50m 990

Department of the Treasury Interited Revenue Service

For Paperwork Reduction Act Notice, see the separate instructions.

# **Return of Organization Exempt From Income Tax**

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

Do not enter social security numbers on this form as it may be made public.

2018
Open to Public Inspection

Form 990 (2018)

OMB No 1545-0047

► Go to www.irs.gov/Form990 for instructions and the latest information. For the 2018 calendar year, or tax year beginning , and ending C Name of organization ACADEMY FOR THE LOVE OF D Employer Identification number Check if applicable LEARNING, INC. Address change Doing business as 86-0945282 Name change Number and street (or P O box if mail is not delivered to street address) Room/suite 505-995-1860 133 SETON VILLAGE ROAD Initial return Final return/ City or town, state or province, country, and ZIP or foreign postal code SANTA FE NM 87508 1,858,312 G Gross receipts \$ Amended return Name and address of principal officer H(a) Is this a group return for subordinates? Application pending AARON STERN 133 SETON VILLAGE ROAD H(b) Are all subordinates included? If "No," attach a list (see instructions) SANTA FE MM 87508 **X** 501(c)(3) 501(c) ( ) < (insert no ) 4947(a)(1) or WWW.ALOVEOFLEARNING.ORG Website > H(c) Group exemption number Form of organization Year of formation 1998 M State of legal domicile X Corporation Trust Association Part I Summary Briefly describe the organization's mission or most significant activities THE ACADEMY'S MISSION IS TO AWAKEN, ENLIVEN, NURTURE, AND SUSTAIN THE Governance NATURAL LOVE OF LEARNING IN PEOPLE OF ALL AGES THROUGH RESEARCH, DEVELOPMENT, IMPLEMENTATION, AND DISSEMINATION OF EDUCATIONAL PROGRAMS. 2. Check this box ▶ If the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) Activities & 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 19 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 41 6 Total number of volunteers (estimate if necessary) 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990 T, line \$8 CCIVED 7h Prior Year **Current Year** 1,475,861 13,048,374 8 Contributions and grants (Part VIII, line 1h) Revenue 0 MAY 2 1 2019 9 Program service revenue (Part VIII, line 2g) 196,644 196,873 10 Investment income (Part VIII, column (A), lines 3, 4, and 7b) 100,177 176,471 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9e, 10c, and 1e 4,736 9,107 13,349,931 1,858,312 12 Total revenue – add lines 8 through 11 (must equal Par 1,500 8,700 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 1,344,068 1,444,304 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 310,593 b Total fundraising expenses (Part IX, column (D), line 25) 2,102,677 2,189,354 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 3,642,358 3,448,245 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) -1,784,046 9,901,686 19 Revenue less expenses Subtract line 18 from line 12 Beginning of Current Year End of Year 26,489,156 20 Total assets (Part X, line 16) 28,408,301 151,883 117,713 21 Total liabilities (Part X, line 26) 28,256,418 26,371,443 22 Net assets or fund balances Subtract line 21 from line 20 Signature Block 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 201 Sign nature of officer Here AARON STERN PRES./EXECUTIVE DIR Type or print name and title Print/Type preparer's name Check Paid ROBERT A. DEPASQUALE ROBERT A. DEPASQUAL 05/13/19 self-employed P00446108 Preparer PULAKOS CPAS, 85-0219147 PC Firm's EIN Firm's name Use Only 5921 JEFFERSON ST NE 505-338-1500 ALBUQUERQUE, NM 87109 Firm's address Phone no May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No

Form 990 (2018) ACADEMY FOR TH	E LOVE OF	86-0945282	
	Service Accomplishmen		<b></b>
*Check if Schedule O cor		to any line in this Part III	<u>X</u>
1 Briefly describe the organization's mission THE ACADEMY'S MISSION		ENITVEN. NIRTIRE. AN	D SUSTAIN THE
NATURAL LOVE OF LEARN			
DEVELOPMENT, IMPLEMEN	TATION, AND DISS	SEMINATION OF EDUCAT	IONAL PROGRAMS.
2 Did the organization undertake any signif	icant program services during the	ne year which were not listed on the	☐ <b></b>
prior Form 990 or 990-EZ?  If "Yes," describe these new services on	Schodula O		Yes X No
3 Did the organization cease conducting, or		ow it conducts, any program	
services?		, , , , , , , , , , , , , , , , , , ,	Yes X No
If "Yes," describe these changes on Sch			
4 Describe the organization's program sen expenses. Section 501(c)(3) and 501(c)( the total expenses, and revenue, if any, f	4) organizations are required to	report the amount of grants and allocation	•
FIELD MODEL THROUGH C INSTITUTE FOR TEACHIN ADMINISTRATORS, AND S INSTITUTE, AND EL OTR AND CONCERTS; 1,143 P SERIES CELEBRATING TH WITH AARON STERN CONC CELEBRATED ITS 20TH A	G, A RECURRING (CHOOLS, INCLUDIN O LADO; 1,261 PI EOPLE IN WORKSHO E CENTENNIAL OF EIVED THE IDEA I	CURRICULUM FOR TEACH NG WORKSHOPS, WISDOM EOPLE IN LIFESONGS C OPS AND SPECIAL EVEN THE BIRTH OF LEONAR FOR THE ACADEMY, WHI	ERS, CIRCLES, SUMMER HOIRS, ENSEMBLES, TS, INCLUDING A D BERNSTEIN, WHO
4b (Code ) (Expenses \$ RESEARCH: THE ACADEMY APPLICATION AND IMPRO 263 PEOPLE IN STAFF R COLLABORATION WITH TH WISCONSIN.	VEMENT OF ITS LE ETREATS, FACULTY	GRAM CONTINUED WITH EARNING FIELD MODEL.  OR DEVELOPMENT, AND A	THE ACADEMY SERVED N ONGOING
4c (Code ) (Expenses \$ TRAININGS: THE ACADEM LEARNING PROGRAMS BY DEVELOPED BY THE ACAD	BUILDING INTO TH	NOTHER NONPROFIT ENT HEM LEARNING PRACTIC	
4d Other program services (Describe in Sch	edule O )		
(Expenses \$ 186,798	including grants of \$	) (Revenue \$	47,442
4e Total program service expenses ▶	2,531,542		
DAA			Form <b>990</b> (2018)

86-0945282 ABDEJLMO

	art IV Checklist of Required Schedules	_		age (
	`		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	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? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
-	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6	. [	x
7	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	7	. (	x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>			
٠	complete Schedule D, Part III	8	x	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	٣		
9	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
		9		x
40	debt negotiation services? If "Yes," complete Schedule D, Part IV	- <del>"</del>	-	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	امدا	x	
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			1
	VII, VIII, IX, or X as applicable			
а		۱., ا		ļ
	complete Schedule D, Part VI	11a	X	
b		l l	٠,	l
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d				
	reported in Part X, line 167 If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	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	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	[ [	ļ	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If		1	
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			l
	fundraising, business, investment, and program service activities outside the United States, or aggregate			1
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			ł
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	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		X
17	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)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		x
b	The state of the s	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		x
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Form **990** (2018)

	art IV   Checklist of Required Schedules (continued)			age -
	· Oneskinet of frequired contented (continues)		Yes	No
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the		1	l
	organization's current and former officers, directors, trustees, key employees, and highest compensated			ĺ
	employees? If "Yes," complete Schedule J	23	X	<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			1
	\$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	<u>24a</u>	-	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<del> </del>	<del> </del>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year		i	l
	to defease any tax-exempt bonds?	24c		<del>                                     </del>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a		050		x
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	_25a_		_
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?			1
	If "Yes," complete Schedule L, Part I	25b	1	x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	200		
20	current or former officers, directors, trustees, key employees, highest compensated employees, or			1
	disqualified persons? If "Yes," complete Schedule L, Part II	26		x
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			1
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
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)			<b> </b>
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	X	
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			1
	Schedule L, Part IV	28b		X
¢	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? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M			X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		ا ج	1
	conservation contributions? If "Yes," complete Schedule M	30	X	v
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	-		x
22	complete Schedule N, Part II	32	<del> </del>	
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	33		<del></del>
54	or IV, and Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ь	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
-	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X.
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	[		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	<u> </u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>
LP <sub>6</sub>	art 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			
	1 1	_	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  1a 59		1	
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	- <u>-</u>	·	
	reportable gaming (gambling) winnings to prize winners?	1c	1	1

Page 5

FC	Statements negaring Other Ins Finnigs and Tax Compliance (comm	ueu)		<del>-</del>		· · ·
20	Enter the number of employees reported on Form W. 3. Transmittal of Wage and Tay	1 1	I	[ ** \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	2a	19			\$ 1
	Statements, filed for the calendar year ending with or within the year covered by this return				X	<b>2</b> 2
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returned. Note of the sum of lines 1s and 2a is greater than 250 year may be required to a file (see instruction)			2b		/
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions	>)		المستد	شدمسد	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	^		3a		
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		•	4=		•
	a financial account in a foreign country (such as a bank account, securities account, or other financial	i accoi	unt)'/	4a	3 300 3 75 9	X
b	If "Yes," enter the name of the foreign country		. (50.40)	* * 1,7%	£ 3	10 // 10 //
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	Accoun	its (FBAH)		فتنشف	v
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		x
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction that it was only in the party of the	ction		5b		
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		<del> </del>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne				
	organization solicit any contributions that were not tax deductible as charitable contributions?			6a	-	X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons or				
_	gifts were not tax deductible?			6b	3.	\$ C
7	Organizations that may receive deductible contributions under section 170(c).			100	\$	. S
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods		70	Mary C	X
	and services provided to the payor?			7a		_
b	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	15		7.		x
	required to file Form 8282?	ا ہے ا		7c	(S)." .	<b>A</b>
ď	If "Yes," indicate the number of Forms 8282 filed during the year	7d	L		<del>*</del>	X
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		17	7e 7f		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control of the organization received a contribution of qualified intellectual property, did the organization file Fo		00 ac roquirod?			
g h	If the organization received a contribution of qualified intellectual property, did the organization file FC		•	7 <u>g</u> 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained			4 3		Zini.
0	sponsoring organizations maintaining donor advised failus. Bid a donor advised failus maintaining sponsoring organization have excess business holdings at any time during the year?	u by tr	ic	8   8	<b>******</b>	30.1
9	Sponsoring organizations maintaining donor advised funds.			elle irk	2	Service.
a	Did the sponsoring organization make any taxable distributions under section 4966?			9a	- Albertack	************
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		<u> </u>
10	Section 501(c)(7) organizations. Enter			\$ 4.65W	kui vi	No. of
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				`
u ر	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			G.	A CONTRACTOR
11	Section 501(c)(12) organizations. Enter		L			e e
	Gross income from members or shareholders	11a			**	<b>*</b>
b	Gross income from other sources (Do not net amounts due or paid to other sources		·		_ `	
-	against amounts due or received from them )	11b		<b>*</b>	部等	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	$\overline{}$	?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		10144	変えがる	<b>M</b> AND
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					and .
а	Is the organization licensed to issue qualified health plans in more than one state?			13a	×	
_	Note. See the instructions for additional information the organization must report on Schedule O				4 1	, ,
b	Enter the amount of reserves the organization is required to maintain by the states in which			¥ 4		<b>1</b> 11
-	the organization is licensed to issue qualified health plans	13b	·	F *	`	
С	Enter the amount of reserves on hand	13c		- T	ž. 11	
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune		or			
-	excess parachute payment(s) during the year?			15		x
	If "Yes," see instructions and file Form 4720, Schedule N			Į., .	7.87 ·	₹,
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t incom	ne?	16		X
	If "Yes," complete Form 4720, Schedule O			Į.	3~ ·	۲

86-0945282 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI  $|\mathbf{X}|$ Section A. Governing Body and Management Yes No 6 1a Enter the number of voting members of the governing body at the end of the tax year 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 3 Enter the number of voting members included in line 1a, above, who are independent 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 2 any other officer, director, trustee, or key employee? 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 X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 6 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 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 X а The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a X 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 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12b X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X describe in Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy? 13 X X 14 Did the organization have a written document retention and destruction policy? 14 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? X The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b 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 X with a taxable entity during the year? 16a 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA, FL, IL, MA, MD, MI, NJ 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Other (explain in Schedule O) 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 > AARON STERN 133 SETON VILLAGE ROAD

505-995-1860

NM 87508

SANTA FE

Form 990 (2018)	ACADEMY	FOR	THE	LOVE	$\mathbf{OF}$
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Page 7

Part VII	Compensation of Officers, Dir	ectors, Trustees,	Key Employees,	<b>Highest Compensated</b>	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 year
- 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, and 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

(A) Name and Title	(B) Average hours per week	po	x, unie	Pos check ess pe	rson	than or	an	(D)  Reportable  compensation  from  the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	(list any hours for related organizations below dotted line)  (list any officer and a direction of the control		Key employee		Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations			
(1) MARY ELLEN PETR										<del></del>	
	0.00						l			_	
TRUSTEE	0.00	X	<u> </u>	-	_	1-1	-	0	0	<u>_</u>	
(2) VIVI ROGERS	0.00						l				
molicana	0.00	$ \mathbf{x} $						o	o	C	
TRUSTEE (3) MARIANNE MURRAY	0.00	╀┻				┝╌┼	$\dashv$				
(3)MARIANNE MORRAI	9.00										
TRUSTEE/FACULTY	0.00	$\mathbf{x}$			l			37,878	0	C	
(4) ANN STAHL		<del> </del>		_	l	<del>                                     </del>	1	37,70,70			
(,,==:=======	0.00										
TREASURER	0.00	x		x	1	} }	1	0	0	C	
(5) AARON STERN											
	40.00						ľ				
PRES./EXECUTIVE DIR.	0.00	X		X				141,707	0	9,920	
(6) DAVID GORDON											
	36.00					ļļ					
VP/SECRETARY	0.00	X		x	<u> </u>	$\vdash$	_	83,879	0	5,872	
(7)					ļ						
(8)											
(9)		<u> </u>					-				
10)			_								
11)											

•	6-	^	$\sim$		_	$\sim$	$\sim$	$\sim$	
•	_	11	u	л	-	•	~	•	

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Pa	rt VII   Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	nd Highest Compensated	Employees (continued)		
<del>,</del>	(A) Name and title	(B) Average hours per week (list any	ьо	x, unle	Pos check ess pe	rson ı	than o s both r/trust	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation	
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations	
	,		-									
				]								
					_							
									262.464		15 700	
1b c	Sub-total  Total from continuation shee	ets to Part VII, S	ecti	on A	١			<b>▶</b>	263,464		15,792	
<u>d</u> _	Total (add lines 1b and 1c)							<u> </u>	263,464		15,792	
2	Total number of individuals (in reportable compensation from				thos	e lis	ted a	bov	e) who received more than	\$100,000 of		
3	Did the organization list any for employee on line 1a? If "Yes,"	ormer officer, dire	ecto dule	r, or J for	suci	h ind	lividu	aĺ			Yes No	
4	For any individual listed on line organization and related organization and related organization.	nizations greater	than	\$15	0,00	100 l	f "Ye	s," c	complete Schedule J for su	ch	4 X	
5	Did any person listed on line 1 for services rendered to the or									rindividual	5 <u>X</u>	
	ion B. Independent Contracto											
1	Complete this table for your five compensation from the organic	zation Report co							dar year ending with or with	nin the organization's tax ye		
		(A) business address						L.		(B) tion of services	(C) Compensation	
	ANIEL E. BRANNEN JF ANTA FE	NM	8	75		3 C			TE ROAD, STE #5 LEGAL /CONSULT	r	192,716	
_			_		_			_				
	Total number of independent of	contractors (inclu	ıdını	ı but	not	lımıtı	ed to	the	se listed above) who			
4	received more than \$100,000								SE HSIEU ADOVEJ WHO	1		

******	111111111111111111111111111111111111111	· Check	ıf Schedule (	O con	taıns a	response	or note to any line	in this Part VIII		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts	1a	Federated car	npaigns	1a					W. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
Sra	b	Membership o	lues	1b			4.5			
s, ( Am	С	Fundraising e	vents	10					743	
Gift	d	Related organ	izations	1d				· 福州 · 清朝		
ıs, imi	е	Government grants	(contributions)	1e		4,087	The state of the s			
tior sr S	f	All other contribution					10.74		Section 1	
ibu		and similar amounts	not included above	1f	1,	<u>471,774</u>				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contribution	ns included in lines 1a-	1f :	\$	1,700		10.2		
<u>2 p</u>	h	Total. Add line	es 1a-1f				1,475,861	F40 5408	100	die in Constitution
nue			,			Busn Code			3-15	
eve	2a	COMMUNI	TY PROGRAMS			·	62,821	62,821		
e.	Ь	TRAININ	*		,	<u> </u>	55,000			
Z.	С	VENTANA					46,069			<u> </u>
S u	d	RESEARC				<del></del>	31,610			
gran	e	SETON L					1,373	1,373		
Program Service Revenue		Total. Add line	am service reve	nue			106 973			1+
_			come (including	dividen	de intere		190,873			
	Ŭ	and other simi	, -	aiviacii		· · •	176,471		*	176,471
	4		nvestment of tax	-exem	ot bond p	roceeds >	2707272			
	5	Royalties	The state of the s	OXO	pr bond p	• • • • • • • • • • • • • • • • • • •		· · · · · · · · · · · · · · · · · · ·		^
	- ,		(ı) Real		(II) F	Personal			· · · · · · · · · · · · · · · · · · ·	F-12
	6a	Gross rents	9,	107					5. See 14.	
	b	Less rental exps						74		
	C	Rental inc or (loss)	9,	107			100			
	_d	73 Gross amount from			<b></b>	9,107	•	-	9,107	
	√7a	Gross amount from sales of assets	(i) Securities		(11)	Other				
		other than inventory								and the second second
ł	b	Less cost or other	,					40.5		
		basis & sales exps								
		Gain or (loss)				<del></del>				
Ì		Net gain or (lo		. г			-	And the second		
e e	8a		om fundraising ever	nts			10 To	19		
ven /		(not including \$		ı			14 A20 M			
Be		See Part IV, line	eported on line 1c)	_]		4				
Other Revenu	h	Less direct ex				,				
ੂਰ			(loss) from fund	ເລເຣເກດ	evente		10-15		3/3/4/4	-
			om gaming activitie	г	0401113		10 T 10 T	2 2 2 2		
		See Part IV, line		a						
	b	Less direct ex		b						
			(loss) from gam	ing act	tivities			,	,	-
			f inventory, less	֓֟֓֟֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓						N. A.
ļ	•	returns and all		a			Talley In	1		
	b	Less cost of g	goods sold	<b>b</b> [					40 A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Fire Control
	C	Net income or	(loss) from sale	s of inv	entory	<u> </u>				
ļ		Mise	cellaneous Revenue			Busn Code	two establishes the			
	11a									
	_ <u>b</u>									an gare an ann an ann ann an an an ann an an an
	C	- ·				<u> </u>	-	· · · · · · · · · · · · · · · · · · ·		
İ	d	All other rever				L		Water!	The state of the s	Marka samona
	e	Total. Add line		.5.		<b>P</b>	1 050 310	100 000		105 570
	<u>12</u>	iotal revenue	e. See instruction	ıs			1,858,312	196,873	0	185,578

Statement of Functional Expenses

Sect	on 501(c)(3) and 501(c)(4) organizations must on Check if Schedule O contains a resp			mpiete column (A).	- X
	ot include amounts reported on lines 6b, lb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				By Standard Sair
	and domestic governments. See Part IV, line 21	8,700	8,700		
2	Grants and other assistance to domestic				1974 A 1984
	individuals See Part IV, line 22			and the same of th	The thinks the value the set
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				Page 1
	individuals See Part IV, lines 15 and 16			A CONTRACTOR OF THE CONTRACTOR	
4	Benefits paid to or for members			<b>高兴教、墨兴教、李</b>	
5	Compensation of current officers, directors,				
	trustees, and key employees	279,256	196,473	<u>67,620</u>	15,163
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	911,225	690,922	115,212	105,091
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	78,635		12,414	7,917
9	Other employee benefits	82,673		18,378	
10	Payroll taxes .	92,515	69,339	13,782	9,394
11	Fees for services (non-employees)				
а	Management				, , , , , , , , , , , , , , , , , , ,
b	Legal	54,307	772	53,535	
С	Accounting - ·	21,365		21,365	
d	Lobbying		The re- with te-make a that there	March. 1948 198800 Million Calmon	<u> </u>
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column	,			4
	(A) amount, list line 11g expenses on Schedule O)	503,250		143,999	
12	Advertising and promotion	113,346			
13	Office expenses	41,704	31,281	. 6,135	4,288
14	Information technology			<u> </u>	
15	Royalties	45.005	44.445	15.004	44 446
16	Occupancy	45,295	14,145	17,004	14,146
17	Travel .	136,748	65,683	57,565	13,500
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	· · · · · · · · · · · · · · · · · · ·			<u> </u>
19	Conferences, conventions, and meetings		<u> </u>		
20	Interest			<del>"</del>	
21	Payments to affiliates	F20 710	202 405	70 670	57 <i>6</i> 4 2
22	Depreciation, depletion, and amortization	520,718 116,145	383,405		
23	Insurance	110,140	86,069	18,521	11,555
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 )	222 072	166 226	25 AE7	22 100
а	REPAIRS & MAINTENANCE	223,973	166,326	35,457	22,190
b	OUTSIDE FACULTY/CONSULT.	158,354 144,281	158,354 117,674	20 472	£ 125
C	OTHER EXPENSES			20,472	
ď	NEW MEXICO GRT	61,815 48,053		39,057	9,574
e	All other expenses				
<u>-25</u> 26	Joint costs. Complete this line only if the	3,642,358	2,531,542	800,223	310,593
26	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)			/	

ACADEMY FOR THE LOVE OF Form 990 (2018)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 382,101 335,329 Cash-non-interest bearing 4,471,565 2,995,161 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 5.490 50 Accounts receivable, net Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees Complete Part II of Schedule L 6 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) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Notes and loans receivable, net Inventories for sale or use 8 125 25,320 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 18,546,679 other basis Complete Part VI of Schedule D 10a 3,605,324 15,390,365 14,941,355 10b b Less accumulated depreciation 10c 11 Investments—publicly traded securities 11 8,206,333 8,138,537 12 Investments—other securities See Part IV, line 11 13 Investments—program-related See Part IV, line 11 13 14 Intangible assets 14 363 5,363 15 15 Other assets See Part IV, line 11 28,408,301 26,489,156 16 Total assets. Add lines 1 through 15 (must equal line 34) 151,683 111,433 Accounts payable and accrued expenses 17 17 18 Grants payable 18 200 6,280 19 Deferred revenue 19 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, Liabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 117,713 151,883 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 28,117,290 27 26,305,495 Unrestricted net assets Temporarily restricted net assets 139,128 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 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 28<u>,</u>256,418 26,371,443 Total net assets or fund balances 28,408,301 26,489,156 34 Total liabilities and net assets/fund balances Form 990 (2018)

Form	990 (2018) ACADEMY FOR THE LOVE OF 86-0945282				Pa	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					_X_
1	Total revenue (must equal Part VIII, column (A), line 12)	1				312
2	Total expenses (must equal Part IX, column (A), line 25)	2	3	, 64	12,	<u> 358</u>
3	Revenue less expenses Subtract line 2 from line 1	3	1	.,78	34,	046
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	28	, 2!	56,	418
5	Net unrealized gains (losses) on investments	5		-10	00,	929
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10	26	, 3	71,	443
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		Γ			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in					
	Schedule O		1	Ì		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		[*	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		Ţ			
	reviewed on a separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		1			
	separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis		1			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		ľ			
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		İ	2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain in		Ī			
	Schedule O			İ		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		[*			
	the Single Audit Act and OMB Circular A-133?		- 1	3a		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		T T			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		Ī	3b		ĺ
				For	<sub>n</sub> 990	(2018)

### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust

▶ Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

ACADEMY FOR THE LOVE OF

Employer identification number 86-0945282

LEARNING, INC. Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 X A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ) ) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes 12 of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations Provide the following information about the supported organization(s) (ii) EIN (iv) Is the organization (i) Name of supported (iii) Type of organization (v) Amount of monetary (vi) Amount of listed in your governing organization (described on lines 1-10 other support (see support (see above (see instructions)) document? instructions) instructions) Yes (A) (B) (C) (D)

(E)

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any ັນຸnusual grants ") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 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) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (d) 2017 (e) 2018 (c) 2016 (f) Total Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax, year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 14 15 Public support percentage from 2017 Schedule A, Part II, line 14 15 16a 33 1/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2018

18

supported organization

instructions

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.)

Sec	tion A. Public Support	<del></del>		, p. ca. c		·/	
	ndar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose				`		
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5	The value of services or facilities furnished by a governmental unit to the organization without charge			· ·			<del></del>
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b	200 mm (200 mm)		makes Carlo Salama Analis (NA SALA)	2r Tiv. 140000021214642	\$46700±10000000000000000000000000000000000	
8	Public support. (Subtract line 7c from line 6)						
500	tion B. Total Support	WXX 1 10, WE 183		(24.8% A. W. W. V. V. W. V. V. V. V. V. V. V. V. V. V. V. V. V.	SA CARTER MARKE	English Company	
	ndar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	(4) 2011	(2) 23/3	(0) 2010	(4) 2017	(6) 2010	
10a	Gross income from interest, dividends,				<u> </u>		
104	payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	,					
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on			\			
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)			-			
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	and 12) First five years. If the Form 990 is for the	organization's fire	t second third fo	urth or fifth tay yo	ar as a section 501	1(2)(3)	
17	organization, check this box and stop her	_	t, secona, uma, re	artif, or martax yes	ar as a section so	((0)(0)	▶ □
Sec	tion C. Computation of Public St		tage				
15	Public support percentage for 2018 (line 8			nn (f))	·	15	
16	Public support percentage from 2017 Sch	• • • • • • • • • • • • • • • • • • • •	•	(.,,		16	%
	tion D. Computation of Investme				· · · · · · · · · · · · · · · · · · ·		
17	Investment income percentage for 2018 (I			3, column (f))		17	%
18	Investment income percentage from 2017			· · ·		18	%
19a	33 1/3% support tests—2018. If the orga			e 14, and line 15 is	more than 33 1/3	%, and line	<u></u>
	17 is not more than 33 1/3%, check this b						· \ ▶□
b	33 1/3% support tests—2017. If the orga						/ ~
	line 18 is not more than 33 1/3%, check the						` <b>`</b> \
20	Private foundation. If the organization di	d not check a box	on line 14, 19a, or	19b, check this bo	x and see instruct	ions	

# Part IV Supporting Or

**Supporting Organizations** 

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

## Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 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)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- **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
- c 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
- 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
- b 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
- c 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 to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?
  If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

	Yes	No
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10a		
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Form 99	0 or 990	F7) 2019

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or

Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

tructoes of each of the supported organizations? Provide details in Part VI.

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Schedule A (Form 990 or 990-EZ) 2018 ACADEMY FOR THE LOVE OF		86-0945	282 Page 6
Rart V. Type III Non-Functionally Integrated 509(a)(3) Supporting O	)rganiza	tions	
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on	Nov 20,	1970 (explain in Part VI) S	ee
instructions. All other Type III non-functionally integrated supporting organizations	must comp	olete 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		<u> </u>
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)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		<u>-</u>
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other	3		
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		_
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	_ 1		
2 Enter 85% of line 1	2	、	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		•
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionally integrate	ed Type III	supporting organization (s	see
instructions)			

Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018

ACADEMY FOR THE LOVE OF

86-0945282

Page 7

Secti	ion D - Distributions		,	Current Year
1	Amounts paid to supported organizations to accomplish exempt p	ourposes		
2	Amounts paid to perform activity that directly furthers exempt pur		<del></del> •	
	organizations, in excess of income from activity	рессе с. серрел.се		
3	Administrative expenses paid to accomplish exempt purposes of	supported organizations		
4	Amounts paid to acquire exempt-use assets	Supported organizations		
<u> </u>	Qualified set-aside amounts (prior IRS approval required)		<u></u>	
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the org	nanization is responsive		
Ū	(provide details in Part VI) See instructions	garrization is responsive		
9	Distributable amount for 2018 from Section C, line 6	<del></del>		
10		· · · · · · · · · · · · · · · · · · ·		<u> </u>
10	Line 8 amount divided by line 9 amount	(1)	(ii)	/:::\
	Contion E. Distribution Allegations (see matriculars)	(i) Excess Distributions	(ii)	(iii)
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
_	Destruction and the control of the c		Pre-2018	Amount for 2018
1_	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018	100	•	
	(reasonable cause required-explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2018			
	From 2013			
				Fig. 5
	From 2015			
	From 2015			
	From 2016			
	From 2017	STACO 2 TREE STATE		F 1500A
	Total of lines 3a through e			
	Applied to underdistributions of prior years		S 200829 (1995)   V AND NAC SOMEDANT G - TO 10	# 46.
<u>h</u>	Applied to 2018 distributable amount			and the second description of the second second second second second second second second second second second
i_	Carryover from 2013 not applied (see instructions)			
<u>. i</u>	Remainder Subtract lines 3g, 3h, and 3i from 3f	4+1/2000/2017 17- 17-4000/2000000000000000000000000000000000		The season
4	Distributions for 2018 from			
	Section D, line 7 \$			
a	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount	Section 1997		
С	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2018, if			
	any Subtract lines 3g and 4a from line 2 For result			
	greater than zero, explain in Part VI See instructions		۹	THE STATE OF THE S
6	Remaining underdistributions for 2018 Subtract lines 3h			,
	and 4b from line 1. For result greater than zero, explain in			<b>'</b>
	Part VI See instructions			
7	Excess distributions carryover to 2019. Add lines 3j		<b>34</b> 74	
	and 4c			
	Breakdown of line 7			
	Excess from 2014			
	Excess from 2015		227 23 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	Excess from 2016	INVESTIGATION CONTRACTOR CONTRACTOR		
	Excess from 2017			
u	LACESS HORI ZUTI		74年後の本人による。 シスカム 大変の 大変を表す。	1 5 60 40 40 40 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1

Schedule A (Form 990 or 990-EZ) 2018

ACADEMY FOR THE LOVE OF

86-0945282

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Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

# **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.

Go to www.irs.qov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Rublic

Inspection

Name of the organization Employer Identification number ACADEMY FOR THE LOVE OF LEARNING, INC. 86-0945282 Part 1 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 1 Total number at end of year 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? 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? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 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 a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 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 Tax Year a Total number of conservation easements 2a b 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 7/25/06, 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 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 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) Yes No 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 Part!!!! Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a 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 1,200 (ii) Assets included in Form 990, Part X 263,138 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 a Revenue included on Form 990, Part VIII, line 1 \$

Assets included in Form 990, Part X

Sche	edule D (Form 990) 2018 ACADEMY	FOR THE LOY	VE OF		86-0	945282	Page 2
' Pa	art III Organizations Maintaini	ng Collections of	Art, Historical To	reasures,	or Othe	r Similar Assets	
3	Using the organization's acquisition, access collection items (check all that apply)						
а	X Public exhibition	d X	Loan or exchange pro	grams			
b	X Scholarly research		Other	<b>3</b>			
С	X Preservation for future generations						
4	Provide a description of the organization's	collections and explain	n how they further the	organization'	s exempt	purpose in Part	
	XIII						
5	During the year, did the organization solicit	or receive donations	of art, historical treasu	res, or other	sımılar		
	assets to be sold to raise funds rather than		part of the organization	's collection'	?		Yes X No
Pa	ert IV Escrow and Custodial A						
	Complete if the organization 990, Part X, line 21.	on answered "Yes	" on Form 990, Pa	rt IV, line s	9, or rep	orted an amount	on Form
1a	Is the organization an agent, trustee, custo	dian or other intermed	lary for contributions of	or other asse	ts not		
	included on Form 990, Part X?						∐ Yes ∐ No
b	If "Yes," explain the arrangement in Part X	III and complete the fo	llowing table				
							Amount
С	Beginning balance					1c	
d	Additions during the year					1d	
e	Distributions during the year					1e	
T O	Ending balance					1f	<del></del>
	Did the organization include an amount on						∐ Yes  No
	If "Yes," explain the arrangement in Part XI  If "Yes," explain the	The check here if the ex	tpianation has been pr	ovided on P	ап хііі		] _
<u></u>	Complete if the organization	on answered "Yes"	on Form 990 Pa	rt IV line '	10		
-	oompleto ii tilo ol gamzatte	(a) Current year	(b) Prior year	(c) Two yea		(d) Three years back	(e) Four years back
1a	Beginning of year balance	139,128	191,760	· · · · · · · · · · · · · · · · · · ·	55,602	485,946	<del> </del>
b	Contributions		15,000			25,000	<del>                                     </del>
c	Net investment earnings, gains, and						,,,,
	losses						
d	Grants or scholarships						
e	Other expenditures for facilities and					· ·· · · · · · · · · · · · · · · · · ·	
	programs	73,180	67,632	•	53,842	255,344	234,054
f	Administrative expenses						
9	End of year balance	65,948	139,128	19	1,760	255,602	485,946
2	Provide the estimated percentage of the cu		e (line 1g, column (a))	held as			
а	Board designated or quasi-endowment ▶	%					
	Permanent endowment ▶ %						
С	•	00.00%					
	The percentages on lines 2a, 2b, and 2c sh	•		_			
за	Are there endowment funds not in the poss	session of the organiza	ition that are held and	administered	for the		[ <sub>12</sub> ] <sub>11</sub>
	organization by						Yes No
	(i) unrelated organizations						3a(i) X
h	(ii) related organizations						3a(ii) X
ا ا	If "Yes" on line 3a(ii), are the related organi Describe in Part XIII the intended uses of the						3b
Pa	rt VI Land, Buildings, and Equ		wittent tunds				
	Complete if the organization		on Form 990. Pa	rt IV line 1	l1a See	Form 990 Part )	Cline 10
_	Description of property	(a) Cost or other b		7		ccumulated	(d) Book value
		(investment)	(othe	er)	, -	preciation	
1a	Land		61	80,000			680,000
	Buildings			85,870	3 .	316,533	12,669,337
	Leasehold improvements			06,631		58,484	348,147
	Equipment			11,040		230,307	980,733
e	Other			63,138			263,138
Total	Add lines 1a through 1e (Column (d) mus	t oqual Form 000 Part	V column (R) line 10	100 1			14 941 355

	orm 990) 2018 ACADEMY FOR THE LOVE	OF	86-0945282	Page
Part VII	Investments—Other Securities.			
	*Complete if the organization answered "Yes" on			
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v Cost or end-of-year	
(1) Financial of	derivatives			
	eld equity interests			
(3) Other C	DSCHARLES SCHWAB	8,088,331	MARKET	
(A) <b>RS</b> :	F INVESTMENT FUND	118,002	MARKET	
(B)				
(C)				
(D)				
(E)	•			
(F)				
(G)				·. ·
(H)		0.006 333	- 1400 CNO (CNO) CSA 3-1/2800 (MS 7420 CNO) (CNO)	m man in the secret will have been secondaries
	n (b) must equal Form 990, Part X, col (B) line 12 ) ▶	8,206,333		
Part VIII	Investments—Program Related.	E 000 B (B()	44 0 5 000 0	
	Complete if the organization answered "Yes" on		1	
	(a) Description of investment	(b) Book value	(c) Method of v	
		-	Cost or end-of-year	
(1)				
(2)	w-			
(3)				
(4)			1	
(5)				
(6) (7)		-		
(8)	<del></del>	<del></del>		
(9)				
	n (b) must equal Form 990, Part X, col (B) line 13 ) ▶			
Part IX	Other Assets.		SHAMMA WINDOWN AND AND AND AND THE STATE OF THE SAME O	2.2.3° ** 5.6. * 96. \_\$.04.5748.000**********************************
Service Andrews	Complete if the organization answered "Yes" on	Form 990, Part IV, lin	e 11d See Form 990, Pa	art X, line 15
	(a) Description			(b) Book value
(1)				
(2)				<u>.</u>
_(3)				
(4)				
(5)				
(6)				
(7)				
(9) -		*		•
	n (b) must equal Form 990, Part X, col (B) line 15)		<u>_</u>	
Part X	Other Liabilities.	Form 000 Dort IV In	- 11 116 C F (	100 D-4 V
-	Complete if the organization answered "Yes" on	Form 990, Part IV, III	e Tie or Tif. See Form s	990, Part X,
	line 25.	(h) Beak value	1. 14. 15. 15. 15. 15. 15. 15. 15. 15. 15. 15	* 5 - 15 \$750, 1 Z 25 505 505 2 A
1. (1) Fodoral		(b) Book value		
	income taxes			
(2)				
(3)			****** *** *** *** *** *** *** *** ***	The second second
<u>(4)</u> <u>(5)</u>				
(6)		<del>                                     </del>		
(7)				
(8)			Topic and the second se	اُهُ الْمُرَّدِ (هِ يَقِيقِهِ الْمُلْهِينَ اللهِ هَالِي اللهِ عَلَيْهِ اللهِ عَلَيْهِ اللهِ عِلَيْهِ اللهِ عِل اللهُ اللهُ اللهُ اللهُ اللهُ اللهُ اللهِ اللهِ عَلَيْهِ اللهِ عَلَيْهِ اللهِ عَلَيْهِ اللهِ عَلَيْهِ عَلَيْهِ
(9)				

Total. (Column (b) must equal Form 990, Part X, col (B) line 25 ) ▶

**b** Prior year adjustments 2b c Other losses 2c

2d

e Add lines 2a through 2d 3 Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1

a Investment expenses not included on Form 990, Part VIII, line 7b

b Other (Describe in Part XIII)

d Other (Describe in Part XIII)

c Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

2,597 4b 2,597 4c 3,642,358

2e

3

3,639,761

### │ Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

#### PART X - FIN 48 FOOTNOTE

THE ACADEMY HAS RECEIVED TAX-EXEMPT STATUS UNDER CODE SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. THE ACADEMY HAS ADOPTED ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA, AS THEY RELATE TO UNCERTAIN TAX POSITIONS AND HAS EVALUATED ITS TAX POSITIONS TAKEN FOR ALL OPEN TAX YEARS. CURRENTLY, THE 2015, 2016 AND 2017 TAX YEARS ARE OPEN AND SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE AND NEW MEXICO TAXATION AND REVENUE DEPARTMENT. HOWEVER, THE ACADEMY IS NOT CURRENTLY UNDER AUDIT NOR HAS THE ACADEMY BEEN CONTACTED BY ANY OF THESE MANAGEMENT BELIEVES THAT THE ACTIVITIES OF THE ACADEMY ARE JURISDICTIONS. WITHIN THEIR TAX-EXEMPT PURPOSE, AND THAT THERE ARE NO UNCERTAIN TAX POSITIONS. THEREFORE, NO PROVISION FOR THE EFFECTS OF UNCERTAIN INCOME

Part XIII | Supplemental Information (continued)

TAXES HAS BEEN RECORDED FOR THE YEARS ENDED 2018 AND 2017, RESPECTIVELY.

NO INTEREST OR PENALTIES WERE RECORDED IN 2018 OR 2017.

PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER

LOSS ON ABANDONMENT OF ASSETS \$ -2,597

PART XII, LINE 4B - EXPENSE AMOUNTS INCLUDED ON RETURN - OTHER

LOSS ON ABANDONMENT OF ASSETS \$ 2,597

PART XIII - SUPPLEMENTAL FINANCIAL INFORMATION

THE ACADEMY MAINTAINS A COLLECTION OF ART AND ARTIFACTS MADE BY ERNEST THOMPSON SETON AND OTHERS. THE COLLECTION FURTHERS THE ACADEMY'S EXEMPT PURPOSE BY PROVIDING MATERIAL FOR USE IN THE ACADEMY'S PROGRAMS, WORKSHOPS, CONFERENCES, COLLABORATIONS, AND PUBLICATIONS REGARDING LEARNING AND EDUCATION.

# SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Schools**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

2018
Open to Publi

OMB No 1545-0047

Open to Public Inspection

Name	of the organization ACADEMY FOR THE LOVE OF	Employer identification numbe	r	
<u> </u>	LEARNING, INC.	86-0945282		
į Pi	art'l	<del></del>	T	T
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	′ 1	X	S NO
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions,		X	
3	programs, and scholarships?  Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please	<u>2</u>	×	, ,
	describe If "No," please explain If you need more space, use Part II  PUBLICATION IN LOCAL NEWSPAPER.			A Company of the Comp
4	Does the organization maintain the following?		1 1	_
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	┷
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	<u>4b</u>	x	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c		
d,	Copies of all material used by the organization or on its behalf to solicit contributions?  If you answered "No" to any of the above, please explain. If you need more space, use Part II	44	<b>X</b>	
_		(2)-6-		
5 a	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	<u>ئىنىڭ</u> 5a		X
a	Students rights of privileges?	_ <u>5a</u>	+-	+
b	Admissions policies?	5b		x
С	Employment of faculty or administrative staff?	50	<u> </u>	x
d	Scholarships or other financial assistance?	<u>5</u> d		x
е	Educational policies?	. <u>5e</u>		<u> </u>
f	Use of facilities?	51	ļ	x
g	Athletic programs?	. 59	<u> </u>	x
h	Other extracurricular activities?	5h	<u> </u>	x
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II	, ,	·	
	•	· · · · · · · · · · · · · · · · · · ·	},	,
	•		1 *	
				<u>.</u> .
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	X	-
b	Has the organization's right to such aid ever been revoked or suspended?	6b	_	x
	If you answered "Yes" on either line 6a or line 6b, explain on Part II	\$\frac{1}{2}\frac{1}{2}	<del>,  </del>	<del> </del> ;
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through		~	

4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information. See instructions.

SCH E - FINANCIAL AID OR GOVERNMENT ASSISTANCE EXPLANATION
THE STATE OF NEW MEXICO PROVIDED A GRANT IN THE
AMOUNT OF \$4,087 TO THE ACADEMY TO SUPPORT THE LIFESONGS
PROGRAM.

### **SCHEDULE J**

¹(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Go to www.irs.gov/Form990 for instructions and the latest information.

ACADEMY FOR THE LOVE OF

OMB No 1545-0047

Open to Rublic

LEARNING, INC.

Employer identification number 86-0945282

P	arti Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form			
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			1
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
				100
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment		4.4	
-	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to	بهمتعدیت.	423	.   <u></u>
	explain	16		
			10 C	200
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all	210274	200,845.25	24.2882
_	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	,		
		<u>₹</u>	1 27	3390
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
3	organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a			
		100	200 XX	
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III	70, 70°	* A 4000	
	Compensation committee Written employment contract			
	Independent compensation consultant  X Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee	P. F.		
			6 35 28 3	
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing		The second	
	organization or a related organization	200	100	200
а	Receive a severance payment or change-of-control payment?	4a		X
b	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	4b		X
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	7 30 W	X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
				39/06
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.	(33)		270
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	3.40		100.76
	compensation contingent on the revenues of	* * * * * * * * * * * * * * * * * * *	W	
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III		. 75.4°	
		8 ( )		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	7.3	in the	
	compensation contingent on the net earnings of	2 12		332 ca-8
а	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III		1000	17.00
		ئىنا	2 (m)	
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
	payments not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
-	in Part III	8	İ	x
		V-3	10° 15° E	97.53
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	1	Same Sales	
-	Regulations section 53 4958-6(c)?	1	1	1

Page 2,

86-0945282 ACADEMY FOR THE LOVE OF Schedule J (Form 990) 2018 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 aren't 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

		0007					
(A) Name and Title	(b) Dreakdown of (i) Base compensation	(i) Base (ii) Bonus & incentive (iii) Other compensation compensation compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(I)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	141,707		0	9,920	0	151,627	0
rive dir.	(11)	0	0		0		0
	9		-				
2	(11)						
	€	•	-				
3	(11)						
	S (						
4	(E)						
v.	<b>3 3</b>	•	-				
	(6)						
)	(ii)						
	€ #	•					
8	(II)	-					
	(0)						
)	(I)						
0,	€ €						
	(n) (i)						
	© (E)						
	(E)						
	(1)						
	(n) (0)						
	(i)						

Schedule J (Form 990) 2018

Inspection

## **SCHEDULE L** (Form 990 or 990-EZ)

**Transactions With Interested Persons** 

Complete if the organization answered "Yes" on Form 990, Part IV, line 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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open To Public

Department of the Treasury Internal Revenue Service Name of the organization

| Part |

ACADEMY FOR THE LOVE OF

Employer Identification number

LEARNING, INC.	86-0945282
Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organization	ions only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ	Part V line 40b

	(a) Name of disqualified person	(b) Relationship between disqualified person and	4.20	(d) Corrected?	
1		organization	(c) Description of transaction	Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)	<del></del>		<del></del>		

Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958

Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

**>** \$ \_\_\_\_\_

(i) Written agreement?

Yes No

Part II	Loans to and/or From Int	erested Perso	ns.								
	Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26, or if the										
	organization reported an amount	on Form 990, Part	X, line 5, 6, o	r 22							
	(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loai or from org ?	the	(e) Original principal amount	(f) Balance due	(g) In	default?	(h) Ap by bo comm	ard o
				To Fr	rom			Yes	No	Yes	N
(1)											
(2)											

(10)

▶ \$

Total Part III **Grants or Assistance Benefiting Interested Persons.** 

Complete if the organization answered "Yes" on Form 990, Part IV, line 27

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)				<u> </u>	
(7)					
(8)					
(9)					
(10)					

Schedule L (Form 990 or 990-EZ) 2018 ACADEMY I	FOR THE LOVE OF	P	86-0945282	Page
Part IV Business Transactions Involving				
* Complete if the organization answered "Yes	on Form 990, Part IV, line 2	8a, 28b, or 28c		
(a) Name of interested person	(b) Relationship between	(c) Amount of	(d) Description of transaction	(e) Sharing of org
•	interested person and the	transaction		revenues?
	Organization			Yes No
(1) DAVID GORDON	TRUSTEE/VP/SEC	28,291		x
(2) MARIANNE MURRAY	TRUSTEE	37,878	CONTRACT	X
(3)	<del></del>			
(4)				
(5)	<del>+</del>			<del></del>
(6)	<del>                                     </del>			<del>-   -   -   -   -   -   -   -   -   -  </del>
(7) (8)	<del> </del>		<del></del>	++-
(9)				
10)	<del></del>			
Part V   Supplemental Information				
Provide additional information for responses	to questions on Schedule L (	see instructions)		
SCHEDULE L, PART V - ADDITIO	NAL INFORMATIO	N		
THE ORGANIZATION LEASES AN A	PARTMENT FROM	THE INTERES	TED PERSON IN	
MANUAMMAN NEW WORK MUE ODG	INNITERMENT VICTOR		mum sa operació	D B (717)
MANHATTAN, NEW YORK. THE ORG	ANIZATION USES	THE APARTM	ENT AS OFFICE SI	PACE,
GIVING THE ORGANIZATION A BA	SE FOR OPERATT	ONS IN THE	NEW YORK RECTON	THE
GIVING IND ONGMILLATION A DA	DE TOR OFEREIT	OND IN THE	MEN TORK REGION	
RENTAL PRICE FOR THE ORGANIZ	ATION IS BELOW	THE FAIR M	ARKET VALUE OF	SIMILAF
APARTMENTS IN NEW YORK. THE	BOARD OF TRUST	EES APPROVE	D THE LEASE WITH	H THE
INTERESTED PERSON ABSENT FRO	M THE DISCUSSI	ON AND ABST	AINING FROM THE	VOTE.
	<del></del>	<del></del>		
THE INTERESTED PERSON IS A L	ONG-TIME MEMBE	R OF THE OR	GANIZATION'S FAC	CULTY.
THE INTERESTED PERSON PROVID	ES FACULTY SER	VICES TO TH	E ORGANIZATION A	AS AN
TATHERENTENIA CONTRACTOR THE	DOND OF MULICIA	DEC CEMC MY	m named On	
INDEPENDENT CONTRACTOR. THE	BOARD OF TRUST	EES SETS TH	E RATES OF	
COMPENSATION FOR THESE SERVI	ר אויי ויידע פאר	ם משקיים	FRCON ARCENT FR	מעיד אר
COMPANDATION TON THE BERNI	CDD WIIII IIII I	MIDREDIED F	BROOM ADDENT FIN	J11 11113
DISCUSSION AND ABSTAINING FR	OM THE VOTE.	THE RATES A	RE COMPARABLE TO	O THE
	<u> </u>			
RATES THE ACADEMY PAYS TO OT	HER NON-INTERE	STED PERSON	FACULTY.	
<del></del>				

## **SCHEDULE M** \*(Form 990)

**Noncash Contributions** 

OMB No 1545-0047

2018

Open To Public Inspection.

Department of the Treasury Internal Revenue Service Name of the organization

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

ACADEMY FOR THE LOVE OF

Employer identification number

	LEARNING	INC	•			<u>86-094</u>	5282		
<u>P</u>	Types of Property		,	<del></del>	·- <u></u>				
	•	(a) Check if applicable	(b) Number of contributions or items contributed	(C)  Noncash contribution  amounts reported on  Form 990, Part VIII, line 1q	ne	(d) Method of dete	<del>-</del>	-	
1	Art Works of art	x	2	500	SIMILAR	WORKS	OF AR		
2	Art — Historical treasures		<del>-</del>	300	DIMITING	HOLLID	OI MIC.	<u> </u>	
3	Art — Fractional interests	<u> </u>			<u> </u>				
4	Books and publications	х		1,200	SIMILAR	BOOKS			
5	Clothing and household	<del></del>			<u> </u>	2001.0			
Ů	goods		grant and the second		·	•			_
6	Cars and other vehicles								
7	Boats and planes				<del></del>				
8	Intellectual property				_ <del></del>				
9	Securities — Publicly traded								
10	Securities — Closely held stock								
11	Securities — Partnership, LLC,			İ					
	or trust interests								
12	Securities — Miscellaneous								
13	Qualified conservation								
	contribution — Historic								
	structures								
14	Qualified conservation								
	contribution — Other								
15	Real estate — Residential				<del></del>	<del> </del>			
16	Real estate — Commercial								
17	Real estate — Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts			<del></del>					
23	Scientific specimens								
24	Archeological artifacts				<del></del> _				
25	Other ► (								
26 27	Other ()								
27 28	Other ► ( ) Other ► ( )				<u> </u>				
28		bo organi	antion during the toy year	r for anatubutions for			<del></del> -		
29	Number of Forms 8283 received by t which the organization completed Fo	•	•		20				
	which the organization completed is	JIIII 0203,	ran IV, Donee Acknowle	eugement [	29			Yes	No
30a	During the year, did the organization	rocowo b	v contribution any proper	tu roportod in Dort I. lines 1	l through			162	No
<b>30</b> a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required								ا الأثار الإسرامية على المراجعة
	to be used for exempt purposes for t	-		ontribution, and which isn t	required		300	459600	X
h	If "Yes," describe the arrangement in		lolding period?				30a	18	- <del></del>
31	Does the organization have a gift acc		solicy that requires the re	wow of any nanatandard					
J1	contributions?	Jepianie [	oney that requires the re	wiew or arry nonstandard			31	X	
32a	Does the organization hire or use thi	rd parties	or related organizations (	to solicit process or sell pr	กที่cash		51	<u></u>	$\vdash$
J_4	contributions?	. 5 partios	o. Tolatos organizations	to condit, process, or sell th	Onough		32a		x
b	If "Yes," describe in Part II						324	*****	
33	If the organization didn't report an an	nount in c	olumn (c) for a type of pro	operty for which column (a)	) is checked			3.5	,
-	describe in Part II		'	opolity for which column (a)	, io officoned,				<u> </u>
								" AERECK	- >>> ^<@

Schedule M (Form 990) 2018 ACADEMY FOR THE LOVE OF

86-0945282

Page 2

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M - SUPPLEMENTAL INFORMATION

PART I, COLUMN (B) INCLUDES THE NUMBER OF ITEMS RECEIVED.

"SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

2018

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. Open to Public Inspection

Name of the organization

ACADEMY FOR THE LOVE OF LEARNING, INC.

Employer identification number

86-0945282

FORM 990 - ADDITIONAL INFORMATION

PART VI, SECTION B, LINE 12C:

ALL TRUSTEES, OFFICERS, AND EMPLOYEES ARE REQUIRED ANNUALLY TO READ THE CONFLICT POLICY AND TO SUBMIT A CONFLICT OF INTEREST INFORMATION FORM THAT THE FINANCE MANAGER REVIEWS AND MAINTAINS WITH THE PRESIDENT/EXECUTIVE DIRECTOR. AT THE START OF BOARD MEETINGS, TRUSTEES ARE REMINDED OF THEIR DUTY TO BE AWARE OF AND TO DISCLOSE POTENTIAL CONFLICTS.

FORM 990, PART III - ADDITIONAL INFORMATION

VENTANA: EXPENSES \$48,018 (INCLUDING GRANTS OF \$0); EARNED REVENUE \$:46,069
THE ACADEMY CONTINUED TO IMPLEMENT ITS LEARNING FIELD MODEL FOR OTHER
NONPROFIT ORGANIZATIONS THROUGH ITS VENTANA PROJECT, WHICH REACHED 24
PEOPLE IN AN ORGANIZATION THAT RETAINED VENTANA FOR ADVISORY SERVICES AND
PROGRAMS.

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENTS

SETON: EXPENSES \$138,778 (INCLUDING GRANTS OF \$0); EARNED REVENUE \$1,373:

THE ACADEMY'S SETON LEGACY PROJECT SERVED 175 PEOPLE IN LECTURES, TOURS,

AND THE SETON ANNUAL EXHIBITION.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

THE ACADEMY'S INDEPENDENT CPA FIRM PREPARES A DRAFT OF THE 990. THE DRAFT

IS REVIEWED BY THE ACADEMY'S EXECUTIVE DIRECTOR AND FINANCE MANAGER, THE

ACADEMY'S OUTSIDE ATTORNEY, AND THE FINANCE COMMITTEE OF THE BOARD OF

Page 2

Employer identification number

86-0945282

#### ACADEMY FOR THE LOVE OF

TRUSTEES BEFORE IT IS FINISHED FOR FILING WITH THE IRS. ALL TRUSTEES RECEIVE A COPY BEFORE THE FORM 990 IS FILED.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY ALL TRUSTEES, OFFICERS, AND EMPLOYEES ARE REQUIRED ANNUALLY TO READ THE CONFLICT POLICY AND TO SUBMIT A CONFLICT OF INTEREST INFORMATION FORM THAT THE FINANCE MANAGER REVIEWS AND MAINTAINS WITH THE PRESIDENT/EXECUTIVE DIRECTOR. AT THE START OF BOARD MEETINGS, TRUSTEES ARE REMINDED OF THEIR DUTY TO BE AWARE OF AND TO DISCLOSE POTENTIAL CONFLICTS.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL FOR THE PRESIDENT/EXECUTIVE DIRECTOR AND FOR ALL OTHER PAID OFFICERS AND EMPLOYEES WHO ALSO SERVE ON THE BOARD OF TRUSTEES, THE BOARD SETS THE SALARIES USING SALARY SURVEY DATA FOR COMPARABLE POSITIONS AND TAKING INTO CONSIDERATION EACH EMPLOYEE'S VALUE TO THE ACADEMY AND INDIVIDUAL RESPONSIBILITY AND CIRCUMSTANCES. THIS PROCESS IS SUBJECT TO THE ACADEMY'S CONFLICT OF INTEREST POLICY. COMPENSATED OFFICERS AND EMPLOYEES WHO ALSO ARE TRUSTEES ARE ABSENT AND ABSTAIN FROM DISCUSSION AND VOTE CONCERNING THEIR OWN SALARIES.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS FOR EACH EMPLOYEE WHO IS ALSO A TRUSTEE OR AN OFFICER, THE BOARD SETS THE SALARIES USING SALARY SURVEY DATA FOR COMPARABLE POSITIONS AND TAKING INTO CONSIDERATION EACH EMPLOYEE'S VALUE TO THE ACADEMY AND INDIVIDUAL RESPONSIBILITY AND CIRCUMSTANCES. THIS PROCESS IS SUBJECT TO THE ACADEMY'S CONFLICT OF INTEREST POLICY. COMPENSATED OFFICERS AND EMPLOYEES WHO ALSO ARE TRUSTEES ARE ABSENT AND ABSTAIN FROM DISCUSSION AND VOTE CONCERNING

Name of the organization

ACADEMY FOR THE LOVE OF

Employer identification number

86-0945282

THEIR OWN SALARIES.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION GOVERNING DOCUMENTS, THE CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE AT THE DISCRETION OF THE BOARD OR MANAGEMENT OR AS OTHERWISE REQUIRED BY LAW.

FORM 990, PART IX, LINE 11G - OTHER FEES FOR SERVICES DESCRIPTION

TOT/PRO	OG SERVICE	MGT a	& GENERAL	FUN	DRAISING
CONSULTING					
\$	199,645	\$	110,599	\$	188
PAYROLL ADMINISTRA	rion				
\$	0	\$	3,777	\$	0
OTHER PROFESSIONAL	FEES				
\$	140,219	\$	29,623	\$	19,199
TOTAL					
\$	339,864	\$	143,999	\$	19,387
FORM 990, PART XI,	LINE 9 - OTHER	CHANGES	IN NET ASSETS	EXPLANAT:	ION
LOSS ON ABANDONMENT	r of assets			\$	-2,597
LOSS ON ABANDONMENT	r of assets			\$	2,597