# DLN: 93493131040351

2018

OMB No. 1545-0047

Department of the Treasury

**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.

 $\blacktriangleright$  Go to  $\underline{\textit{www.irs.gov/Form990}}$  for instructions and the latest information.

Open to Public Inspection

		- 2010 -	 	10	2010				
			alendar year, or tax year beginning 10-01-20 C Name of organization	16 , and ending 09-30	-2019		Employ	er identif	fication number
		pplicable: change	Jobs for the Future Inc						reación number
	me ch	- 1					06-116	4568	
	tial ret		Doing business as						
		n/terminated I return	Number and street (or P.O. box if mail is not delivered	to street address) Room/suit	·p	— E	Telephor	ne number	
		on pending	88 Broad Street	10011,001			(617) 7	28-4446	
			City or town, state or province, country, and ZIP or for	reign postal code			· /		
			Boston, MA 02110			G	Gross re	ceipts \$ 3	4,597,019
			F Name and address of principal officer:		H(a)	Is this a c	group re	turn for	
			Maria Flynn 88 Broad Street8th Floor			subordina			□Yes <b>☑</b> No
			Boston, MA 02110			Are all su included?		tes	☐ Yes ☐No
[ Ta:	x-exen	npt status:	<b>✓</b> 501(c)(3)	4947(a)(1) or				list. (see	instructions)
J W	ebsit	e:► ww	v.jff.org		H(c)	Group exe	emption	number	<b>&gt;</b>
					1 1/		1005	<b>1.4</b> c	61 11 11
<b>K</b> Forr	n of or	ganization	✓ Corporation ☐ Trust ☐ Association ☐ Other	<b>&gt;</b>	<b>L</b> Year o	f formation	: 1986	M State MA	of legal domicile:
Ps	art I	Sum	nary						
1 6			cribe the organization's mission or most significan	nt activities:					
	J	IFF is build	ling a society in which everyone has the skills, res	sources, and credentials th	ney need	d to achie	ve econ	omic adv	ancement. To reach
၁င	<u> </u>	nis goai,	we drive transformation of the American workforce	e and education systems.					
Ē	-								
Š	-								
3			s box ▶				its net a	ssets.	8
<b>න්</b> ග			of independent voting members of the governing b	•				4	-
Activities & Governance	l		nber of individuals employed in calendar year 201	, , , , ,				5	204
			ber of volunteers (estimate if necessary)	,				6	
ĕ	l		elated business revenue from Part VIII, column (C)			7a	(		
	l		ated business taxable income from Form 990-T, li				7b	(	
			· ·			Prior Y	/ear		Current Year
O.	8	Contribut	ions and grants (Part VIII, line 1h)			;	24,869,	752	23,675,593
Ravenue	9	Program	service revenue (Part VIII, line 2g)	:	11,405,	759	10,403,546		
λċι	10	Investme	nt income (Part VIII, column (A), lines 3, 4, and 70		336,	253	445,110		
ш	11	Other rev	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10	c, and 11e)			669,	019	72,76
	12	Total rev	enue—add lines 8 through 11 (must equal Part VIII	I, column (A), line 12)		;	37,280,	783	34,597,019
	13	Grants ar	d similar amounts paid (Part IX, column (A), lines	1-3)			6,365,	777	6,306,663
	14	Benefits	paid to or for members (Part IX, column (A), line 4			0	(		
&	15	Salaries,	other compensation, employee benefits (Part IX, $oldsymbol{c}$	column (A), lines 5–10)			18,159,	105	20,272,369
sus	16a	Professio	nal fundraising fees (Part IX, column (A), line 11e	)				0	(
Expenses	l		aising expenses (Part IX, column (D), line 25) ▶ <u>792,900</u>						
ш	17	Other exp	penses (Part IX, column (A), lines 11a-11d, 11f-24	4e)			15,526,	548	14,719,18
		-	enses. Add lines 13–17 (must equal Part IX, colum	nn (A), line 25)			40,051,		41,298,220
(0	19	Revenue	less expenses. Subtract line 18 from line 12 .				-2,770,		-6,701,20
Net Assets or Fund Balances					Begi	nning of C	urrent Y	ear	End of Year
afair	20	Total ass	ets (Part X, line 16)				39,395,	622	33,813,03
Z Z			lities (Part X, line 26)				5,708,		6,571,43
ŠĒ	22	Net asset	s or fund balances. Subtract line 21 from line 20			:	33,687,	400	27,241,598
Pa	rt II	Sign	ature Block					<b>I</b>	
			erjury, I declare that I have examined this return, f, it is true, correct, and complete. Declaration of						
	nowle		, it is true, correct, and complete. Declaration of	preparer (other than office	-1) 13 00	ised on a	i iiiioiiii	acion or v	which preparer has
		<b> </b> *****				2024 04	. 00		
cian		<b> </b>	ire of officer			2021-04 Date	1-09		
Sign Here		Maria 6	lynn President and CEO						
			r print name and title						
		P	rint/Type preparer's name Preparer's signa					PTIN	
Paid	t			20	21-04-09	Check L self-emp		P0084018	4
	pare	er 🗐	rm's name			Firm's E	IN ▶ 04	-2943536	
-	On	⊢	rm's address ▶ 401 Edgewater Place Suite 300			Phone n	o. (781)	245-9999	
		· [	Wakefield, MA 018806208				. (. 51)		
\1 -· ·	L. TP		<u> </u>	in about attace - \				[J].	
viay t	ne IR	5 aiscuss	this return with the preparer shown above? (see i	instructions)				<u>✓</u> \	res □No

Form	990 (2018)					Page <b>2</b>
Pa	rt III Statement	of Program Service	e Accomplis	hments		
	Check if Sche	dule O contains a respo	nse or note to	any line in this Part III .		🗆
1	Briefly describe the	organization's mission:				
		which everyone has the the American workforce			need to achieve economic adv	rancement. To reach this goal,
2	the prior Form 990 c	undertake any significa or 990-EZ?		vices during the year wh	ich were not listed on	☐ Yes ☑ No
3	Did the organization services?		ake significant	changes in how it conduc	cts, any program	. □Yes ☑No
4	Section $501(c)(3)$ ar		ns are required	to report the amount of	argest program services, as r grants and allocations to oth	
4a	(Code: See Additional Data	) (Expenses \$	9,596,882	including grants of \$	1,931,801 ) (Revenue \$	3,659,588 )
4b	(Code: See Additional Data	) (Expenses \$	7,707,468	including grants of \$	2,245,789 ) (Revenue \$	6,261,613 )
4c	(Code: See Additional Data	) (Expenses \$	7,355,754	including grants of \$	1,188,043 ) (Revenue \$	1,268,583 )
	(Code:	) (Expenses \$	8,396,817	including grants of \$	941,030 ) (Revenue \$	3,240,718 )
4d	Other program servi (Expenses \$	ces (Describe in Schedu 8,396,817 incl	ıle O.) uding grants of	\$ 941,03	30 ) (Revenue \$	3,240,718 )
4e	Total program ser	vice expenses ►	33,056,9	21		Form <b>990</b> (2018)

Par	tiV Checklist of Required Schedules			
			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 2	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🐒	2	Yes	
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		No
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	Yes	
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 98-19?  If "Yes," complete Schedule C, Part III	5		No
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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets?  If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 2	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or $X$ as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 🕏	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
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	Yes	
	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII 2	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section $170(b)(1)(A)(ii)$ ? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
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? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17		No
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		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
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Pa	Checklist of Required Schedules (continued)						
			Yes	No			
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes				
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No			
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b					
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c					
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d					
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.  Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No			
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?  If "Yes," complete Schedule L, Part I						
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No			
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III						
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):						
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,  Part IV	28a		No			
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,	28b		No			
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No			
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$	29		No			
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No			
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No			
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?  If "Yes," complete Schedule N, Part II	32		No			
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		No			
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes				
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No			
b	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		No			
37	7 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						
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O						
Pa	Statements Regarding Other IRS Filings and Tax Compliance						
	Check if Schedule O contains a response or note to any line in this Part V			ᅟ			
	Estable manifestation Day 2 defines 4000 Estable 0 M of the U.S. o		Yes	No			
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 151						
b	Enter the number of Forms W-2G included in line 1a.Enter -0- if not applicable . 1b 0			ı			

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No

the organization a party to a prohibited tax shelter transaction at any time during the tax year? . b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . . . . . . . . . . . . . . . . . 5c бa

Nο 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization Nο solicit any contributions that were not tax deductible as charitable contributions? . . . b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were 

Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services 7a No **7**b If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . . . . . Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 70 Nο **d** If "Yes," indicate the number of Forms 8282 filed during the year . . . . 7d

e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Nο 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . No If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during

8 **9a** Did the sponsoring organization make any taxable distributions under section 4966? . . . 9a **b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 . . . 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b

11 Section 501(c)(12) organizations. Enter: 11a **b** Gross income from other sources (Do not net amounts due or paid to other sources 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a **b** If "Yes," enter the amount of tax-exempt interest received or accrued during the year.

12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers.

a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 13a **b** Enter the amount of reserves the organization is required to maintain by the states in 13b which the organization is licensed to issue qualified health plans . . . . 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? . . . . . 14a No

14b

15

Nο

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**b** If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N . . . . .

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

-orm	990 (2018)			Page
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.  Check if Schedule O contains a response or note to any line in this Part VI	" respo	onse to	lines 🗹
Se	ction A. Governing Body and Management			
		$\longrightarrow$	Yes	No
la	Enter the number of voting members of the governing body at the end of the tax year label 1a 8			
	If there are material differences in voting rights among members of the governing			
	body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			
	<b>1b</b> 7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7</b> b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	<u>3 Coa€</u>	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	103	No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the			
	form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt			
	status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶  MA , CT , OR			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website  Another's website  Upon request  Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest			
22	policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records: Laura Nerney 88 Broad Street 8th Floor Boston, MA 02110 (617) 728-4446			

Part VII

VP

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax 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, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations.

• List all of the organization's <b>former director</b> organization, more than \$10,000 of reportable co	ompensation fro	m the	organ	izati	ion a	and ar	ny re	elated organization	s.	
List persons in the following order: individual trust compensated employees; and former such person		rs; inst	itutio	nai t	rust	ees; o	OTTICE	ers; key employees	s; nighest	
Check this box if neither the organization no	r any related or	ganizat	ion c	omp	ens	ated a	any o	current officer, dire	ctor, or trustee.	
<b>(A)</b> Name and Title	(B) Average hours per week (list any hours for related	pers	an òn on is	e bo both	t che x, u n an or/tr	nless office ustee	er )	compensation from the organization	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations
(1) Guy Patton	1.00	x						0	0	0
Director		^						0	0	0
(2) Maria K Flynn President and CEO	40.00	X		х				418,781	0	50,396
(3) Teresa Hassara	1.00									
Director		Х						0	0	0
(4) Tod Loofbourrow Director	1.00	Х						0	0	0
(5) Shana DeSmit Director	1.00	Х						0	0	0
(6) Lisette Nieves Director	1.00	X						0	0	0
(7) Willa Seldon Director	1.00	X						0	0	0
(8) Richard Reeves Director	1.00	Х						0	0	0
(9) Kothari Sonali COO/Labs	40.00			х				128,846	0	8,099
(10) Joel H Vargas VP	40.00				х			236,024	0	39,703
(11) Amy Loyd VP	40.00				х			168,023	0	36,160
(12) Michael L Collins VP	40.00				х			219,480	0	46,374
(13) Lili Allen Associate VP	40.00					х		184,526	0	40,884
(14) Marged K Fox Associate VP	40.00					х		177,073	0	21,107
(15) Kathryn J Mannes VP	40.00					х		244,040	0	29,668
(16) Eric Seleznow Senior Advisor	40.00					х		196,442	0	11,085
(17) Karyl Conescu	40.00									

35.478

200,775

	t VII Section A. Officers, Directors	K	ev Em	ınlov			d Hi	ahe	et Compensated	Employees (con	tinued)	Page 8
Fai	(A) Name and Title	(B) Average hours per week (list any hours for related	Position than o	ion (do one bo both a direct	(C) do no box, u an of ctor/t	ot che unles ifficer	eck moss ss pers r and a tee)	nore rson a	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estima amount of compension from organizat	ated of other sation the
		organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		MISC)	relat organiza	:ed
	Melba Abreu	0.00						X	212,500	0		0
	er CFO Patricia Balana	40.00		+	$\vdash$	+-'	$\vdash$	+-'	+ +			
<u>coo</u>		40.00		<del> </del>	<del> -</del>	 		X	227,880	0		9,611
				<del>                                     </del>	<del> </del>							
1b S	Sub-Total		<del></del>	<u>—</u>	<del></del>	<del></del>	<del>-</del>		<del> </del>			
	Total from continuation sheets to Part V	•				•	<u>*</u>		2.511.200	0		322 565
2	Total (add lines 1b and 1c)  Total number of individuals (including but of reportable compensation from the orga	t not limited to t				ve) w		ceiv.	2,614,390 red more than \$100	-		328,565
3	Did the organization list any <b>former</b> office line 1a? <i>If "Yes," complete Schedule J for</i>							_	est compensated en	mployee on 3	<b>Yes</b> Yes	No
4	For any individual listed on line 1a, is the organization and related organizations greindividual	eater than \$150	0,000? 1	If "Ye						he • • • 4	Yes	
5	Did any person listed on line 1a receive or services rendered to the organization? If "	"Yes," complete							ganization or individ	dual for 5		No
Se 	ection B. Independent Contractors  Complete this table for your five highest of from the organization. Report compensation.	compensated inc tion for the caler								tax year.		
	Name and b	(A) business address							Descript	(B) tion of services	(C) Compen	sation
51 Se	Associates LLC								Consulting			282,220
_	ton, VT 05495 ncorporate LLC								Consulting		<del> </del>	248,847
	ox 775367											*
-	go, IL 606775367 Code LLC				—			—	Website Consul	 lting		206,503
	y Street Suite 924											
Ideas	lyn, NY 11201 United LLC								Consulting			181,181
	rizona Avenue Suite 104 ta, GA 30307											
	p Public Solutions	_	_	_	_	_	_	_	Consulting			160,000
Washi	K Street NW Suite 320 ington, DC 20007											
	Total number of independent contractors (in compensation from the organization ▶ 11	ncluding but not	: limited	1 to ti	hose	: liste	ed abo	ove)	who received more	: than \$100,000 от	Form 990	n (2018)

Part	VIII	Statement of									
		Check if Schedul	e O contains a	a respo	onse or note to ar	(	(A) revenue	(B) Relate exem functi	d or pt	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1a	Federated campaign	ns	1a				reven	ue		512 - 514
nts mts		• Membership dues		1b		-					
Gra nou	c	: Fundraising events		1c		_					
fs, - r A	d	Related organizatio	ns	1d		-					
nija Gir	е	Government grants (co	ontributions)	1e	4,937,452	<u>-</u> 2					
ons,	f	All other contributions, and similar amounts n		_		_					
Contributions, Gifts, Grants and Other Similar Amounts	g	above  Noncash contribution in lines 1a - 1f:\$		1f	18,738,141	<u>L</u>					
	h	Total. Add lines 1a	-1f		🕨		23,675,593				
æ					Busine	ss Code					
Program Service Revenue	2a	Contracts				611710	10,4	03,546	10,403,5	546	
æ	b										
vice	С										
æ. Æ	d			_							
Iran	e f	All other program se	rvice revenue								
Prog		<b>Fotal.</b> Add lines 2a-2			10	0,403,546					
		nvestment income (ii			nterest, and other	er l					
	si	imilar amounts) .				<u> </u>	445,116				445,116
		ncome from investme Royalties	ent of tax-exe		ond proceeds	<b>&gt;</b>					
		toyantes	(i) Real		(ii) Personal						
	6a	Gross rents									
	b	Less: rental expenses									
	c	Rental income or									
		(loss)									
	a	Net rental income o	r (loss) (i) Securit		(ii) Other						
		Gross amount from sales of assets other than inventory	(i) Securit	163	(ii) other						
		Less: cost or other basis and sales expenses Gain or (loss)									
		Net gain or (loss)			•	.					
Other Revenue		Gross income from formal (not including \$ contributions reported See Part IV, line 18	ed on line 1c).	of							
Rev		Less: direct expense		b							
her		Net income or (loss)		-	ents 🕨						
ŏ		Gross income from g See Part IV, line 19		es.							
	<b>L</b>	1		a							
		Less: direct expense: Net income or (loss)		<b>b</b> activit	ies						
	10a	Gross sales of invent returns and allowand	ory, less	a							
	b	Less: cost of goods s	sold	b							
	С	Net income or (loss)		invent							
	<b>11</b> a	Miscellaneous  Other Income	Revenue		Business Code		72,764		72,764		
	b										
	c										
	d	All other revenue .									
		Total. Add lines 11a			•		70.70				
	12	Total revenue. See	Instructions.				72,764		10.475.5		
							34,597,019	Ί	10,476,310		0 445,116 Form <b>990</b> (2018

Form 990 (2018) Page 10 Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX . ⊻ (B) (C) Do not include amounts reported on lines 6b, (D) (A) Program service Management and 7b, 8b, 9b, and 10b of Part VIII. Total expenses Fundraisingexpenses general expenses expenses 6,281,663 6,281,663 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 25,000 25,000 2 Grants and other assistance to domestic individuals. See Part IV, line 22 **3** Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16. **4** Benefits paid to or for members 190,583 Compensation of current officers, directors, trustees, and 2,327,510 1,406,068 730,859 kev employees . 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . 13,718,861 10,338,115 3,072,364 308,382 7 Other salaries and wages 857,216 205,237 23,149 8 Pension plan accruals and contributions (include section 401 628.830 (k) and 403(b) employer contributions) . 75,316 2,179,339 1,621,618 482,405 9 Other employee benefits . 10 Payroll taxes . . 1,189,443 854,306 298,626 36,511 11 Fees for services (non-employees): 304,605 18,323 286,219 63 a Management . . 71.957 7.098 64,859 **b** Legal 79,010 15,901 63,109 c Accounting 9.026 9,026 **d** Lobbying . . . . e Professional fundraising services. See Part IV, line 17 18,265 18,265 f Investment management fees . 77,015 g Other (If line 11g amount exceeds 10% of line 25, column 7,514,177 6,816,084 621,078 (A) amount, list line 11g expenses on Schedule O) 34,256 7,996 26,260 12 Advertising and promotion . 13 Office expenses . 328,979 192,756 126,843 9,380 651,148 259,183 387,582 4,383 14 Information technology 15 Royalties . 1,600,583 357,667 38,959 1.203.957 **16** Occupancy

1,598,715

1,977,333

104,464

185,741

120.150

110,534

10,245

41,298,220

1.453.104

1,723,012

250

120,150

74,199

9,308

33.056.921

123,433

252,541

104,464

185,491

31,134

7,448,399

937

22,178

1,780

5,201

792,900

Form 990 (2018)

b Stipends

d Miscellaneous

e All other expenses

c Dues

**17** Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings

**20** Interest . . . 21 Payments to affiliates . . . 22 Depreciation, depletion, and amortization .

miscellaneous expenses in line 24e. If line 24e amount

exceeds 10% of line 25, column (A) amount, list line 24e

23 Insurance .

expenses on Schedule O.) a Recruitment

25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the 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).

24 Other expenses. Itemize expenses not covered above (List

Form 990 (2018)

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Liabilities 22 Investments—other securities. See Part IV, line 11 . . .

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

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

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

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

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Investments—program-related. See Part IV, line 11

Intangible assets . . . . .

Grants payable . .

Deferred revenue . . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Unrestricted net assets

Other assets. See Part IV, line 11 . .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons. Complete Part II of Schedule L .

and other liabilities not included on lines 17 - 24).

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

Organizations that do not follow SFAS 117 (ASC 958), check here > \quad \text{and complete lines 30 through 34.}

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances .

Total liabilities. Add lines 17 through 25 .

Page **11** 

182.804

247.443

33.813.033 5,105,977

1.192.804

272,654

6.571.435

5.709.093

21,532,505

27,241,598

33,813,033

Form **990** (2018)

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22 23

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28 29

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31 32

33

34

237.995

155.215

39.395.622

4,320,878

1.165.462

221.882

5.708.222

4.188.880

29,498,520

33.687.400

39,395,622

(B) Beginning of year End of year 1 Cash-non-interest-bearing .

2 Savings and temporary cash investments . . . 13,313,098 2 10,178,663 14,819,951 3 9,205,998 3 Pledges and grants receivable, net . . 4,774,997 4 5,404,570 Accounts receivable, net Loans and other receivables from current and former officers, directors,

trustees, key employees, and highest compensated employees. Complete 5 section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) 6

Loans and other receivables from other disqualified persons (as defined under voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L . . . Assets 7 Notes and loans receivable, net . 8 Inventories for sale or use . Prepaid expenses and deferred charges 279.510 9 274.851 **10a** Land, buildings, and equipment; cost or other

2,177,503 10a basis. Complete Part VI of Schedule D 2,004,912 245,603 Less: accumulated depreciation 10b 10c 172,591 5,569,253 8,146,113 11 11 Investments—publicly traded securities .

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Audit Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

3a

3h

Yes

Yes Form 990 (2018)

### **Additional Data**

Software ID: Software Version:

**EIN:** 06-1164568

**Name:** Jobs for the Future Inc.

Form 990 (2018)

aligned to employer needs.

Form 990, Part III, Line 4a:

Advancement - The Organization is designing and implementing strategies to align systems that promote economic and career advancement and create talent pipelines

#### Form 990, Part III, Line 4b: Work - The Organization is expanding opportunities for economic advancement for youth and adults by both helping individuals navigate the economy to secure the good careers that already exist, and by engaging employers and their partners to create better careers that better reward skills and education.

#### Form 990, Part III, Line 4c: Learning - The Organization is fundamentally transforming our nation's learners and learning systems.

efile	e GR/	APHIC prii	1t - DO NO	T PROCESS	As Filed Data -	DLN: 93	DLN: 93493131040351						
SCI	HED	ULE A		Public 6	Charity Statu	s and Put	olic Sunne		OMB No. 1545-0047				
	m 990		Con		rganization is a sect				2018				
990E	EZ)				4947(a)(1) nonexe  ▶ Attach to Form				2010				
Depart	ment of	the Treasury		► Go to	www.irs.gov/Form			•	Open to Public Inspection				
		<sub>ue Service</sub> ne organiza	tion					Employer identific	<u> </u>				
Jobs fo	or the F	uture Inc						06-1164568					
	rt I				<b>us</b> (All organization								
The o	rganiz		•		e it is: (For lines 1 thro	•							
1		A church, c	onvention of	churches, or as	sociation of churches	described in <b>sect</b>	tion 170(b)(1)	(A)(i).					
2		A school de	scribed in <b>se</b>	ection 170(b)(	1)(A)(ii). (Attach Sch	nedule E (Form 9	90 or 990-EZ).)						
3		A hospital o	r a cooperat	ive hospital ser	vice organization desc	ribed in <b>section</b>	170(b)(1)(A)(	iii).					
4		A medical r name, city,		nization operat	ed in conjunction with	a hospital descri	bed in <b>section</b> 1	170(b)(1)(A)(iii). E	nter the hospital's				
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in <b>section 170 (b)(1)(A)(iv).</b> (Complete Part II.)											
6		,		-	governmental unit de			, ,					
7	<b>✓</b>	section 17	0(b)(1)(A)	<b>(vi).</b> (Complete	•			nit or from the genera	al public described in				
8			•		170(b)(1)(A)(vi).	` '	•						
9					escribed in <b>170(b)(1)</b> ee instructions. Enter				ege or university or a				
10		An organization that normally receives: (1) more than 331/3% 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 331/3% 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		•			exclusively to test fo	r public safety. S	ee section 509	(a)(4).					
12		more public	ly supported	organizations o	d exclusively for the be described in <b>section 5</b> the type of supporting	09(a)(1) or sec	ction 509(a)(2)	). See <mark>section 509(a</mark>					
a		<b>Type I.</b> A so	supporting or n(s) the pow	ganization oper	ated, supervised, or cappoint or elect a majo	ontrolled by its s	upported organiz	zation(s), typically by					
b		manageme	nt of the sup		ervised or controlled i ation vested in the sar and C.								
c					supporting organizatio				ted with, its				
d		functionally	integrated.	The organizatio	<b>d.</b> A supporting organ n generally must satis <b>t IV, Sections A and</b>	fy a distribution i	requirement and						
е					ved a written determir integrated supporting		RS that it is a Ty	pe I, Type II, Type II	I functionally				
f	Enter					-		<u> </u>					
g			_		pported organization(	Υ'							
	(i) Name of supported organization			(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the orga in your govern		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)				
						Yes	No						
Total													
Total		vork Reduc	tion Act Not	ice, see the T	nstructions for	Cat. No. 11285	SF •	Schedule A (Form 9:	90 or 990-EZ) 2018				
		or 990-EZ.	LION ACE NO	ace, see the H	ion accionis 101	Cat. NO. 11203		Solication A (FOITH 9	JU 01 JJU-LZ) ZUIO				

L	Support Schedule for $(b)(1)(A)(ix)$	Organizations	Described in S	ections 170(b)	)(1)(A)(IV), 17	U(D)(1)(A)(VI)	), and 170
	(Complete only if you ch						y under Part
	III. If the organization for Section A. Public Support	alls to qualify un	ider the tests lis	ted below, pleas	e complete Part	111.)	
	Calendar year	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	(or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not	34,444,316	21,119,627	39,678,221	24,869,752	23,675,593	143,787,509
2	include any "unusual grant.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	34,444,316	21,119,627	39,678,221	24,869,752	23,675,593	143,787,509
5	The portion of total contributions by each person (other than a governmental unit or publicly						
	supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column						47,834,640
6	(f). <b>Public support.</b> Subtract line 5 from line 4.						95,952,869
S	Section B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	<b>(f)</b> Total
7		34,444,316	21,119,627	39,678,221	24,869,752	23,675,593	143,787,509
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	35,740	142,329	87,581	264,146	378,052	907,848
9	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.).	876,612	830,846	397,377	668,270	73,700	2,846,805
11	<b>Total support.</b> Add lines 7 through 10						147,542,162
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	50,830,643
13	First five years. If the Form 990 is for	or the organization	's first, second, th	ird, fourth, or fifth	tax year as a sect	ion 501(c)(3) or <u>g</u> a	nization,
	check this box and <b>stop here</b>					▶ ⊔	
	Section C. Computation of Publi	• •	_				
	Public support percentage for 2018 (li					14	65.030 %
	Public support percentage for 2017 So					15	61.810 %
<b>16</b> a	33 1/3% support test—2018. If the						
b	and stop here. The organization qual 33 1/3% support test—2017. If the	ne organization did	not check a box o	n line 13 or 16a, a	nd line 15 is 33 1/	3% or more, check	this
<b>17</b> a	box and <b>stop here.</b> The organization <b>10%-facts-and-circumstances tes</b> is 10% or more, and if the organization in Part VI how the organization meets	t— <b>2018.</b> If the ore	ganization did not s-and-circumstance	check a box on line es" test, check this	e 13, 16a, or 16b, box and <b>stop he</b> i	and line 14 r <b>e.</b> Explain	. ▶⊔
b	organization . 10%-facts-and-circumstances te 15 is 10% or more, and if the organi Explain in Part VI how the organization	<b>st—2017.</b> If the o zation meets the "i	rganization did not facts-and-circumst	check a box on lir ances" test, check	ne 13, 16a, 16b, o this box and <b>stop</b>	r 17a, and line here.	▶□
18	supported organization						▶□

Sche	dule A (Form 990 or 990-EZ) 2018						Page <b>3</b>
Р	Support Schedule for						
	(Complete only if you c						ınder Part II. If
	the organization fails to	qualify under t	the tests listed	below, please co	omplete Part II.	)	
Se	ection A. Public Support		<b>-</b>	T	T		1
	Calendar year	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	(or fiscal year beginning in) ► Gifts, grants, contributions, and	• • •	, ,	, ,		<u> </u>	
1	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						
6	<b>Total.</b> 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.						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6.)						
Se	ection B. Total Support						
	Calendar year	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	(or fiscal year beginning in) ▶	(4) 2011	(5) 2013	(6) 2010	(4) 2017	(0) 2010	(1) 10001
9	Amounts from line 6						
L0a	Gross income from interest,						
	dividends, 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.						
C	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							
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c,						
	11, and 12.)		1-6:	Lind formal CC	<u> </u>	 	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
14	First five years. If the Form 990 is fo						
	check this box and <b>stop here</b>						<u> ▶ ⊔</u>
Se	ection C. Computation of Public						
15	Public support percentage for 2018 (lin	ne 8, column (f) d	ivided by line 13,	column (f))		15	
16	Public support percentage from 2017 S	Schedule A, Part II	II, line 15			16	
	ection D. Computation of Invest						
17	Investment income percentage for 20:			line 13 column (f	·))	17	
		-		•			
18	Investment income percentage from 2					18	I Italia a markania
	<b>331/3% support tests—2018.</b> If the						
	more than 33 1/3%, check this box and						
	33 1/3% support tests—2017. If the						
	not more than 33 1/3%, check this box	and <b>stop here.</b>	The organization	qualifies as a publ	icly supported org	ganization	▶□
20	Private foundation If the organization	•	<del>-</del>			•	►□

(Complete only if you checked a box on line 12 of 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 Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1

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. Did the organization have any supported organization that does not have an IRS determination of status under section 509

1 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).

2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. 3a Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination. 3b

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. Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you

3с checked 12a or 12b in Part I, answer (b) and (c) below. 4a 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 4b supervised by or in connection with its supported organizations.

Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c 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 5a amendment to the organizing document). Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the 5b

organization's organizing document? 5c 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

6 organization's supported organizations? If "Yes," provide detail in Part VI. 6 7

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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) . Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

7 complete Part I of Schedule L (Form 990 or 990-EZ). 8

8 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.

9a 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.

9b

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. 9c

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

answer line 10b below. 10a 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). 10b

Schedule A (Form 990 or 990-EZ) 2018

	leddie A (Point 990 01 990-EZ) 2016		- F	age 3
₽}	Supporting Organizations (continued)			
			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?	<u> </u>		<u> </u>
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	<u> </u>		
	governing body of a supported organization:	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	<b>11</b> c		
S	Section B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization.	-		ĺ
S	Section C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
_	Section D. All Type III Supporting Organizations		<u> </u>	
	,,, = === ==,,, ======================		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?			
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
_	Section E. Type III Functionally-Integrated Supporting Organizations		<u> </u>	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct)	ions):		
_	a  The organization satisfied the Activities Test. Complete <b>line 2</b> below.	00		
	b  The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.			
	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see	instru	ctions)	
2	Activities Test. <b>Answer (a) and (b) below.</b>		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's			
	involvement.	2b		<u> </u>
3	Parent of Supported Organizations. <b>Answer (a) and (b) below.</b>	<u> </u>		<u> </u>
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
	<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard.	3h		_

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	zations			
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.					
	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	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)					
7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8				
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1				
а	Average monthly value of securities	1a				
b	Average monthly cash balances	<b>1</b> b				
С	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI):					
2	Acquisition indebtedness applicable to non-exempt use assets	2				
3	Subtract line 2 from line 1d	3				
4	Cash deemed held for exempt use. Enter $1-1/2\%$ of line 3 (for greater amount, see instructions).	4				
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6	Multiply line 5 by .035	6				
7	Recoveries of prior-year distributions	7				
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	<b>Distributable Amount.</b> 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-in instructions)	ntegrate	ed Type III supporting o	rganization (see		

Page **6** 

Schedule A (Form 990 or 990-EZ) (2018)

b Applied to 2018 distributable amount
c 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. If the amount is greater than zero, explain in Part VI.

**a** Excess from 2014. . . . . **b** Excess from 2015. . . . . **c** Excess from 2016. . . . .

Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.
 Excess distributions carryover to 2019. Add lines

See instructions.

d Excess from 2017.e Excess from 2018.

3j and 4c.

8 Breakdown of line 7:

## **Additional Data**

### Software ID: Software Version:

**EIN:** 06-1164568

Name: Jobs for the Future Inc.

Schedule A (Form 990 or 990-EZ) 2018

Part VI

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).

instructions).

Facts And Circumstances Test

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

DLN: 93493131040351

OMB No. 1545-004

Open to Public Inspection

Department of the Treasury Internal Revenue Service

EZ)

SCHEDULE C (Form 990 or 990-

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.

▶Go to www.irs.gov/Form990 for instructions and the latest information. If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C. • Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.

• Section 527 organizations: Complete Part I-A only. If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.

 Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)); Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of the organization **Employer identification number** Jobs for the Future Inc 06-1164568 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") 2 Political campaign activity expenditures (see instructions) ...... 3 Volunteer hours for political campaign activities (see instructions) ...... Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 ...... 1 Enter the amount of any excise tax incurred by organization managers under section 4955 ...... 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ..... ☐ Yes ☐ Yes ☐ No If "Yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	<b>&gt;</b>	\$_		
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	<b>&gt;</b>	\$_		
3	Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b	<b>&gt;</b>	\$		
4	Did the filing organization file Form 1120-POL for this year?				

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated

fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
1				
2				
3				
4				
5				
6				

d

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Grassroots ceiling amount

Page 2

	expenses, and share of excess lol		•		,	,	, ,
<u>B</u>	Check ► ☐ if the filing organization checked  Limits on Lobb  (The term "expenditures" m	ying Expe	enditures	,		a) Filing anization's totals	<b>(b)</b> Affiliated group totals
1a	Total lobbying expenditures to influence public	opinion (gras	ss roots lobbying)				
	Total lobbying expenditures to influence a legis		9,026				
c	Total lobbying expenditures (add lines 1a and 3	Lb)				9,026	
d	Other exempt purpose expenditures					41,289,194	
е	Total exempt purpose expenditures (add lines	lc and 1d)				41,298,220	
f	f Lobbying nontaxable amount. Enter the amount from the following table in both columns.					1,000,000	
	If the amount on line 1e, column (a) or (b	) is: The lo	bbying nontaxal	ble amount is:			
	Not over \$500,000	20% of	the amount on line 1	e.			
	Over \$500,000 but not over \$1,000,000	\$100,00	00 plus 15% of the ex	cess over \$500,000	).		
	Over \$1,000,000 but not over \$1,500,000	\$175,00	00 plus 10% of the ex	cess over \$1,000,0	00.		
	Over \$1,500,000 but not over \$17,000,000	\$225,00	00 plus 5% of the exc	cess over \$1,500,00	0.		
	Over \$17,000,000	\$1,000,	000.				
i	Grassroots nontaxable amount (enter 25% of li Subtract line 1g from line 1a. If zero or less, en Subtract line 1f from line 1c. If zero or less, en If there is an amount other than zero on either section 4911 tax for this year?	nter -0 ter -0 line 1h or lin	e 1i, did the orgai	nization file Form		250,000 0 0	Yes 🗌 No
	(Some organizations that mad columns below. S	le a sectio See the sep	parate instruct	tion do not ha tions for lines	ve to comple 2a through 2		ve
	Lobbying	Expenditu	res During 4-\	ear Averagin	g Period		
	Calendar year (or fiscal year beginning in)		(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) Total
<u>2a</u>	Lobbying nontaxable amount		1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
ь	Lobbying ceiling amount (150% of line 2a, column(e))						6,000,000
c	Total lobbying expenditures				5,085	9,026	14,111

250,000

250,000

250,000

250,000

1,000,000

1,500,000

	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a	)(	(b)
activi	, , , , , , , , , , , , , , , , , , , ,	Yes	No	Amoun
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
а	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
е	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total. Add lines 1c through 1i			
a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Par	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5), o	r sectio	n
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), o	r sectio	
	501(c)(6).			Yes
	501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?			Yes I
· }	501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?		1 	Yes I
1 2 3	501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?		3	Yes I
	Were substantially all (90% or more) dues received nondeductible by members?	 (5), o		Yes I
l 2 3	Were substantially all (90% or more) dues received nondeductible by members?	 (5), o		Yes I
l 2 3 Par	Were substantially all (90% or more) dues received nondeductible by members?	(5), o		Yes I
ar	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year	(5), o III-A,		Yes I
ar	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	(5), o III-A,		Yes I
ar a b	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year	(5), o III-A,		Yes I
a b c	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	(5), o III-A,		Yes I
1 2 3	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	(5), o IIII-A, l l l l l l l l l l l l l l l l l l l		Yes I
l 2 3 2 a b c	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does	(5), o III-A,		Yes I

Explanation

instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D** 

As Filed Data -

# **Supplemental Financial Statements**

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

DLN: 93493131040351 OMB No. 1545-0047

2018

(Form 990)

	tment of the Treasury		► Attach to Form 99 hov/Form990 for the	90.		120.			n to Public spection
	me of the organi	zation				Emp	loyer ider	tification	number
)D	s for the Future Inc					06-1	164568		
Pa		cations Maintaining Donor Advi e if the organization answered "Ye				or Acc	ounts.		
	•	-	(a) Donor a	advis	ed funds		(b)Funds	and other a	accounts
	Total number at e	end of year							
	Aggregate value o	of contributions to (during year)							
	Aggregate value o	of grants from (during year)							
	Aggregate value a	at end of year							
		tion inform all donors and donor adviso operty, subject to the organization's ex					unds are tl	_	Yes 🗌 No
	charitable purpos	tion inform all grantees, donors, and do ses and not for the benefit of the donor	or donor advisor, or	for a	ny other purpose				Yes 🗌 No
а	rt III Conserv	ration Easements. Complete if th	ne organization ans	wer	ed "Yes" on Fori	n 990	, Part IV,		
	Purpose(s) of co	nservation easements held by the organ	nization (check all tha	at ap	ply).				
	☐ Preservatio	n of land for public use (e.g., recreation	n or education)		Preservation of an	histori	ically impoi	tant land a	area
	☐ Protection of	of natural habitat	[		Preservation of a	certifie	d historic s	tructure	
	☐ Preservatio	n of open space							
	Complete lines 2	a through 2d if the organization held a last day of the tax year.	qualified conservation	n cor	ntribution in the fo	rm of a			EH- V
_		conservation easements				2a	Heid at	the End o	of the Year
a L		tricted by conservation easements				$\vdash$			
D	_	•				2b			
c		rvation easements on a certified histori		` '		2c			
d		rvation easements included in (c) acqui n the National Register	red after 7/25/06, aff	iu no	t on a mistoric	2d			
	Number of consetax year ►	rvation easements modified, transferre	d, released, extinguis	shed	or terminated by	the org	ganization o	during the	
	Number of states	s where property subject to conservatio	n easement is located	d <b>►</b>					
	Does the organiz	ation have a written policy regarding th	ne periodic monitoring	g, ins	spection, handling	of viola	- itions,		
	and enforcement	of the conservation easements it holds	s?		•			☐ Yes	□ No
	Staff and volunte	eer hours devoted to monitoring, inspec	ting, handling of viola	ation	s, and enforcing c	onserva	ation easen	nents durir	ng the year
	<u> </u>								
	Amount of exper ▶ \$	ses incurred in monitoring, inspecting,	handling of violations	s, an	d enforcing conser	vation	easements	during the	e year
		rvation easement reported on line 2(d) h)(4)(B)(ii)?				70(h)(	4)(B)(i)	☐ Yes	□ No
	balance sheet, a	cribe how the organization reports cons nd include, if applicable, the text of the	footnote to the organ						
		s accounting for conservation easemen		T	and the second	or Cir	mila « Acc		
3		ations Maintaining Collections e if the organization answered "Ye				ier Sir	niiar Ass	ets.	
а	If the organization art, historical tre	on elected, as permitted under SFAS 11 asures, or other similar assets held for (III, the text of the footnote to its finar	6 (ASC 958), not to r public exhibition, edu	repor ucatio	t in its revenue st				
b	If the organization historical treasur	on elected, as permitted under SFAS 11 es, or other similar assets held for pub ts relating to these items:	.6 (ASC 958), to repo	rt in	its revenue staten	nent an Ierance	d balance s of public s	sheet work ervice, pro	s of art, vide the
(	-	ed on Form 990, Part VIII, line 1					<b>▶</b> \$		
		in Form 990. Part X					. <b>&gt;</b> \$		

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:

Pari	3111	Organizations Ma	aintaining Col	lections of Ar	t, Histori	ical T	reasu	res, or	Other	Similar A	ssets (co	ntinued)	
3		the organization's acq (check all that apply):		n, and other reco	rds, check	any of	the fol	lowing th	at are a	a significant	use of its c	ollection	
а		Public exhibition			d		Loan	or excha	nge pro	grams			
b		Scholarly research			e		Other						
c		Preservation for future	e generations										
4	Provide Part	de a description of the		llections and expl	ain how the	ey furt	her the	organiza	ition's e	xempt purp	ose in		
5	Durin	ng the year, did the org is to be sold to raise fur									☐ Yes	□ r	No
Par	t IV	Escrow and Cust Complete if the ord X, line 21.			Form 990	), Part	IV, lir	ne 9, or	report	ed an amo	unt on Fo	rm 990,	, Part
1a		e organization an agent ded on Form 990, Part :									☐ Yes	_ r	No
b	If "Y∈	es," explain the arrange	ement in Part XIII	and complete th	e following	table:		Γ			Amount		_
С		nning balance		•	_				1c				
d	Addit	ions during the year .							1d				_
е	Distri	butions during the year	r						1e				_
f	Endin	ng balance							1f				_
2a	Did th	- he organization include	an amount on Fo	orm 990 Part X I	ine 21 for	escrov	v or cus	ے stodial ac	count li	ahility?	□ Ves		— No
		es," explain the arrange								•	_	ш.	10
	rt V	Endowment Fund											
		Endowniene i un	us: complete ii	(a)Current year		rior yea		(c)Two yea				e)Four yea	ars back
<b>1</b> a	Beginn	ing of year balance .		,			Ì	· , , , ,				<u>, , , , , , , , , , , , , , , , , , , </u>	
b	Contrib	outions											
С	Net inv	vestment earnings, gair	ns, and losses										
d	Grants	or scholarships											
		expenditures for facilition	es										
f	Admini	istrative expenses .											
g	End of	year balance											
2 a		de the estimated perce d designated or quasi-e			nce (line 1	g, colu	mn (a)	) held as	:	•			
b		anent endowment >											
		oorarily restricted endo	wment <b>&gt;</b>										
·		percentages on lines 2a	***************************************	ld equal 100%.									
3a	•	here endowment funds		•	ization tha	t are h	eld and	d adminis	tered fo	or the			
	-	nization by:										Yes	No
	• •	nrelated organizations				•					3a(		
h		elated organizations .es" on 3a(ii), are the re			od on Soba						3a(i . 3b		<u> </u>
ь 4		ribe in Part XIII the inte	-	·			.: •		•			<u>'                                     </u>	
	t VI				.aowineiit	. 4.143.							
		Complete if the or			Form 990	, Part	IV, lir	ne 11a.	See Fo	rm 990, Pa	art X, line	10.	
	Descri	iption of property	(a) Cost or ot (investme	her basis (b)	Cost or other					depreciation		Book valu	ue
1a	Land												
		ngs											
		nold improvements				3	67,416			355,505			11,911
		nent					05,982			578,947			127,035
							04,105			1,070,460			33,645

Total. Add lines 1a through 1e.(Column (d) must equal Form 990, Part X, column (B), line 10(c).) .

,	Investments—Other Securities. Complete if the See Form 990, Part X, line 12.	e organizat	ion ansv	vered "Yes" on Form 9	990, Part IV, line 11b.
	(a) Description of security or category (including name of security)		(b) Book value		hod of valuation: -of-year market value
<ol> <li>(1) Financia</li> <li>(2) Closely-</li> <li>(3)Other</li> </ol>	held equity interests	· · · · · · · · · · · · · · · · · · ·			
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
	n (b) must equal Form 990, Part X, col. (B) line 12.)	•			
Part VIII	<b>Investments—Program Related.</b> Complete if the organization answered 'Yes' on Fo	orm 990, P	art IV, li	ne 11c. See Form 990	D, Part X, line 13.
	(a) Description of investment		ook value	<b>(c)</b> Met	hod of valuation: -of-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Colum	n (b) must equal Form 990, Part X, col.(B) line 13.)	•			
Part IX	Other Assets. Complete if the organization answered  (a) Description		m 990, Pa	rt IV, line 11d. See Forn	n 990, Part X, line 15. <b>(b)</b> Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	mn (b) must equal Form 990, Part X, col.(B) line 15.)  Other Liabilities. Complete if the organization ar See Form 990, Part X, line 25.	nswered 'Y	es' on Fo		. ▶ 11e or 11f.
1. (1) Federal i	(a) Description of liability ncome taxes		<b>(b)</b> B	ook value	
Deferred Cor				111,792	
-	es - Long Term			117,010	
Capital Lease (4)	es - Current			43,852	
(5)					
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col.(B) line 25.)	<u> </u>		272,654	
2. Liability fo	or uncertain tax positions. In Part XIII, provide the text of			ganization's financial sta	

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

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

Page 4

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018

1

b

Add lines **4a** and **4b** . . . . . . . . 4c 18,265 C 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) . . . . . . . 5 34,597,019 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

4b

Total expenses and losses per audited financial statements . . . . . 1 41,279,955 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities . . . 2a 2b Prior year adjustments . . . . . 2c C

2d d Other (Describe in Part XIII.) . . . Add lines 2a through 2d . 2e е 3 Subtract line 2e from line 1 . . . . . . . . 3 41,279,955 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: 4a Investment expenses not included on Form 990, Part VIII, line 7b . . . 18.265

4b b Add lines **4a** and **4b** . . . . . . . . . . . . 4c 18,265 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) . . . . . . . 5 41.298.220 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.

Return Reference Explanation

	Page <b>5</b>
Information (continued)	
Explanation	

Schedule D (Form 990) 2018

# **Additional Data**

# Software ID:

**Software Version: EIN:** 06-1164568

Name: Jobs for the Future Inc

### Supplemental Information

Return Reference	Explanation
Part X, Line 2:	JFF is a non-profit corporation organized under the laws of Connecticut and is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code. Accordingly the e financial statements do not reflect a provision for income taxes. This determination has been reviewed according to guidance in a recent Financial Accounting Standards Board pron ouncement related to accounting for uncertainty in income taxes. In determining the recogn ition of uncertain tax positions, JFF applies a more-likely-than-not recognition threshold and determines the measurement of uncertain tax positions by considering the amounts and probabilities of the outcomes that could be realized upon ultimate settlement with taxing authorities. As of September 30, 2019, JFF has no uncertain tax positions that qualify for either recognition or disclosure in the financial statements. The organization is general ly subject to potential examination by taxing jurisdictions for the prior three years.

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule I **Grants and Other Assistance to Organizations,** (Form 990)

2018 Open to Public

DLN: 93493131040351

OMB No. 1545-0047

**Governments and Individuals in the United States** Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

Department of the Freasury Internal Revenue Service		► Go to <u>ww</u>	vw.irs.gov/Form990 for		on.		Inspection
Name of the organization						Employer identific	cation number
lobs for the Future Inc						06-1164568	
Part I General Info	ormation on Grants	and Assistance				<b>'</b>	
			the grants or assistance,		for the grants or assistant	ce, and	☑ Yes ☐ No
2 Describe in Part IV the	e organization's procedu	res for monitoring the u	se of grant funds in the U	nited States.			
			and Domestic Governme ditional space is needed.	ents. Complete if the o	rganization answered "Yes	" on Form 990, Part IV, line	e 21, for any recipient
(a) Name and address of organization or government	of (b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
							38 43
			<u> </u>		<u> </u>		

Page **2** 

Schedule I (Form 990) 2018

(2) Ellen L. Foley 5,000 5,000 (3) Justin Norton (4) Katherine Maddock 5,000

Schedule I (Form 990) 2018

(5) Monakatellia Ford Walker

Return Reference

Part I, Line 2:

(6) Arria Coburn 5,000 KFB - 04/09/21 11:30AM Worksheet Schedule I (6) (7) Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Periodic review of program milestones, performance and financial reports.

Explanation

5,000

#### Additional Data

(a) Names and address of

815 16th Street NW Room

100 West 33rd St MB900 Suite

Washington, DC 20006 America Achieves Inc

New York, NY 10001

Institute

8022

917

# Software ID: Software Version:

/L\ CIN

27-3238471

**EIN:** 06-1164568

**Name:** Jobs for the Future Inc.

(4) Amount of each (5) Amount of you

98,151

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

(a) IDC applies

(a) Name and address or organization	(D) ETIN	if applicable	grant	cash	(book, FMV, appraisal,	1
or government				assistance	other)	

501(c)(3)

(g) Description of (h) Purpose of grant non-cash assistance

AFL-CIO Working for America 52-0884503 501(c)(3) 24,992 or assistance

Reconnection Strategies

in the Learners at the

Center Initiative

To support Building Economic Opportunities

Initiative

To support

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

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

11 E Ben White Blvd

Austin, TX 78741

American Institute for	25-0965219	501 (c ) (3)	99,655		To support
Research					Reconnection Strategies
PO Box 28126					in the Learners at the
New York, NY 100878126					Center Initiative
American YouthWorks Inc	74-2197942	501 (c ) (3)	100,000		To support back on

Itrack initiative

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

|Postsecondary State

Policy Initiative

Arapahoe Community College 5900 S Santa Fe Drive Littleton, CO 80120	38-3721881	quasi governmental	5,000		To support the Google/Tides Initiative
Arkansas Community College	71-0795889	501 (c ) (3)	10,000		To support

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

815 Main Street Little Rock, AR 72201

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) Audacious Futures Corporation Canadian Corporation 505,800 To support the TD

Investment Board

Brockton, MA 02301

34 School Street

366 Adelaide Street West Ste 606 Ontario CA					Ready Challenge Initiative
Brockton Area Workforce	04-3517254	501(c)(3)	52,039		To support

Reconnection Strategies

in the Learners at the

Center Initiative

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

Reconnection Strategies

lin the Learners at the Center Initiative

Broward College 6400 NW 6th Way Fort Lauderdale, FL 33309	59-1216107	Public Educational	32,217		To support the NSF- STEM Initiative
Capital Workforce Partners Inc	06-1013293	501 (c ) (3)	1,861		To support

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

One Union Place

Hartford, CT 06103

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) Chabot-Las Positas Community 94-1670563 Local Gov't Agency 30.000 To support the

Linde Family Foundation

Initiative

College 7600 Dublin Boulevard 3rd Floor Dublin, CA 94568		,	·		Google/Tides Initiative
Charlestown High School	27-3754153	Educational Inst.	14,000		To support the Mott-

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

240 Medford Street

Charlestown, MA 02129

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

To support Building

Collin County Community	75 2027156	Dublic Educational	15 000		To summent the
130 E Randolph Street Suite 2600 Chicago, IL 60601					Initiative
Workers Assitance Committee		(- / (-/	,		Economic Opportunities

125.163

Collin County Community /5-203/156 Public Educational 15,000 To support the College District Google/Tides Initiative 3452 Spur 399

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

501 (c.) (3)

Chicago Federation of Labor.

McKinney, TX 750698742

36-3977262

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Community College of Aurora 38-3721881 Educational Inst. 20.000 To support the 0101 E Lower Blud Google/Tides Initiative

To support
Postsecondary State

Policy Initiative

25.000

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

Denver, CO 802306011			
Connecticut State Colleges and Universities 61 Woodland Street	76-0729241	501 (c ) (3)	

Hartford, CT 06105

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 75-1213149 Public Educational 30.995 Dallas County Community To support the Collogo District Google/Tides Initiative

To support participation

in the High School

Designs Initiative

95.397

College District						
4343 IH 30						
Mesquite, TX 75150						
Devner Public Schools						

2650 Eliot Street

Denver, CO 80211

s 84-6001099 501 (c) (3)

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization if applicable grant cash or assistance or government assistance other) 34-1015707 Political Sub of OH 70.000l Eastern Gateway Community To support the Google/Tides Initiative College 400 Sunset Blvd Steubenville, OH 43952

To support

Reconnection Strategies

in the Learners at the Center Initiative

100.000

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

501 (c) (3)

Envision Education Inc

Oakland, CA 94607

111 Myrtle Street Suite 203

94-3394659

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Fort Worth Can Academies 75-2251100 C Corporation as nonl To support back on iative

lin the Learners at the

Center Initiative

1325 W 12th Street Suite 275 Dallas, TX 75208	73 2231103	e corporation	03,030		track initiative
Foundation for California Community Colleges	68-0412350	C Corporation	25,000		To support Reconnection Strategies

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

Community Colleges 1102 O Street Suite 3500

Sacramento, CA 95811

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

4400 University Drive MSN 1A3

Fairfax, VA 22030

General Assembly Space Inc 902 Broadway 4th Floor New York, NY 10010	27-2807367	Corporation	567,228		To support participation in the Demand Side Engagement Initiative
George Mason University Foundation Inc	54-1603842	501 (c ) (3)	20,000		To support the Community College

Technical Assistance

Initiative

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) Goodwill Industries of Central 74-1322808 501 (c.) (3) 100.000 To support the

Texas 1015 Nordwood Park Boulevard Austin, TX 78753	, 1 2322333		200,000		Community College Technical Assistance Initiative
Grand Rapids Community College	38-2980195	Educational Inst.	15,000		To support the Google/Tides Initiative

College 143 Bostwick Ave NE

Grand Rapids, MI 49503

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

Rancho Cucamonga, CA 91730

9644 Hermosa Avenue

High Tech High Graduate	27-0716971	501 (c ) (3)	180,000		To support
School of Education					Reconnection Strategies
2861 Womble Road					in the Learners at the
San Diego, CA 92106					Center Initiative
Inland Empire United Way	33-0502676	501 (c ) (3)	25.000		To support Linked

Learning Initiative

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 20-1116318 501 (c) (3) 111.602 Keystone Development To support participation in the Sector Work Partnership Initiative

731 South Broad Street Phildelphia, PA 19147 La Jova Independent School 74-6001550 State/Local Gov 99.640

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

La Joya, TX 78560

To support back on District track initiative 201 East Expressway 83

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

|Postsecondary State

Policy Initiative

Labor Institute for Training Inc 1701 W 18th Street Indianapolis, IN 46202	35-1828936	501 (c ) (3)	67,597		To support participation in the Sector Work Initiative
Lakeland Community College	34-1011011	501 (c ) (3)	15,000		To support

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

7700 Clocktower Drive

Kirtland, OH 44094

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Lone Star College System 74-1734884 Governmental Instr. 20.000 To support 5000 Research Forest Dr Postsecondary State Policy Initiative

To support
Postsecondary State

Policy Initiative

20.000

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

501 (c) (3)

The Woodlands, TX 77381
Lorain County Community
College
1005 N Abbe Road

Elvria, OH 44035

34-0930187

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Managed Community Callege 20 1717622 15 000 To cupport

Prosperity Initiative

14500 E 12 Rd Warren, MI 48088	38-1/1/622	Governmentar	15,000		Postsecondary State Policy Initiative
MassHire Hampden County Workforce	22-2489896	C Corporation	35,740		To support participation in the Pathways to

Workforce 1441 Main Street First Floor

Sprinafield, MA 01103

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) 04-3530815 C Corporation 37.542 MassHire Metro SouthWest To support participation in the Pathways to

Workforce 420 Lakeside Avenue Suite 301 Prosperity Initiative Marlborough, MA 01752

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

Michigan Community College Association

38-2018394 501 (c) (3) 50.000 To support participation lin the Sector Work 222 N Chestnut Street Initiative Lansing, MI 48933

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

Michigan State AFL-CIO Human Resource Development 419 S Washington Sq Suite 300 Lansing, MI 48933	38-2795791	501 (c)(3)	119,120		To support participation in the Sector Work Initiative

Mohawk Valley Community Educational Inst. 7,500 To support the Sector 16-1020948 College Work Initative 1101 Sherman Drive

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

Utica, NY 13501

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

To support

Postsecondary State

Policy Initiative

Monroe Community College	18-0849590	educational Inst.	15,000		To support
1000 East Henrietta Road					Postsecondary St
Rochester, NY 14623					Policy Initiative

15.000l

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

Educational Inst.

Mott Community College 1401 F Court Street

Flint, MI 48503

38-1914697

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 41-6008084 State/Local Gov 202 Mounds View Public Schools To support participation Independent School Dis 621 in the High School

95.000l

Designs Initiative

Center Initiative

Reconnection Strategies

lin the Learners at the

To support

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

501 (c) (3)

Shoreview, MN	
New Hampshire	Learning

Concord, NH 03302

Initiative

PO Box 687

47-4290504

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 22-3085497 501 (c) (3) 10.000 New Jersey Council of County To support Colleges Postsecondary State

Postsecondary State

Policy Initiative

Colleges
330 West State Street
Trenton, NJ 08618

New York university 13-5562308 Educational Inst. 180.000

To support

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

PO Box 5166

New York, NY 10087

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) North Carolina Community 56-1288079 65.000l Quasi governmental l To support

560

Columbus, OH 43215

College System 200W Jones St Raleigh, NC 27603	30 22007,5	Quasi governmentar	33,033		Postsecondary State Policy Initiative
Ohio Association of Community Colleges 175 South Third Street Suite	31-1391013	501 (c ) (3)	50,000		To support Postsecondary State Policy Initiative

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Oregon Community College 93-0881664 25,000 quasi governmental To support secondary State Initiative

Postsecondary State

Policy Initiative

Association 260 13th Street NE Salem, OR 97301					Postsecondar Policy Initiati
Parkland College	37-0892090	Educational Inst.	15,000		To support

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

2400 W Bradley Avenue Champaign, IL 61821

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government . . . 04-3252955 501 (c) (3) 598.521 To support participation

90.0001

lin the Demand Side

|Postsecondary State

Policy Initiative

To support

Engagemeth Initiative

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

Per Scholas	5
804 E 138t	h Street 2nd Floor
Bronx, NY	10454

45-3081159

Persistence Plus LLC

Cambridge, MA 02140

PO Box 400605

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Philadelphia Youth Network 23-2993155 501 (c) (3) 21.265 To support the Learners

Policy Initiative

200 Market St Suite 200
Philadelphia, PA 19106

Regents of the University of California

C

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

2195 Hearst Ave Room 159

Berkeley, CA 94720

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Research Foundation for The 14-1368361 501 (c) (3) 50.000 To support

State University of NY Postsecondary State 35 Broadway Street Policy Initiative Albany, NY 122072826 To support back on

Restore Education 26-2966263 C Corporation 100.000 PO Box 692338

San Antonio, TX 78269

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

Itrack initiative

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) Rowan University Foundation 22-2482802 260.000 Corporation To support Reconnection Strategies Inc

Policy Initiative

201 Mullica Hill Road
Glassboro, NJ 08028

San Jacinto Community College 74-6028285 Political Sub of TX
District

District

Postsecondary State

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

4624 Fairmont Parkway

Pasadena, CA 77504

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 95-2561360 Political Sub of CA 10.000 Santa Clarita Community To support College District Postsecondary State Policy Initiative

To support Building

Initiative

Economic Opportunities

46.387

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

26455 Rockwell Canyon Road Santa Clarita, CA 91355			
St Petersburg College Board of	59-1211489	Quasi governmental	

Trustees PO Box 13489

St Petersburg, FL 33733

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) Stark State College 34-1055865 Educational Inst. 7.500 To support 6200 Frank Avenue NW Postsecondary State Policy Initiative North Canaton, OH 44720

North Canaton, OH 44720

Teachers College Columbia
University
525 W 120th Street Mailbox
174

Policy Initiative

To support
Postsecondary State
Policy Initiative

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

New York, NY 10027

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) Texas Community College 56-2358912 501 (c) (3) 233.043 To support

Washington, DC 20037

1304 San Antonio Street Suite 201 Austin, TX 78701					Postsecondary State Policy Initiative
Urban Institute 2100 M Street NW	52-0880375	501 (c ) (3)	124,975		To support the Community College

Technical Assistance

Initiative

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

in the Pathways to

Prosperity Initiative

Virginia Community College System 300 Arboretum Place Suite 200 Richmond, VA 23236	54-0759063	501 (c ) (3)	10,000		To support Postsecondary State Policy Initiative
West Springfield Public Schools	04-6001352	501 (c ) (3)	88,534		To support participation

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

26 Central Street

West Springfield, MA 01089

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

105

Honolulu, HI 96822

Wisconsin Regional Training Partnership 3841 W Wisconsin Ave Milwaukee, WI 53208	39-1838210	501 (c ) (3)	290,571		in the Sector Work Initiative
University of Hawaii Foundation 2444 Dole St Bachman Hall	99-0085260	501 (c ) (3)	35,000		To support Postsecondary State Policy Initiative

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

University of Texas at Austin Lyndon Baines Johnson School of Public Affairs Austin, TX 787121532	74-6000203	501 (c)(3)	41,520		To support participation in the Sector Work Initiative

Initiative

Public Affairs
Austin, TX 787121532

Virginia Association of Schools
Superintendents
PO Box 68

Superintendents
Po Box 68

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

Batesville, VA 22924

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

WestEd 94-3233542 111.027 Corporation To support Building 730 Harrison Street Economic Opportunities San Francisco, CA 94107 Initiative Wisconsin Technical College 39-6006494 501 (c) (3) 310.000

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

Madison, WI 53707

To support Svstem Postsecondary State PO Box 7874 Policy Initiative

efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Data	a -	DLN: 934	<b>1931</b> 3	31040	351
Schedule J (Form 990)		Co	mpensati	ion Information	10	1B No.	1545-0	0047
		For certain Office	•					
		► Complete if the org	2018					
Danar	tment of the Treasury		Open to Public					
•	Department of the Treasury Internal Revenue Service  Go to <u>www.irs.qov/Form990</u> for instructions and the latest information.							
	me of the organiza s for the Future Inc	ation			Employer identificat	tion nu	ımber	
					06-1164568			
Pa	rt I Questi	ons Regarding Compensat	tion					
1a				the following to or for a person liste y relevant information regarding the			Yes	No_
	☐ First-class	or charter travel		Housing allowance or residence for	personal use			
	☐ Travel for	companions		Payments for business use of perso	nal residence			
	Tax idemi	nification and gross-up payments		Health or social club dues or initiation				
	☐ Discretion	ary spending account	Ц	Personal services (e.g., maid, chauf	feur, chef)			
b		if any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursemen or provision of all of the expenses described above? If "No," complete Part III to explain						
2		the organization require substantiation prior to reimbursing or allowing expenses incurred by all ectors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?						
	airectors, truste	es, officers, including the CEO/E	xecutive Director	r, regarding the items checked in line	e la?			
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods							
				CEO/Executive Director, but explain i	n Part III.			
	<b>✓</b> Compensa	ation committee		Written employment contract				
	_ '	ent compensation consultant	<b>☑</b>	Compensation survey or study				
		of other organizations	<b>▽</b>	Approval by the board or compensa	tion committee			
4	During the year related organiza		990, Part VII, Se	ction A, line 1a, with respect to the f	iling organization or a			
а	Receive a sever	ance payment or change-of-cont	rol payment? .			4a		No
b		Participate in, or receive payment from, a supplemental nonqualified retirement plan?				4b		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?							No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.							
	Only 501(c)(3	), 501(c)(4), and 501(c)(29)	organizations	must complete lines 5-0				
5			=	the organization pay or accrue any				
		ontingent on the revenues of:		<b>g</b>				
а	The organization	1?				5a		No
b						5b		No
	,	5a or 5b, describe in Part III.						
6		ed on Form 990, Part VII, Section Contingent on the net earnings of		the organization pay or accrue any				
a	-	1?				6a		No
b		anization?				6b		No
7	•	·	n Δ line 1a did t	the organization provide any nonfixe	d			
,				rt III		7		No
8	Were any amounts reported on Form 990, Part VII, paid or accured 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.							
9	If "Yes" on line	3, did the organization also follo	w the rebuttable	presumption procedure described in	Regulations section	9		No
For F		ction Act Notice, see the Ins			50053T Schedule J		1 990)	2018

For each individual whose compensation must be reported on Schedule J, report instructions, on row (ii). Do not list any individuals that are not listed on Form 99 <b>Note.</b> The sum of columns (B)(i)-(iii) for each listed individual must equal the to	90,	Part VII.						/idual.
(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(i)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table								

		_		
				_

Schedule J (Form 990) 2018									
Part III Supplemental Information									
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.									
Return Reference	Explanation								
PART 1, LINE 4A	For the fiscal year 9/30/18, the Organization accrued a 245,000 settlement agreement with its former CFO, Melba Abreu. During the current fiscal year \$212,500								

was paid out by the Organization.

I (Form 990) 2018

(i)

(i)

(i)

(i)

(i)

(i)

Maria K Flynn

Joel H Vargas

Amy Loyd

Lili Allen

Associate VP

Marged K Fox

Associate VP

Eric Seleznow

Senior Advisor

Karyl Conescu

Melba Abreu

Former CFO

Patricia Balana

COO

Kathryn J Mannes

Michael L Collins

President and CEO

**Software Version:** 

(i) Base Compensation

338,781

210,896

154,240

196,582

169,389

160,712

218,059

196,442

179,569

194,880

**EIN:** 06-1164568

(ii)

Bonus & incentive

compensation

Software ID:

Name: Jobs for the Future Inc.

(iii)

Other reportable

compensation

212,500

other deferred

compensation

27,862

22,916

13,634

21,484

18,406

13,279

12,889

10,515

10,621

9,116

benefits

22,534

16,787

22,526

24,890

22,478

7,828

16,779

570

24,857

495

(E) Total of columns

(B)(i)-(D)

469,177

275,727

204,183

265,854

225,410

198,180

273,708

207,527

236,253

212,500

237,491

(F) Compensation in

column (B)

reported as deferred on

prior Form 990

source source and analysis											
Form 990, Schedule J,	Part II - Officers, Directors, Trustees, Key Employees, and	Highest Compensate	d Employees								
(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	T							

80,000

25,128

13,783

22,898

15,137

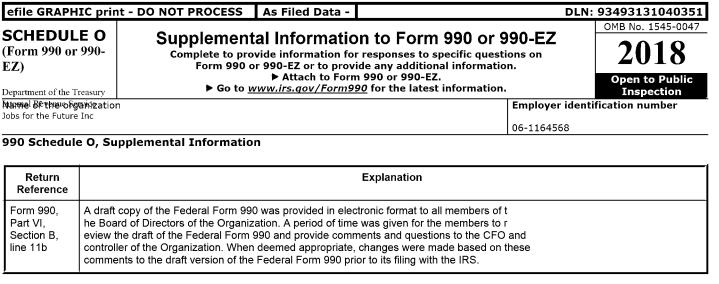
16,361

25,981

21,206

33,000

m 990, Schedule J	, Part II - Officers, Directors, Trustees, Key Employees, and	<b>Highest Compensate</b>	d Employees	
N Name and Title	(B) Breakdown of W 2 and/or 1000 MICC company of the	(C) Dating many and	(D) Nautauralala	Г



Return Explanation
Reference

Form 990,
Part VI,
Section B,
line 12c
On an annual basis members of the Board of Directors are required to review the Organization on's conflict of interest policy and disclose to the Organization any potential conflicts
of interest.

Return Reference	Explanation
,	JFF's VP, People & Culture and the COO compile historical and market benchmarking data as
Dart \/I	well as arganizational performance data against appual organizational goals to inform the

Part VI,
Section B,
line 15

well as organizational performance data against annual organizational goals to inform the
Board's Executive Committee, which reviews and decides on the Presidents compensation, and
reports back to the full board. JFF engages an independent compensation consulting firm e
very three years to perform benchmarking analysis to determine market comparisons.

Return Explanation

Form 990,
Part VI,
Section C,
line 19

The Organization's financial statements are available upon request of the Organization as well as at the Office of the Attorney General for the state of Massachusetts. Governing do cuments are available at the Office of the Secretary for the State of Massachusetts.

Return Explanation
Reference

Form 990,
Part IX, line
Fundraising expenses 76,982. Total expenses 7,474,355. Production costs: Program service
expenses 24,028. Management and general expenses 15,761. Fundraising expenses 33. Total ex

990 Schedule O, Supplemental Information

penses 39.822.

Return Explanation

Explanation	The original Form 990 was amended to reclassify an individual who was improperly classifie
for Amended	d as an organization on Schedule I, Part II. The amended Form 990 correctly classifies the
2018 Form	recipient as an individual and includes them on Schedule I, Part III within the amended r
990	eturn.

SCHEDULE R
(Form 990)

Related

Department of the Treasury

## **Related Organizations and Unrelated Partnerships**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

DLN: 93493131040351

Open to Public

Internal Revenue Service											CCCIOII	
Name of the organization Jobs for the Future Inc							Empl	oyer identif	ication	number		
							06-11	164568				
Part I Identification of Disregarded	<b>Entities</b> Complete if the organ	ization answer	red "Yes" on	Form 99	90, Part I	V, line 3	3.					
(a) Name, address, and EIN (if applicable) of di	sregarded entity	(b) Primary activity		(c) Legal domicile (state or foreign country)		(d) Total income		(e) End-of-year asse		ssets Direct co		
Part II Identification of Related Tax-E	xempt Organizations Comple	ete if the organ	nization answ	vered "Y	es" on Fo	orm 990.	Part IV	. line 34 be	cause i	t had one or	more	
related tax-exempt organizations			nzacion ansv	, ci ca i	01110	)	rareir	, iii e e i e e		t had one of	111010	
(a) Name, address, and EIN of related organiza	tion Prima	<b>(b)</b> ary activity	(c) Legal domicile (state or foreign country)		(d) Exempt Code section		(e) Public charity status (if section 501(c)(3))				Section (13) co en	g) n 512(b ontrolled tity?
(1)JFFLabs Inc 88 Broad Street 8th Floor Boston, MA 02110 06-1628001	educational	and promote I, worforce and levelopment	МА	!	501(c)(3)		509(a)(3	)	Jobs for	the Future Inc	Yes	No No
For Paperwork Reduction Act Notice, see the I	nstructions for Form 990		Cat No	. 50135Y	,				Sche	dule R (Form	990) 2	018

one or more related organizations tr	cated as a partifersif	(b)	(c)		(e)	(f)	(g)	(H	h)	(i)	(j	i) T	(k)	`
Name, address, and EIN of related organization		Primary activity	Legal domicile (state or foreign country)	(d) Direct controlling entity	Predominant income(related, unrelated, excluded from tax under sections 512-514)	Share of	Share of	Disprop alloca	rtionate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	ral or aging ner?	Percen owner	tage
								Yes	No		Yes	No		
(1) MyBestBet Solutions LLC 88 Broad Street 8th Floor Boston, MA 02110 00-1142473		To benefit & support the charitable & educational activities of the member	MA		related	-55,191	182,814		No		Yes		50.0	00 %
Part IV Identification of Related Organiz because it had one or more related or	ations Taxable as a organizations treated	a Corporation as a corporat	<b>n or Tr</b> i ion or t	<b>ust</b> Comple rust during	te if the orga the tax year.	nization an	swered "Ye	s" on I	Form	990, Part I'	V, lin∙	e 34		
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	d (state	(c) Legal lomicile e or foreig ountry)		(d) ect controlling T entity (C	(e) Type of entity Corp, S corp, or trust)	<b>(f)</b> Share of tota income	al Sha	(g) re of en year assets	d-of- Per	(h) centage nership	e )	(i) Section (13) con entit	trolled

Scredule k (Form 390) 2018		Pag	ge <b>3</b>										
Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.													
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.													
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?													
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity													
<b>b</b> Gift, grant, or capital contribution to related organization(s)	1b		No										
c Gift, grant, or capital contribution from related organization(s)	1c		No										
d Loans or loan guarantees to or for related organization(s)	1d		No										
e Loans or loan guarantees by related organization(s)	1e		No										
f Dividends from related organization(s)	1f	l	No										
g Sale of assets to related organization(s)	1g		No										
h Purchase of assets from related organization(s)	1h		No										
i Exchange of assets with related organization(s)	<b>1</b> i		No										
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No										
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No										
l Performance of services or membership or fundraising solicitations for related organization(s)	11		No										
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No										
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n \	Yes											
o Sharing of paid employees with related organization(s)	10 Y	Yes											
p Reimbursement paid to related organization(s) for expenses	<b>1</b> p		No										

•							
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		No
ı	Performance of services or membership or fundraising solicitations for related organization(s)				11		No
n	Performance of services or membership or fundraising solicitations by related organization(s)				1m		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes	
0	Sharing of paid employees with related organization(s)				10	Yes	
р	Reimbursement paid to related organization(s) for expenses				<b>1</b> p		No
q	Reimbursement paid by related organization(s) for expenses				<b>1</b> q		No
r	Other transfer of cash or property to related organization(s)				1r		No
s	Other transfer of cash or property from related organization(s)				1s		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line,	including covered re	elationships and tra	nsaction thresholds.			
	(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	(d) Method of determining am	ount ir	nvolved	
<b>(1)</b> JF	Labs Inc	0	121,015	allocation by employee time			
<b>(2)</b> JF	Labs Inc	N	7,012	Allocated by direct cost rate			

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

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

(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	domicile	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	10	(e) e all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets	<b>(h)</b> Disproprtiona allocations?	ľ	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		,	<b>(k)</b> Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
							-			Schedul	e R (Form	990	0) 2018

chedule R (For	Page	e <b>5</b>									
Part VII	Supplemental Info	nformation									
	Provide additional infor	mation for responses to questions on Schedule R (see instructions).									
Return Reference		Explanation									