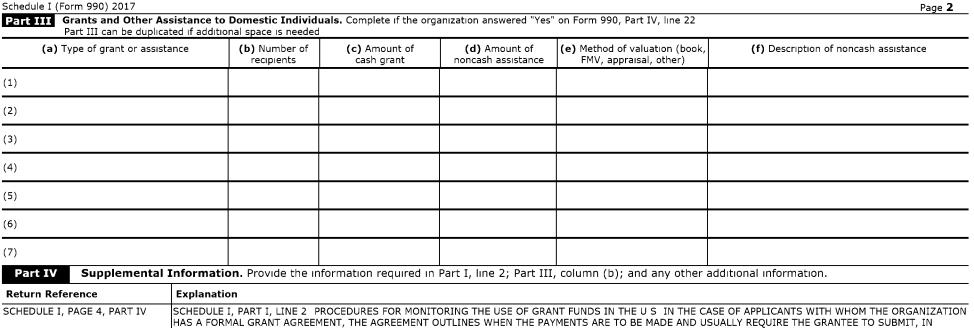
1

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	rmation (continued)	
Return Reference		Explanation	
			Schedule D (Form 990) 2017

efile GRAPHIC print - DO NOT PROCESS As Filed Data DLN: 93493298005258 OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations,** (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization **Employer identification number** PORTLAND REGIONAL EDUCATIONAL 84-1360071 TELECOMMUNICATIONS CORPORATION Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ✓ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part III Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) (book, FMV, appraisal, noncash assistance organization grant cash or assistance or government assistance other) (1) See Additional Data (3) (5) (6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2017



Additional Data

PUBLIC COMMUNICATORS INC

2900 WELTON ST SUITE 300 DENVER, CO 80205

OREGON PROGRESSIVE FUND

209 SW OAK ST FIFTH FLOOR

PORTLAND, OR 97204

Software ID: Software Version: **EIN:** 84-1360071 Name: PORTLAND REGIONAL EDUCATIONAL

51-0173482

61-1491180

TELECOMMUNICATIONS CORPORATION

15,000

15,000

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation	

(a) Name and address of	(D) EIN	(c) IRC section	(a) Amount of cash	(e) Amount of non-	(T) Method of Valuation	
organization		ıf applıcable	grant	cash	(book, FMV, appraisal,	
or government				assistance	other)	

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

501C3

501C4

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation
organization		ıf applıcable	grant	cash	(book, FMV, appraisa
or covernment				accietance	othor)

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation	(g) Description of	(h) Purpose of grant		

non-cash assistance or assistance

VOTER

- - CORE SUPPORT

COLLABORATION

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 32-0073649 501C4 10.000 PROTECT VOTING THE NEW PROGRESSIVE NETWORK RIGHT

333 SE 2ND AVE
PORTLAND, OR 97214

OUR OREGON 65-1247426 501C4 30,000

A BETTER OR
CAMPAIGN

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

203

PORTLAND, OR 97209

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 52-6078441 501C4 30.000 COMMON CAUSE ADVANCING REFORM 805 FIFTEENTH ST SUITE800 WASHINGTON, DC 20005 93-0683005 501C4 10,000 VOTE OR VOTE

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

OREGON STUDENT ASSOCIATION 635 NE DEKUM STREET

PORTLAND, OR 97211

efil	e GRAPHIC pr	rint - DO NOT PROCESS	DLN: 934	9329	8005	258
Schedule J (Form 990)		Compensation Informat	ion om	B No	1545-0	0047
		For certain Officers, Directors, Trustees, Key Emplo				
		Compensated Employees ► Complete if the organization answered "Yes" on Form	20	17	7	
		▶ Attach to Form 990.				
	tment of the Treasury al Revenue Service	► Information about Schedule J (Form 990) and it www.irs.gov/form990.			to Pul ectio	
	ne of the organiza		Employer identificati	on nu	ımber	
	TLAND REGIONAL E ECOMMUNICATIONS		84-1360071			
Pa	rt I Questi	ons Regarding Compensation	•			
			г		Yes	No
1a		opiate box(es) if the organization provided any of the following to or followi				
			or residence for personal use			
	_	·	ess use of personal residence			
			o dues or initiation fees			
	LI Discretion	nary spending account LJ Personal services (e	g , maid, chauffeur, chef)			
b		xes in line 1a are checked, did the organization follow a written policy all of the expenses described above? If "No," complete Part III to expl		1 b		
2		ation require substantiation prior to reimbursing or allowing expenses		2		
	directors, truste	ees, officers, including the CEO/Executive Director, regarding the item:	s checked in line 1a/			
3		If any, of the following the filing organization used to establish the co				
		CEO/Executive Director Check all that apply Do not check any boxes is ad organization to establish compensation of the CEO/Executive Direct				
	✓ Compensa	ation committee	t contract			
	_ '	lent compensation consultant Written employment Compensation surve				1
			ard or compensation committee			
4		, did any person listed on Form 990, Part VII, Section A, line 1a, with	respect to the filing organization or a			
	related organiza					
a		rance payment or change-of-control payment?		4a		No
b	•	or receive payment from, a supplemental nonqualified retirement plans		4b 4c		No No
С		or receive payment from, an equity-based compensation arrangement [:] of lines 4a-c, list the persons and provide the applicable amounts for e	-	40		NO
	,					
		3), $501(c)(4)$, and $501(c)(29)$ organizations must complete line				
5		ed on Form 990, Part VII, Section A, line 1a, did the organization pay contingent on the revenues of	or accrue any			
а	The organization			5a		No
b	Any related orga	anızatıon? : 5a or 5b, describe ın Part III		5b		No
_	-	·				
6		ed on Form 990, Part VII, Section A, line 1a, did the organization pay contingent on the net earnings of	or accrue any			
a	The organization			6a		No
b	Any related orga			6b		No
7	•	· 6a or 6b, describe in Part III ed on Form 990, Part VII, Section A, line 1a, did the organization prov	ude any nonfixed			
,	payments not d	lescribed in lines 5 and 6? If "Yes," describe in Part III		7		No
8		ints reported on Form 990, Part VII, paid or accured pursuant to a cor nitial contract exception described in Regulations section 53 4958-4(a		8		No
9	If "Yes" on line 5 53 4958-6(c)?	8, did the organization also follow the rebuttable presumption procedu	ure described in Regulations section	9		No
Ear I	Danamuark Badı	uction Act Notice, see the Instructions for Form 990.	Cat No 50053T Schedule 1		, 000)	2017

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual (F) Compensation in (A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (E) Total of columns column (B) reported (B)(ı)-(D) other deferred benefits (i) Base (ii) Bonus & incentive (iii) Other compensation as deferred on prior compensation compensation reportable Form 990 compensation 1 JOHN SCHWARTZ (i) DIRECTOR & PRESIDENT 164,368 (ii) 39,142 203,510 2 ADAM MILLER (i) COO/SECRETARY 127,874 27,310 155,184 (ii)

Page 3 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Return Reference Explanation SCHEDULE J, PART III FILER'S CORE FORM PART VII-SECTION A DISCLOSURE INCLUDES COMPENSATION PAID TO DIRECTORS/OFFICERS IN COLUMNS E & F FROM EBS SUPPORT SERVICES, WHICH IS TECHNICALLY AN UNRELATED ORGANIZATION, AND PROVIDES MANAGEMENT COMPANY SERVICES THAT DISCLOSURE ON PART VII-

Schedule J (Form 990) 2017

Schedule J (Form 990) 2017

efile GRAPHI	C print - DO NO	T PROCESS	S As Fi	As Filed Data -					DLN: 93493298005				05258
Schedule L (Form 990 or 990-EZ) Form 990 or 990-EZ) Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ► Attach to Form 990 or Form 990-EZ.									мв No 2 (
Department of the Trea	asurv	ormation abo	out Schedu	ile L (Form 99 <u>www.irs.gov</u>) and its inst	ructio	ns is	at	(pen		ublic
Name of the org	anızatıon							•	yer ide 0071	entifica			
	ss Benefit Trar lete if the organiza									ne 40h			
) Name of disquali			Relationship be	etween disqua			(c) [escrip	tion of	(d) Cor	rected?
					organization			tr	ansact	ion	Y	es	No
Part II Los Cor rep (a) Name of	ans to and/or I nplete if the organiorted an amount o (b) Relationship with organization	From Interestation answern Form 990, P	rested Per red "Yes" or Part X, line 5 (d) Loan t	sons. n Form 990-EZ, 5, 6, or 22			90, Par	In	(Appro	h) oved by rd or	(janiza i) Writ jreem	ten:
			То	From			Yes	No	Yes	No	Yes		No
										+			
										+			
Total				•	\$								
	nts or Assistar					lino 27							
	rested person (b		between n and the	(c) Amount		(d) Type	of assis	stanc	e	(e) Pu	rpose (of assi	stance
									+				
	luction Act Notice s	Al TA		000 000 I		at No. 500564				I (Form			

(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sh o organiz reven	f ation's
				Yes	No
(1) EBS SUPPORT SERVICES LLC	KEY EMPLOYEES	183,583	REIMBURSEMENT		No
Part V Supplemental Inform Provide additional informat	ation on for responses to questions on	Schedule L (see instruction	ons)		
Return Reference		Explanation	on		

Supplemental Information Provide additional information for responses to questions on Schedule L (see instructions)								
Return Reference		Explanation						
SCHEDULE L, PART V	SUPPOR COSTS ORGAN SUPPOR ADMINI THE PR	RT SERVICES, LLC DBA VO EBS SUPPORT SERVICES IZATIONS PRETC IS A ME RT SERVICES WAS CREATI ISTRATIVE SERVICES TO I ESIDENT/CEO OF PRETC	DQAL (D) DESCRIPTION OF LLC IS OWNED BY FIVE M EMBER OF EBS SUPPORT S ED FOR THE PURPOSE OF ITS MEMBERS THE APPOI THREE KEY EMPLOYEES O	TERESTED PERSONS (A) NAME OF TRANSACTION REIMBURSEMENT EMBERS WHICH ARE ALL NONPROF: SERVICES LLC AND HAS A 17 33% I LEASING PERSONNEL AND PROVIDINTED MANAGER OF EBS SUPPORT SERVICES DEVOTE M MILLER. AND THE CFO PRETC RE	FOR SHA IT NTERES ING SHA BERVICE: PART O	ARED T EBS ARED S IS F		

EBS SUPPORT SERVICES FOR THE COST OF THE LEASED PERSONNEL, INCLUDING KEY EMPLOYEES THE AMOUNT LISTED ABOVE INCLUDES ALL COMPENSATION AND BENEFITS PAID TO THESE KEY EMPLOYEES ON BEHALF OF PRETC THE AMOUNT LISTED ABOVE ALSO INCLUDES SALARY AND BENEFITS FOR OTHER

SHARED EMPLOYEES AS WELL AS REIMBURSEMENT FOR SUCH ITEMS AS SHARED OFFICE SPACE. EQUIPMENT, AND OTHER OPERATING EXPENSES TOTAL AMOUNT PAID TO EBS SUPPORT SERVICES 183,583 PERSONNEL COSTS 110,329 PAYROLL TAXES AND BENEFITS 27,681 OTHER OPERATING EXPENSES 37,801 RENT 7,772 Schedule L (Form 990 or 990-EZ) 2017

efile GRAPHIC p	int - DO NOT PROCESS	As Filed Data -		DLN:	93493298005258
SCHEDULE O (Form 990 or 990- EZ) Department of the Treasury Suppleme Complete to provide the provide		vide information for r 990-EZ or to prov ▶ Attach to Forn	on to Form 990 or 9 r responses to specific questi ide any additional informatio in 990 or 990-EZ, 990 or 990-EZ) and its instru v/form990.	ons on n.	OMB No 1545-0047 2017 Open to Public Inspection
Internal Revenue Service Name of the organizat PORTLAND REGIONAL ED TELECOMMUNICATIONS O	UCATIONAL			Employer identi 84-1360071	fication number
990 Schedule O, S	Supplemental Information	1			
Return Reference			Explanation		
FORM 990 - ORGANIZATION'S MISSION	EDUCATION- AND "SOCIAL W RESPECTIVELY, OR THE INT ACTIVITIES TO SUPPORT TH CAPABILITIES TO EDUCATOR INSTRUCTIONAL VIDEO PRO ORGANIZATIONS ENGAGED AND OUTSPOKEN MEDIA TH POWER AND CONCENTRATE VIEW CARRIED BY THEM, TH INFORMATION AND CONCEP ENGAGE IN ADDITIONAL SOC CONSISTENT WITH OPERATI	JELFARE" PURPOSE ERNAL REVENUE COME PROVISION OF COME AND STUDENTS, VIDED TO ACCRED IN THE FORMAL ED AT HELP USERS TO ED PRIVATE PRIVILE AT OFFER DISSENTES TO THE MARKET COME WELFARE, CHAONS THAT MAY BE	E OPERATED EXCLUSIVELY FES WITHIN THE MEANING OF SODE TO THIS END, THE NON PUALITY AND DIVERSE INSTRUMENT OF ENDING THE NOT LIMITE BE A POPULAR DEMOCRATION OF ENROLLED STUDE AND ALTERNATIVE, OR CRITTPLACE OF IDEAS IN BOTH LOW ARITABLE, SCIENTIFIC, AND/CUMPERTAKEN BY ORGANIZA I(C)(4) OF THE INTERNAL REV	SECTIONS 501(C) PROFIT SHALL U UCTIONAL MEDIA ED TO, DATA SER TIONS AND GOVE DENTS, FOSTER C CHECK ON BOT ATION OF MEDIA, ICALLY CONSTRI DCAL AND GLOBA OR EDUCATIONAL TIONS DESCRIBE	AND 501(C)(4), NDERTAKE CONTENT AND VICES AND RNMENTAL OPEN, HONEST OF GOVERNMENT AND POINTS OF JCTIVE AL CONTEXTS, ACTIVITIES AS ARE ED IN, AND THUS

990	Schedule	Ο,	Supplemental	Information

	Explanation
Return Reference FORM 990	BACKGROUND THESE ADDITIONAL, VOLUNTARY DISCLOSURES ARE INTENDED TO GIVE THE INTERESTED RE ADER GREATER INSIGHT INTO HOW AND WHY PORTLAND REGIONAL EDUCATIONAL TELECOMMUNICATIONS COR PORATION DIBIA VOQAL PORTLAND OPERATES ITS NUMBEROUS PROGRAMS AND INITIATIVES, BOTH THROUGH ITS OWN EFFORTS AND THROUGH THE LIMITED LIABILITY COMPANIES OF WHICH VOQAL PORTLAND IS PA RT OWNER ON BEHALF OF A NUMBER OF NONPROFIT ORGANIZATIONS, VOQAL PORTLAND'S PRESIDENT, JO HN SCHWARTZ, LED AN EFFORT TO APPLY FOR WHAT WERE THEN REFERRED TO AS INSTRUCTIONAL TELEVI SION FIXED SERVICE (ITFS) LICENSES FROM THE FEDERAL COMMUNICATIONS COMMISSION THOSE APPLI CATIONS WERE ORIGINALLY SUBMITTED IN THE EARLY 1980S MR SCHWARTZ BELIEVED THAT SEPARATE NONPROFIT ORGANIZATIONS WITH LOCAL BOARDS OF DIRECTORS WOULD BETTER SERVE THE SCHOOLS AND COMMUNITIES COVERED BY THESE LICENSES IN THE END, FIVE NONPROFITS LED BY MR SCHWARTZ APP LIED FOR AND RECEIVED A TOTAL OF 11 ITFS LICENSES IN THE END, FIVE NONPROFITS LED BY MR SCHWARTZ APP LIED FOR AND RECEIVED A TOTAL OF 11 ITFS LICENSES TODAY, JOHN SCHWARTZ REMAINS THE PRESID ENT OF THOSE FIVE NONPROFITS, WHICH WILL HEREAFTER BE REFERRED TO AS THE VOQAL NONPROFITS VOQAL PORTLAND PROVIDED FREE EDUCATIONAL VIDEO PROGRAMMING TO SCHOOLS VIA ITS FCCLICENSED ITFS STATION WHILE DOING SO, IT SHARED SOME OF ITS OVERHEAD AND ADMINISTRATIVE COSTS WITH THE OTHER FOUR VOQAL NONPRO FITS, WHICH WERE PROVIDING VERY SIMILAR SERVICE TO THEIR LOCAL COMMUNITIES THIS APPROACH RESULTED IN SIGNIFICANT COST SAVINGS, ALLOWING VOQAL PORTLAND TO DELIVER BETTER EDUCATION AL SERVICE THE SHARING OF PERSONNEL AND OTHER RESOURCES AMONG THE VOQAL NONPROFITS WAS THE BEGINNING OF WHAT WOULD LATER BECOME EBS SUPPORT SERVICES, LLC (EBSSS) - THE UMBRELLA SE RVICE ORGANIZATION THAT TODAY PROVIDES PERSONNEL AND OTHERWISE BENEFIT THE PUBLIC, THE VOQAL NONPROFITS TO EXPAND THEIR ABILITY TO SERVE EDUCATION AND OTHERWISE BENEFIT THE PUBLIC, THE VOQAL NONPROFITS ENTERED INTO VARIOUS SPECTRUM USE AGREEMENTS WITH COMMERCIAL TELECOMM UNICATIONS OPERATORS VOQA
	PUBLIC, THE VOQAL NONPROFITS ENTERED INTO VARIOUS SPECTRUM USE AGREEMENTS WITH COMMERCIAL TELECOMM UNICATIONS OPERATORS VOQAL ALLOWED COMMERCIAL FIRMS TO USE THEIR ITFS, AND, LATER, EDUCAT IONAL BROADBAND SERVICE (EBS) EXCESS SPECTRUM CAPACITY IN THEIR WIRELESS NETWORKS IN EXCH ANGE, THESE AGREEMENTS PROVIDED SIGNIFICANT FINANCIAL BENEFITS THROUGH SPECTRUM ROYALTY PA YMENTS, AS WELL AS MATERIAL IN-KIND EDUCATIONAL BENEFITS SUCH AS HIGH- SPEED BROADBAND INT ERNET
	THE INCREASED RESOURCES AFFORDED BY THESE MOST RECENT SPECTRUM AGREEMENTS, THE VOQAL NONPROFITS, INCLUDING VOQAL PORTLAND, EXPANDED THE NUMBER AND REACH OF THEIR EDUCATIONAL PROGRAMS TO INCLUDE NEW EDUCATION VENTURES, AFFORDABLE INTERNET SERVICE FOR SCHOOLS A ND NONPROFITS, CASH GRANTS, EBS SPECTRUM ADVOCACY, AND MORE AS IT EXPANDED, VOQAL PORTLAN D CONTINUED TO SHARE RESOURCES WITH THE OTHER VOQAL NONPROFITS FOR THIS REASON, IN 2009 THE FIVE VOQAL NONPROFITS FORMED EBS SUPPORT SERVICES, LLC VOQAL PORTLAND OWNS 17 33% OF E BS SUPPORT SERVICES, LLC AND R

990	Schedule	Ο,	Supplemental	Information

Return Reference	Explanation
FORM 990	EIMBURSES IT FOR THE COST OF LEASED PERSONNEL, AS WELL AS SHARED OFFICE SPACE AND EQUIPMEN T EBSSS, LLC, AS WELL AS THE OTHER LIMITED LIABILITY COMPANIES LISTED BELOW, ARE ALL OWNED EXCLUSIVELY BY THE VOQAL NONPROFITS, THERE ARE NO OTHER OWNERS IN 2013, TO EXTEND THE RELATIONSHIPS AMONG THE VOQAL NONPROFITS AND GAIN BETTER PUBLIC RECOGNITION FOR SHARED WORK, EBSSS SECURED THE "VOQAL" TRADEMARK AND THE FIVE NONPROFITS, INCLUDING VOQAL PORTLAND, A DOPTED THE VOQAL BRAND VOQAL "TRADEMARK AND THE FIVE NONPROFITS, INCLUDING VOQAL PORTLAND, A DOPTED THE VOQAL BRAND VOQAL HAS STRIVED TO FULFILL THE MISSION OF EBS, FROM ITS BEGINNIN GS PROVIDING FREE, ITFS VIDEO TO SCHOOLS TO RECENT EFFORTS TO SUPPORT CHANGE. MAKERS IN ED UCATION WHILE SOME VOQAL PORTLAND PROGRAMS SERVE WHAT MANY WOULD CONSIDER TRADITIONAL EDU CATIONAL ENTITIES LIKE K-12 SCHOOLS, VOQAL EMBRACES A BROADER VIEW OF EDUCATION AND AIMS TO ENSURE EQUAL ACCESS TO KNOWLEDGE TO FOSTER A STRONGER, HEALTHIER DEMOCRACY OUR PROGRAMS ARE OFTEN AIMED AT THE ROOT CAUSES THAT BAR ACCESS TO KNOWLEDGE BOTH IN AND OUT OF TRADIT IONAL BRICK AND MORTAR INSTITUTIONS EXAMPLES OF MORE TRADITIONAL EDUCATIONAL PROGRAMS INC LUDE OUR CORE BROADBAND INTERNET ACCOUNTS AND MOBILE CITIZEN'S EFFORTS TO ENSURE THAT STUD ENTS HAVE ACCESS TO THE INTERNET BOTH AT SCHOOL AND AT HOME VOQAL EDUCATION'S SUPPORT OF THE CRASH COURSE U S. GOVERNMENT AND POLITICS SERIES ON YOUTUBE AND INDEPENDENT SPECTRUM'S EFFORTS TO PASS THROUGH ADDITIONAL EDUCATION BENEFITS TO MORE EBS LICENSEES ARE ADDITIONAL EDUCATIONAL NATURE OF OUR WORK EXAMPLES OF SOME OF OUR LESS TRADITIONAL EDUCATIONAL NATURE OF OUR WORK EXAMPLES OF SOME OF OUR LESS TRADITIONAL EDUCATIONAL NATURE OF OUR WORK EXAMPLES OF SOME OF OUR LESS TRADITIONAL EDUCATIONAL NATURE OF OUR WORK EXAMPLES OF SOME OF OUR LESS TRADITIONAL EDUCATIONAL PROBADBAND INTERNET ACCOUNTS THE DISSEMINATION OF ALTERNATIVE ID EAS AND BUILDING A MORE ENGAGED AND EDUCATED PUBLIC A DESCRIPTION OF SPECIFIC VOQAL PORTLAND AND ADDITIONAL EXAMPLES OF THE EDUCATIONAL NATURE OF

990	Schedule	Ο,	Supplemental	Information

Return Reference	Explanation
FORM 990	S WELL AS WATCHED BY THE PUBLIC AT LARGE VOQAL PORTLAND PARTLY FUNDED CRASH COURSE'S GOVE RNMENT AND POLITICS SERIES. WHICH HAS BEEN VIEWED MILLIONS OF TIMES ACROSS ITS 50 EPISODES THE EDUCATION VENTURE FUND (EVF) WAS ESTABLISHED TO ADDRESS THE CENTRAL GOAL OF MEASURAB LY REDUCING OPPORTUNITY GAPS IN EDUCATION BY INVESTING IN EARLY-STAGE FOR-PROFIT AND NONPR OFIT ENTITIES VOQAL PORTLAND HELPS COVER THE OPERATING COSTS OF THE EVF AND INVESTED IN T WO NONPROFIT GRANTS FOR 3,000 IN ITS FISCAL YEAR 2018 (THE 12 MONTHS ENDING MARCH 31, 2018) MOBILE CITIZEN, LLC - OWNED IN PART (5 11%) BY VOQAL PORTLAND MOBILE CITIZEN, LLC IS MA DE POSSIBLE BY THE VOQAL NONPROFITS' CURRENT SECTRUM AGREEMENTS AND THE BROADBAND INTERNET ACCOUNTS RECEIVED AS PART OF THOSE AGREEMENTS AFTER SEVERAL YEARS OF PROVIDING INTERNET SERVICE INDIVIDUALLY, THE VOQAL NONPROFITS FORMED MOBILE CITIZEN, LLC TO PROVIDE ADMINIST RATIVE SUPPORT FOR THE DISTRIBUTION OF SOME OR ALL OF ITS MEMBERS' BROADBAND ACCOUNTS MOBILE CITIZEN, LLC SERVES SCHOOLS, NONPROFIT ORGANIZATIONS AND SOCIAL WELFARE AGENCIES AND HAS FOCUSED MUCH OF ITS EFFORT ON BRIDGING THE DIGITAL DIVIDE MOBILE CITIZEN OFFERS ONE OF THE LOWEST COST MOBILE BROADBAND RATE PLANS AVAILABLE TO SCHOOLS, NONPROFIT ORGANIZATIONS AND SOCIAL WELFARE AGENCIES AND HAS FOCUSED MUCH OF ITS EFFORT ON BRIDGING THE DIGITAL DIVIDE MOBILE CITIZEN OFFERS ONE OF THE LOWEST COST MOBILE BROADBAND RATE PLANS AVAILABLE TO SCHOOLS, NONPROFIT ORGANIZATIONS AND SOCIAL WELFARE AGENCIES RADIONADE SERVICE COSTS APPROXIMATELY ONE-FIFTH THE AMOUNT OF ITS COMMERCIAL EQUIVALENTS, AND IS PROVIDED FREE IN SOME CASES IN THE PORTLAND METRO AREA, MOBILE CITIZEN SERVES SCHOOLS AND NONPROFITS THAT PROVIDE SERVICES AS DIVERSE AS WORKFORCE PREPAREDNESS AND FREE COMPUTER TRAINING AND ACCESS PROGRAMS THE MONEY THESE ORGANIZATIONS SAVE ON THE INTERNET WITH MOBILE CITIZEN BLLCWIST HAD ACCOUNTS WITH SCHOOLS AND NONPROFITS BOTH LO CALLY IN OREGON AND NATIONON DEBALL OF VOQAL PORTLAND, MOBILE CITIZEN PLACED A CUMULATIVE TOTAL OF APPROXIMATELY

Return Explanation
Reference

FORM 990, PAGE 6, PART VI, LINE 3

Return Explanation
Reference

LINE 7A

FORM 990, THE PRESIDENT OF THE CORPORATION MAY DESIGNATE UP TO TWO DIRECTORS
PAGE 6,
PART VI.

Return
Reference

Explanation

THERE IS NO COMMITTEE WITH ALITHORITY TO ACT ON BEHALE OF THE GOVERNING BODY

LINE 8B

FORM 990, THERE IS NO COMMITTEE WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY
PAGE 6,
PART VI.

Return Explanation

FORM 990,	THE 990 IS REVIEWED BY THE ORGANIZATION'S ACCOUNTANTS, BUSINESS MANAGER, CFO, AND AT LEAST ONE
PAGE 6,	CORPORATE OFFICER ADDITIONALLY THE FORM IS PRESENTED TO THE BOARD MEMBERS BEFORE IT IS FILED
PART VI,	
LINE 11B	

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 12C	EACH RESPONSIBLE PERSON WHO IS A DIRECTOR OR OFFICER HAS A DUTY TO DISCLOSE TO THE BOARD (OR TO ANY COMMITTEE OF THE BOARD THAT IS CONSIDERING A DECISION TO WHICH THE CONFLICT APPLIED) THE MATERIAL FACTS OF ANY PROPOSED TRANSACTION OR ACTION OF THE ORGANIZATION IN WHICH SUCH RESPONSIBLE PERSON HAS ANY CONFLICTS EACH RESPONSIBLE PERSON WHO IS A STAFF MEMBER, HAS A DUTY TO DISCLOSE TO THE BUSINESS MANAGER OF THE ORGANIZATION AND HIS/HER IMMEDIATE SUPERVISOR THE MATERIAL FACTS OF ANY PROPOSED TRANSACTION OF THE ORGANIZATION IN WHICH SUCH A PERSON HAS ANY CONFLICT IMPLEMENTATION OF THE CONFLICT OF INTEREST POLICY RELIES ON SUCH DISCLOSURE A RESPONSIBLE PERSON WHO FAILS TO FOLLOW THE PROTOCOLS ESTABLISHED IN THE CONFLICT OF INTEREST POLICY SHALL BE SUBJECTED TO MEANINGFUL DISCIPLINARY ACTION BY THE BOARD OF DIRECTORS UP TO AND INCLUDING REMOVAL FROM THE BOARD OR THEIR POSITION WITHIN THE ORGANIZATION

Return

Reference	
FORM 990,	ALL SERVICES PERFORMED ARE FROM SHARED EMPLOYEES OF A SHARED SERVICES COMPANY THIS COMPANY
PAGE 6,	HAS AN OVERSIGHT COMMITTEE MADE UP OF BOARD MEMBERS OF NON-PROFIT ORGANIZATIONS THAT IT SERVES
PART VI,	THIS OVERSIGHT COMMITTEE HAS BEEN CHARGED BY THE NONPROFIT ORGANIZATION BOARDS TO OVERSEE
LINE 15A	PERSONNEL MATTERS INCLUDING EXECUTIVE AND STAFF COMPENSATION STAFF PREPARED AN ANNUAL SALARY
	BENCHMARKING REPORT FOR ALL STAFF POSITIONS AND AN ANNUAL CEO SALARY REVIEW THAT DESCRIBED EACH
	POSITION AND COMPARED THE POSITION TO THREE SALARY SURVEYS MOUNTAIN STATES EMPLOYERS COUNCIL
	MOST RECENT NON- PROFIT/FOUNDATION COMPENSATION, MOUNTAIN STATES EMPLOYERS COUNCIL MOST
	RECENT COLORADO BENCHMARK COMPENSATION, AND MOST RECENT COLORADO NON-PROFIT ASSOCIATION
	SALARY AND BENEFITS SURVEY IN ADDITION, THE SALARY BENCHMARKING REPORT IS REVIEWED PERIODICALLY
	BY AN INDEPENDENT THIRD PARTY CONTRACTOR TO ENSURE THE USE OF PROPER METHODOLOGY AND ETHICAL
	STANDARDS THIS REPORT, THE THIRD PARTY CONTRACTOR REPORT AND SUPPORTING DOCUMENTATION WAS
l	REVIEWED IN DEPTH BY THE OVERSIGHT COMMITTEE WHICH SUMMARIZED ITS REVIEW TO ALL OF THE BOARDS

Explanation

Return Explanation Reference FORM 990. SEE THE EXPLANATION SHOWN FOR FORM 990, PART VI. LINE 15A PAGE 6,

PART VI, LINE 15B

Return Explanation
Reference

LINE 19

FORM 990,	THE ORGANIZATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND
PAGE 6,	FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST
PART VI	

efile GRAPHIC print - DC	NOT PROCESS As Filed Data -										DLN: 93493	298005	258		
SCHEDULE R (Form 990)	Related O ▶ Complete if the organiz	_	swered "Yes	" on Form	990, Part		_		37.		20	1545-004 17	17		
Department of the Treasury Internal Revenue Service	► Information about So	hedule I	► Attach to R (Form 990)			s is at <u>www</u>	.irs.gov/f	orm99	<u>o</u> .		Open to Public Inspection				
Name of the organization PORTLAND REGIONAL EDUCATIONAL TELECOMMUNICATIONS CORPORATION									loyer identif 360071	icatior	n number				
Part I Identification	of Disregarded Entities Complete if th	ne organ	ızatıon answ	ered "Yes	" on Form	990, Part	IV, line 3	3.							
Name, address, and	(a) EIN (if applicable) of disregarded entity		(b) Primary a		Legal dom	c) nicile (state n country)	(d) Total inco	ome	(e) End-of-year as	sets	(1 Direct co ent				
Part II Identification of related tax-exem	of Related Tax-Exempt Organizations on torganizations during the tax year.	Comple	ete if the org	anızatıon	answered	"Yes" on F	orm 990,	Part I\	/, line 34 be	cause	it had one or	more			
Name, address, and	(a) EIN of related organization	Prim	(b) ary activity	Legal dom	c) ncile (state n country)	(d) Exempt Cod			(e) harity status on 501(c)(3))	Dı	(f) rect controlling entity	Section (13) cor enti	512(b) ntrolled ty?		
												Yes	No		
For Danamusk Poduction Ac	t Notice, see the Instructions for Form 99			<u></u>	t No 5013	25V				€ch.	edule R (Form	990) 36	117		

		1	1										
(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant Income(related unrelated, excluded from tax under sections 512- 514)	Share of total income	(g) Share of end-of-year assets	(H Disprop alloca		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gener mana partr	al or liging	(k) Percenta ownersh
					314)			Yes	No		Yes	No	
Identification of Related Organization because it had one or more related organizations.						zation ansv	vered "Yes	" on Fo	orm 99	90, Part IV,	lıne	34	
(a)	(b)		(c)	st during ti	(d)	(e)	(f)	1	(g)	(H	1)		(1)
Name, address, and EIN of related organization	Primary activity	l do (state	Legal omicile or foreign ountry)		controlling Type entity (C c	e of entity orp, S corp, or trust)	Share of total income		of end- year assets	of- Percel owne	ntage	(13	ction 5: 3) contr entity
			und y)									Y	'es
													+
										_			_
												_	-+

Schedule R (Form 990) 2017					Pag	ge 3
Part V Transactions With Related Organizations Complete if the organization answered	"Yes" on Form 990, Par	t IV, line 34, 35b,	or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more re	lated organizations listed in	Parts II-IV?				
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity				1a		
f b Gift, grant, or capital contribution to related organization(s)				1b		
${f c}$ Gift, grant, or capital contribution from related organization(s)				1c		
f d Loans or loan guarantees to or for related organization(s)				1d		
e Loans or loan guarantees by related organization(s)				1e	\blacksquare	
f Dividends from related organization(s)				1f		
g Sale of assets to related organization(s)				1g		
h Purchase of assets from related organization(s)				1h		
i Exchange of assets with related organization(s)				1i		
j Lease of facilities, equipment, or other assets to related organization(s)				1j	\Box	
${f k}$ Lease of facilities, equipment, or other assets from related organization(s)				1k	\dashv	
I Performance of services or membership or fundraising solicitations for related organization(s)				11		
$m{m}$ Performance of services or membership or fundraising solicitations by related organization(s)				1m		
${f n}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		
o Sharing of paid employees with related organization(s)				10		
p Reimbursement paid to related organization(s) for expenses				1р		
q Reimbursement paid by related organization(s) for expenses				1q	\blacksquare	
r Other transfer of cash or property to related organization(s)				1r	\dashv	
${f s}$ Other transfer of cash or property from related organization(s)				1s		
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete t	his line, including covered r	elationships and trai	nsaction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining a	amount in	volved	

Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

was not a related organization. See instructions regarding exclu						·							
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	e section d, 501(c)(3) ed, organizations from		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		(k) Percentage ownership
				Yes				Yes	No		Yes	No	
(1)INDEPENDENT SPECTRUM LLC	EDUCATION	со	ROYALTIES		No	187,155	438,378		No			No	9 100 %
PO BOX 6060BOULDER, CO 80306 41-2183115													
	1	ı	1		1	1				Schedul	e R (Forn	n 99	0) 2017

Schedule R (Form 990) 2017 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2017