



## **IMPORTANT PUBLIC FILE INFORMATION**

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Thank you!!

*Councilor, Buchanan + Mitchell, P.C.*

Form **990**

## Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

# 2021

Department of the Treasury  
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Open to Public Inspection

<b>A</b> For the <b>2021</b> calendar year, or tax year beginning and ending																															
<b>B</b> Check if applicable:  Address change Name change Initial return Final return/terminated Amended return Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2"><b>C</b> Name of organization <b>DIGITAL PROMISE GLOBAL</b></td> <td><b>D</b> Employer identification number <b>46-5460594</b></td> </tr> <tr> <td colspan="2">Doing business as</td> <td><b>E</b> Telephone number <b>202-450-3675</b></td> </tr> <tr> <td>Number and street (or P.O. box if mail is not delivered to street address)</td> <td>Room/suite</td> <td><b>G</b> Gross receipts \$ <b>152,995,413.</b></td> </tr> <tr> <td><b>1001 CONNECTICUT AVE, NW</b></td> <td><b>935</b></td> <td><b>H(a)</b> Is this a group return for subordinates? ..... Yes <input checked="" type="checkbox"/> No</td> </tr> <tr> <td colspan="2">City or town, state or province, country, and ZIP or foreign postal code <b>WASHINGTON, DC 20036</b></td> <td><b>H(b)</b> Are all subordinates included? Yes No</td> </tr> <tr> <td colspan="2"><b>F</b> Name and address of principal officer: <b>KATHRYN PETRILLO-SMITH</b></td> <td>If "No," attach a list. See instructions</td> </tr> <tr> <td colspan="2"><b>SAME AS C ABOVE</b></td> <td><b>H(c)</b> Group exemption number ▶</td> </tr> <tr> <td colspan="2"><b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or 527</td> <td></td> </tr> <tr> <td colspan="2"><b>J</b> Website: ▶ <b>HTTP://DIGITALPROMISE.ORG/INITIATIVE/GLOBAL</b></td> <td></td> </tr> <tr> <td colspan="2"><b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other ▶</td> <td><b>L</b> Year of formation: <b>2013</b> <b>M</b> State of legal domicile: <b>DC</b></td> </tr> </table>	<b>C</b> Name of organization <b>DIGITAL PROMISE GLOBAL</b>		<b>D</b> Employer identification number <b>46-5460594</b>	Doing business as		<b>E</b> Telephone number <b>202-450-3675</b>	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	<b>G</b> Gross receipts \$ <b>152,995,413.</b>	<b>1001 CONNECTICUT AVE, NW</b>	<b>935</b>	<b>H(a)</b> Is this a group return for subordinates? ..... Yes <input checked="" type="checkbox"/> No	City or town, state or province, country, and ZIP or foreign postal code <b>WASHINGTON, DC 20036</b>		<b>H(b)</b> Are all subordinates included? Yes No	<b>F</b> Name and address of principal officer: <b>KATHRYN PETRILLO-SMITH</b>		If "No," attach a list. See instructions	<b>SAME AS C ABOVE</b>		<b>H(c)</b> Group exemption number ▶	<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or 527			<b>J</b> Website: ▶ <b>HTTP://DIGITALPROMISE.ORG/INITIATIVE/GLOBAL</b>			<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other ▶		<b>L</b> Year of formation: <b>2013</b> <b>M</b> State of legal domicile: <b>DC</b>
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**Part I Summary**

<b>1</b>	Briefly describe the organization's mission or most significant activities: <b>TO SHAPE THE FUTURE OF LEARNING AND ADVANCE EQUITABLE EDUCATION SYSTEMS BY BRINGING TOGETHER</b>		
<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>10</b>
<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>9</b>
<b>5</b>	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	<b>5</b>	<b>159</b>
<b>6</b>	Total number of volunteers (estimate if necessary)	<b>6</b>	<b>50</b>
<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
<b>7b</b>	Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<b>0.</b>
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b> <b>63,685,790.</b>	<b>Current Year</b> <b>85,371,093.</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>3,153,047.</b>	<b>3,794,495.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>536,443.</b>	<b>125,713.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>0.</b>	<b>0.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>67,375,280.</b>	<b>89,291,301.</b>
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>40,792,094.</b>	<b>51,144,083.</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	<b>0.</b>	<b>0.</b>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>14,189,298.</b>	<b>18,531,558.</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	<b>0.</b>	<b>0.</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>409,341.</b>		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<b>10,392,855.</b>	<b>7,811,061.</b>
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>65,374,247.</b>	<b>77,486,702.</b>
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>2,001,033.</b>	<b>11,804,599.</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b> <b>135,056,040.</b>	<b>End of Year</b> <b>123,728,620.</b>
	<b>21</b> Total liabilities (Part X, line 26)	<b>117,870,762.</b>	<b>94,742,110.</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>17,185,278.</b>	<b>28,986,510.</b>

**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer <b>KATHRYN PETRILLO-SMITH, COO</b> Type or print name and title	Date			
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>MARK THOMAS</b>	Preparer's signature <b>MARK THOMAS</b>	Date <b>11/11/22</b>	Check if self-employed <input type="checkbox"/>	PTIN <b>P00362982</b>
	Firm's name ▶ <b>COUNCILOR, BUCHANAN &amp; MITCHELL, P.C.</b> Firm's address ▶ <b>7910 WOODMONT AVE. STE. 500</b> <b>BETHESDA, MD 20814</b>	Firm's EIN ▶ <b>52-1711839</b> Phone no. (301) <b>986-0600</b>			

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: DIGITAL PROMISE IS A GLOBAL NONPROFIT WORKING TO EXPAND OPPORTUNITY FOR EACH LEARNER. WE WORK WITH EDUCATORS, RESEARCHERS, TECHNOLOGY LEADERS, AND COMMUNITIES TO DESIGN, INVESTIGATE, AND SCALE UP INNOVATIONS THAT EMPOWER LEARNERS, ESPECIALLY THOSE WHO'VE BEEN

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 60,010,564. including grants of \$ 47,792,495. ) (Revenue \$ 3,339,549. ) THE DIGITAL PROMISE LEAGUE OF INNOVATIVE SCHOOLS IS A NATIONAL NETWORK THAT CONNECTS AND SUPPORTS THE MOST FORWARD-THINKING LEADERS IN EDUCATION. LEAGUE MEMBERS REPRESENT MORE THAN 150 DISTRICTS IN 38 STATES SERVING MORE THAN 4.4 MILLION STUDENTS. THEIR DIVERSE EXPERIENCES REFLECT THE ADVANCEMENTS, CHALLENGES, AND VITAL WORK OF PUBLIC EDUCATION IN THE UNITED STATES. IN 2021, THE LEAGUE OF INNOVATIVE SCHOOLS TEAM AND 9 SCHOOL DISTRICTS HOSTED THE INAUGURAL STUDENTS FOR EQUITABLE EDUCATION (SEE) SUMMIT, A NATIONAL SOCIAL JUSTICE SUMMIT ENVISIONED AND LED BY STUDENTS. THE LEAGUE CONTINUES TO HOST BIENNIAL MEETINGS FOR MEMBERS THAT FEATURE SCHOOL VISITS, GUEST SPEAKERS, COHORT WORKSHOPS FOCUSED ON SPECIFIC CHALLENGES, AND COLLABORATIVE PROBLEM-SOLVING. THE CENTER FOR INCLUSIVE INNOVATION,

4b (Code: ) (Expenses \$ 6,849,787. including grants of \$ 3,256,487. ) (Revenue \$ 262,835. ) LEARNING SCIENCES RESEARCH FOCUSES ON THE WHY, WHAT, AND HOW OF LEARNING, IN AND OUT OF SCHOOL. IN 2021 DIGITAL PROMISE WAS AWARDED A PRIME RESEARCH GRANT FROM THE NATIONAL SCIENCE FOUNDATION, TO SHARE RESEARCH INSIGHTS WITH BROAD AUDIENCES OF PRACTITIONERS AND RESEARCHERS. DIGITAL PROMISE IS ALSO ONE OF THE LEAD INSTITUTIONS FOR THE NATIONAL SCIENCE FOUNDATION'S AI INSTITUTE FOR ENGAGED LEARNING. ADDITIONALLY, THE INSTITUTE OF EDUCATION SCIENCES SELECTED DIGITAL PROMISE TO LEAD THE SEER RESEARCH NETWORK FOR DIGITAL LEARNING PLATFORMS AND WILL SERVE AS HUB OF A NETWORK OF FIVE DIGITAL LEARNING PLATFORMS, EACH OF WHICH IS COMMITTED TO OPENNESS TO RESEARCH, AND EVENTUALLY, A SET OF RESEARCH PROJECTS THAT USE THE PLATFORMS. DIGITAL PROMISE ALSO CONTINUED TO WORK ON NUMEROUS NSF AND US DEPARTMENT OF

4c (Code: ) (Expenses \$ 3,835,910. including grants of \$ 95,101. ) (Revenue \$ 82,649. ) POWERFUL LEARNING IS A SET OF PRINCIPLES GUIDING EDUCATORS TO DESIGN LEARNING EXPERIENCES THAT ENGAGE THE HEARTS AND MINDS OF LEARNERS. IN 2021 DIGITAL PROMISE LAUNCHED THE CIENA SOLUTIONS CHALLENGE. USING THE CHALLENGE BASED LEARNING FRAMEWORK, THROUGH THE CIENA SOLUTIONS CHALLENGE STUDENTS HAVE OPPORTUNITIES TO CONNECT TO THEIR LEARNING IN WAYS THAT ARE AUTHENTIC AND PERSONAL, LEARN THROUGH INQUIRY, COLLABORATE WITH THEIR COMMUNITY AND TAKE POSITIVE ACTION TO MAKE A DIFFERENCE IN THEIR LOCAL COMMUNITIES. AS PART OF POWERFUL LEARNING AND IN PARTNERSHIP WITH THE LEARNING SCIENCES RESEARCH TEAM, DIGITAL PROMISE EXPANDED ITS COMPUTATIONAL THINKING WORK IN 2022. COMPUTATIONAL THINKING IS AN INTERRELATED SET OF SKILLS AND PRACTICES FOR SOLVING COMPLEX PROBLEMS, A WAY TO LEARN TOPICS IN MANY DISCIPLINES, AND A

4d Other program services (Describe on Schedule O.) (Expenses \$ 3,164,347. including grants of \$ ) (Revenue \$ 109,462.)

4e Total program service expenses 73,860,608.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> .....	<b>X</b>	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions .....	<b>X</b>	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....		<b>X</b>
<b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .....		<b>X</b>
<b>5</b> 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 Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i> .....		<b>X</b>
<b>6</b> 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? <i>If "Yes," complete Schedule D, Part I</i> .....		<b>X</b>
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .....		<b>X</b>
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....		<b>X</b>
<b>9</b> 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? <i>If "Yes," complete Schedule D, Part IV</i> .....		<b>X</b>
<b>10</b> Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> .....		<b>X</b>
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> .....	<b>X</b>	
<b>b</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? <i>If "Yes," complete Schedule D, Part VII</i> .....	<b>X</b>	
<b>c</b> 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? <i>If "Yes," complete Schedule D, Part VIII</i> .....		<b>X</b>
<b>d</b> 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? <i>If "Yes," complete Schedule D, Part IX</i> .....		<b>X</b>
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....	<b>X</b>	
<b>f</b> 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)? <i>If "Yes," complete Schedule D, Part X</i> .....	<b>X</b>	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> .....	<b>X</b>	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> .....		<b>X</b>
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....		<b>X</b>
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? .....		<b>X</b>
<b>b</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? <i>If "Yes," complete Schedule F, Parts I and IV</i> .....	<b>X</b>	
<b>15</b> 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? <i>If "Yes," complete Schedule F, Parts II and IV</i> .....	<b>X</b>	
<b>16</b> 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? <i>If "Yes," complete Schedule F, Parts III and IV</i> .....		<b>X</b>
<b>17</b> 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 .....		<b>X</b>
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....		<b>X</b>
<b>19</b> 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> .....		<b>X</b>
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> .....		<b>X</b>
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .....		
<b>21</b> 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? <i>If "Yes," complete Schedule I, Parts I and II</i> .....	<b>X</b>	

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>22</b> 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? <i>If "Yes," complete Schedule I, Parts I and III</i> .....		X
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....	X	
<b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....		X
<b>24b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>24c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>24d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>b</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? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>26</b> Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....		X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....		X
<b>b</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)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>37</b> 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? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
<b>38</b> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? .....	X	

**Note:** All Form 990 filers are required to complete Schedule O

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

	Yes	No
<b>1a</b> Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .....		
<b>b</b> Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable .....		
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No checkboxes. Includes questions 2a through 17 regarding employee counts, tax returns, business income, foreign accounts, prohibited transactions, and charitable contributions.

**Part VI Governance, Management, and Disclosure.** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	1a	10	
<b>b</b>	Enter the number of voting members included on line 1a, above, who are independent		
	1b	9	
<b>2</b>	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?		X
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?		X
<b>7a</b>	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?		X
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	X	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	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 on Schedule O		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		X
<b>b</b>	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?		
<b>10b</b>			
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
<b>b</b>	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
<b>12c</b>			
<b>13</b>	Did the organization have a written whistleblower policy?	X	
<b>14</b>	Did the organization have a written document retention and destruction policy?	X	
<b>15</b>	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?		
<b>a</b>	The organization's CEO, Executive Director, or top management official	X	
<b>b</b>	Other officers or key employees of the organization		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>b</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?		
<b>16b</b>			

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **CA**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website     Another's website     Upon request     Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **THE ORGANIZATION - 202-450-3675**  
**1001 CONNECTICUT AVE, NW, NO. 935, WASHINGTON, DC 20036**

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

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

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

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax 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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KATHRYN PETRILLO-SMITH VP & COO	40.00			X				245,717.	0.	8,163.
(2) DR. BARBARA MEANS EXEC DIR - RESEARCH CENTER	40.00				X			231,417.	0.	21,784.
(3) DR. JEREMY ROSCHELLE EXEC DIR - RESEARCH CENTER	40.00				X			231,417.	0.	21,408.
(4) JEAN-CLAUDE BRIZARD PRESIDENT & CHIEF EXECUTIVE OFFICER	40.00	X		X				237,500.	0.	11,726.
(5) VICTOR VUCHIC CHIEF INNOVATION OFFICER	40.00					X		231,717.	0.	7,546.
(6) KIMBERLY ANN SMITH EXEC DIR - LEAGUE OF INNOV. SCHOOLS	40.00					X		187,667.	0.	14,801.
(7) CHRISTINA C LUKE LUNA SENIOR DIRECTOR - LIFELONG LEARNING	40.00					X		169,917.	0.	19,860.
(8) DR. DERRICK BROWNING COMPTROLLER	40.00					X		174,700.	0.	14,353.
(9) DR. VIKI YOUNG SENIOR RESEARCH DIRECTOR	40.00					X		175,800.	0.	5,583.
(10) SARA CRAWFORD DEP DIR FOR PROF LEARNING - VILS	40.00					X		174,300.	0.	5,761.
(11) KACEY BAKER CHIEF PEOPLE & EQUITY OFFICER	40.00					X		165,267.	0.	13,772.
(12) DR. LINDA ROBERTS CHAIR	4.00	X		X				0.	0.	0.
(13) VINCE JUARISTI MEMBER	3.00	X						0.	0.	0.
(14) MICHAEL TRUCANO VICE-CHAIR	3.00	X		X				0.	0.	0.
(15) SHAE HOPKINS MEMBER	3.00	X						0.	0.	0.
(16) DR. ANTHONY JACKSON MEMBER	3.00	X						0.	0.	0.
(17) DR. SHIRLEY MALCOM MEMBER	3.00	X						0.	0.	0.



**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) RONALD MASON, JR. MEMBER	3.00	X						0.	0.	0.
(19) RICHARD STEPHENS MEMBER	3.00	X						0.	0.	0.
(20) DR. YONG ZHAO MEMBER	3.00	X						0.	0.	0.
(21) KAREN CANTOR MEMBER	3.00	X						0.	0.	0.
<b>1b Subtotal</b> .....								2,225,419.	0.	144,757.
<b>c Total from continuation sheets to Part VII, Section A</b> .....								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b> .....								2,225,419.	0.	144,757.

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **78**

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> .....		X
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> .....	X	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> .....		X

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
CLIMBER INTERACTIVE LLC 1651 ASH ST, LAKE OSWEGO, OR 97034	WEBSITE DEVELOPMENT	144,179.

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

**Part VIII Statement of Revenue**

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns .....	<b>1a</b>					
	<b>b</b> Membership dues .....	<b>1b</b>					
	<b>c</b> Fundraising events .....	<b>1c</b>					
	<b>d</b> Related organizations .....	<b>1d</b>					
	<b>e</b> Government grants (contributions) .....	<b>1e</b>	5,574,984.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above ...	<b>1f</b>	79,796,109.				
	<b>g</b> Noncash contributions included in lines 1a-1f .....	<b>1g</b>	\$ 4,060,003.				
	<b>h Total.</b> Add lines 1a-1f .....			85,371,093.			
<b>Program Service Revenue</b>	<b>2 a</b> PROFESSIONAL SERVICES .....	<b>Business Code</b>					
		900099	3,794,495.	3,794,495.			
	<b>b</b> .....						
	<b>c</b> .....						
	<b>d</b> .....						
	<b>e</b> .....						
	<b>f</b> All other program service revenue .....						
<b>g Total.</b> Add lines 2a-2f .....			3,794,495.				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....		99,760.			99,760.	
	<b>4</b> Income from investment of tax-exempt bond proceeds .....						
	<b>5</b> Royalties .....						
	<b>6 a</b> Gross rents .....	<b>6a</b>	(i) Real				
			(ii) Personal				
	<b>b</b> Less: rental expenses ...	<b>6b</b>					
	<b>c</b> Rental income or (loss)	<b>6c</b>					
	<b>d</b> Net rental income or (loss) .....						
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	<b>7a</b>	(i) Securities	63,730,065.			
			(ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses .....	<b>7b</b>	63,704,112.				
	<b>c</b> Gain or (loss) .....	<b>7c</b>	25,953.				
<b>d</b> Net gain or (loss) .....			25,953.		25,953.		
<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....	<b>8a</b>						
<b>b</b> Less: direct expenses .....	<b>8b</b>						
<b>c</b> Net income or (loss) from fundraising events .....							
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>9a</b>						
<b>b</b> Less: direct expenses .....	<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities .....							
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>10a</b>						
<b>b</b> Less: cost of goods sold .....	<b>10b</b>						
<b>c</b> Net income or (loss) from sales of inventory .....							
<b>Miscellaneous Revenue</b>	<b>11 a</b> .....	<b>Business Code</b>					
	<b>b</b> .....						
	<b>c</b> .....						
	<b>d</b> All other revenue .....						
	<b>e Total.</b> Add lines 11a-11d .....						
<b>12 Total revenue.</b> See instructions .....			89,291,301.	3,794,495.	0.	125,713.	

**Part IX 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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	51,114,083.	51,114,083.		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	30,000.	30,000.		
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	1,378,246.	827,685.	490,628.	59,933.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	14,198,505.	13,057,027.	871,346.	270,132.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	811,265.	780,033.	23,448.	7,784.
<b>9</b> Other employee benefits	920,609.	620,738.	275,954.	23,917.
<b>10</b> Payroll taxes	1,222,933.	1,090,053.	106,787.	26,093.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management				
<b>b</b> Legal	12,453.	12,453.		
<b>c</b> Accounting	71,495.		71,495.	
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees				
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	3,489,764.	3,213,359.	255,471.	20,934.
<b>12</b> Advertising and promotion				
<b>13</b> Office expenses	1,069,543.	726,342.	343,201.	
<b>14</b> Information technology	232,357.	232,357.		
<b>15</b> Royalties				
<b>16</b> Occupancy	341,546.	29,554.	311,992.	
<b>17</b> Travel	135,458.	117,035.	17,875.	548.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	588,439.	481,561.	106,878.	
<b>20</b> Interest				
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	343,905.	311,120.	32,785.	
<b>23</b> Insurance	50,956.	1,064.	49,892.	
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
<b>a DUES AND SUBSCRIPTIONS</b>	1,357,704.	1,131,850.	225,854.	
<b>b FEDERAL PARTICIPANT SUP</b>	42,928.	42,928.		
<b>c REGISTRATION FEES</b>	36,810.	30,807.	6,003.	
<b>d UNCOLLECTIBLE ACCOUNTS</b>	26,080.		26,080.	
<b>e All other expenses</b>	11,623.	10,559.	1,064.	
<b>25 Total functional expenses.</b> Add lines 1 through 24e	77,486,702.	73,860,608.	3,216,753.	409,341.
<b>26 Joint costs.</b> 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)

**Part X Balance Sheet**

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

		(A)		(B)
		Beginning of year		End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	2,337,303.	<b>1</b>	3,313,412.
	<b>2</b> Savings and temporary cash investments .....	42,625,098.	<b>2</b>	35,575,561.
	<b>3</b> Pledges and grants receivable, net .....	4,278,871.	<b>3</b>	9,582,153.
	<b>4</b> Accounts receivable, net .....	1,112,576.	<b>4</b>	825,985.
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	2,598,795.	<b>9</b>	5,152,244.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 2,649,093.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 1,995,917.	639,715.	<b>10c</b> 653,176.
	<b>11</b> Investments - publicly traded securities .....	75,344,620.	<b>11</b>	61,678,328.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....	6,119,062.	<b>12</b>	6,947,761.
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....		<b>15</b>	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	135,056,040.	<b>16</b>	123,728,620.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	5,834,147.	<b>17</b>	7,108,107.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	585,160.	<b>19</b>	565,556.
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	111,451,455.	<b>25</b>	87,068,447.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	117,870,762.	<b>26</b>	94,742,110.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	8,306,593.	<b>27</b>	12,621,020.
	<b>28</b> Net assets with donor restrictions .....	8,878,685.	<b>28</b>	16,365,490.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	17,185,278.	<b>32</b>	28,986,510.
	<b>33</b> Total liabilities and net assets/fund balances .....	135,056,040.	<b>33</b>	123,728,620.

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	89,291,301.
2	Total expenses (must equal Part IX, column (A), line 25)	2	77,486,702.
3	Revenue less expenses. Subtract line 2 from line 1	3	11,804,599.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	17,185,278.
5	Net unrealized gains (losses) on investments	5	-3,367.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	28,986,510.

**Part XII Financial Statements and Reporting**

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

- 1 Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant? .....  
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant? .....  
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? .....  
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single 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 on Schedule O and describe any steps taken to undergo such audits .....

	Yes	No
1		
2a		X
b	X	
c	X	
3a	X	
3b	X	

Form 990 (2021)



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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	9654223.	2542682.	5811316.	63685790.	85371093.	167065104
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	9654223.	2542682.	5811316.	63685790.	85371093.	167065104
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						121685270
<b>6 Public support.</b> Subtract line 5 from line 4.						45379834.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>7</b> Amounts from line 4 .....	9654223.	2542682.	5811316.	63685790.	85371093.	167065104
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	4,324.	6,052.	232,670.	544,446.	99,760.	887,252.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	1286232.	1860705.	3017212.	3145044.	3794495.	13103688.
<b>11 Total support.</b> Add lines 7 through 10						181056044
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	17,565,630.
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) .....	<b>14</b>	25.06	%
<b>15</b> Public support percentage from 2020 Schedule A, Part II, line 14 .....	<b>15</b>	31.14	%
<b>16a 33 1/3% support test - 2021.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>		
<b>b 33 1/3% support test - 2020.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>		
<b>17a 10% -facts-and-circumstances test - 2021.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....	<input checked="" type="checkbox"/>		
<b>b 10% -facts-and-circumstances test - 2020.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....	<input type="checkbox"/>		

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

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

Section A. Public Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income; 11 Net income from unrelated business activities not included on line 10b; 12 Other income; 13 Total support.

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) 15%. Row 16: Public support percentage from 2020 Schedule A, Part III, line 15 16%.

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) 17%. Row 18: Investment income percentage from 2020 Schedule A, Part III, line 17 18%.

19a 33 1/3% support tests - 2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions



**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
<b>b</b> Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
<b>c</b> 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)? <i>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.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>9a</b> 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))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</b> Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
<b>b</b> A family member of a person described on line 11a above?		
<b>c</b> A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
<b>11a</b>		
<b>11b</b>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI 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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
<b>2</b> 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? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
<b>1</b>		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>2</b> 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>3</b> By reason of the relationship described on line 2, above, 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
<b>1</b>		
<b>2</b>		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
<b>2</b> Activities Test. Answer lines 2a and 2b below.			
<b>a</b> 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? <i>If "Yes," then in Part VI identify those supported organizations and explain 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.</i>	Yes	No	
<b>b</b> Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>			
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.			
<b>a</b> 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>If "Yes" or "No" provide details in Part VI.</i>			
<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 the role played by the organization in this regard.</i>			
<b>2a</b>			
<b>2b</b>			
<b>3a</b>			
<b>3b</b>			

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( *explain in Part VI*). **See instructions.**  
 All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

<b>Section A - Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

<b>Section B - Minimum Asset Amount</b>		(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):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
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 0.015 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 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

<b>Section C - Distributable Amount</b>			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

<b>Section D - Distributions</b>		<b>Current Year</b>
<b>1</b>	Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>
<b>2</b>	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>
<b>3</b>	Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>
<b>4</b>	Amounts paid to acquire exempt-use assets	<b>4</b>
<b>5</b>	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i> )	<b>5</b>
<b>6</b>	Other distributions ( <i>describe in Part VI</i> ). See instructions.	<b>6</b>
<b>7</b>	<b>Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>
<b>8</b>	Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions.	<b>8</b>
<b>9</b>	Distributable amount for 2021 from Section C, line 6	<b>9</b>
<b>10</b>	Line 8 amount divided by line 9 amount	<b>10</b>

<b>Section E - Distribution Allocations</b> (see instructions)	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2021</b>	<b>(iii) Distributable Amount for 2021</b>
<b>1</b> Distributable amount for 2021 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2021 (reasonable cause required - <i>explain in Part VI</i> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2021			
<b>a</b> From 2016			
<b>b</b> From 2017			
<b>c</b> From 2018			
<b>d</b> From 2019			
<b>e</b> From 2020			
<b>f</b> <b>Total</b> of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2021 distributable amount			
<b>i</b> Carryover from 2016 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2021 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2021 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>6</b> Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>7</b> <b>Excess distributions carryover to 2022.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2017			
<b>b</b> Excess from 2018			
<b>c</b> Excess from 2019			
<b>d</b> Excess from 2020			
<b>e</b> Excess from 2021			

**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.)

**PART II, SECTION C, LINE 17A, FACTS AND CIRCUMSTANCES TEST:**

DIGITAL PROMISE GLOBAL SATISFIES THE FACTS AND CIRCUMSTANCES TEST UNDER REG. SEC. 170A-9(F)(3) FOR THE FOLLOWING REASONS: SINCE ITS INCEPTION, THE DIGITAL PROMISE GLOBAL HAS RECEIVED GRANTS AND CONTRIBUTIONS AND FROM A BROAD BASE OF PRIVATE FOUNDATIONS, COMPANIES, OTHER DONORS AS WELL AS MORE THAN 20 FEDERAL AWARDS AND SUBAWARDS FROM MULTIPLE AGENCIES INCLUDING THE NATIONAL SCIENCE FOUNDATION AND THE US DEPARTMENT OF EDUCATION. DIGITAL PROMISE HAS RECEIVED MULTIPLE LARGE GRANTS (BOTH IN THE FORM OF A CASH AND IN-KIND CONTRIBUTIONS) WHICH DO NOT QUALIFY AS "UNUSUAL GRANTS," FROM AN ORGANIZATION THAT HAS SUPPORTED DIGITAL PROMISE SINCE ITS INCEPTION.

DIGITAL PROMISE GLOBAL HAS A DIVERSE AND INDEPENDENT GOVERNING BOARD COMPRISED OF INDIVIDUALS WITH RELEVANT EXPERTISE TO THE MISSION AND OPERATIONS OF THE DIGITAL PROMISE GLOBAL, INCLUDING FUNDRAISING, FINANCIAL CONTROLS AND SUBJECT MATTER EXPERTISE IN INNOVATION IN EDUCATION, EDUCATION TECHNOLOGY AND RESEARCH TO SUPPORT EDUCATION. DIGITAL PROMISE GLOBAL BOARD MEMBERS, BOTH CURRENT AND FORMER, INCLUDE UNIVERSITY PRESIDENTS, EDUCATION TECHNOLOGY ENTREPRENEURS AND KEY RESEARCHERS IN THE FIELDS OF EDUCATION AND LEARNING. DIGITAL PROMISE GLOBAL HAS A BROAD FUNDRAISING CAMPAIGN AND ACTIVELY SEEKS NEW DONORS. FINALLY, DIGITAL PROMISE GLOBAL'S MISSION IS TO ACCELERATE INNOVATION IN EDUCATION TO IMPROVE OPPORTUNITIES TO LEARN WHICH IS A CHARITABLE PURPOSE WITH BROAD PUBLIC APPEAL.

**Schedule B**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990 or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021**

Name of the organization

DIGITAL PROMISE GLOBAL

Employer identification number

46-5460594

Organization type (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization  <b>DIGITAL PROMISE GLOBAL</b>	Employer identification number  <b>46-5460594</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	 <hr/> <hr/> <hr/>	\$ <u>25,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	 <hr/> <hr/> <hr/>	\$ <u>7,572,077.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	 <hr/> <hr/> <hr/>	\$ <u>686,699.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	 <hr/> <hr/> <hr/>	\$ <u>70,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	 <hr/> <hr/> <hr/>	\$ <u>25,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	 <hr/> <hr/> <hr/>	\$ <u>25,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>DIGITAL PROMISE GLOBAL</b>	Employer identification number  <b>46-5460594</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	 <hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	 <hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	 <hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	 <hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	 <hr/> <hr/> <hr/>	\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	 <hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization  <b>DIGITAL PROMISE GLOBAL</b>	Employer identification number  <b>46-5460594</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
15	<hr/> <hr/> <hr/>	\$ 58,524,612.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
16	<hr/> <hr/> <hr/>	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
17	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
18	<hr/> <hr/> <hr/>	\$ 300,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>DIGITAL PROMISE GLOBAL</b>	Employer identification number  <b>46-5460594</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	 <hr/> <hr/> <hr/>	\$ <u>4,060,003.</u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
20	 <hr/> <hr/> <hr/>	\$ <u>25,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
21	 <hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
22	 <hr/> <hr/> <hr/>	\$ <u>25,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
23	 <hr/> <hr/> <hr/>	\$ <u>4,351,045.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
24	 <hr/> <hr/> <hr/>	\$ <u>25,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>DIGITAL PROMISE GLOBAL</b>	Employer identification number  <b>46-5460594</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
26	<hr/> <hr/> <hr/>	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
27	<hr/> <hr/> <hr/>	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
28	<hr/> <hr/> <hr/>	\$ 399,909.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
29	<hr/> <hr/> <hr/>	\$ 370,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
30	<hr/> <hr/> <hr/>	\$ 700,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>DIGITAL PROMISE GLOBAL</b>	Employer identification number  <b>46-5460594</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31	<hr/> <hr/> <hr/>	\$ 1,781,001.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>DIGITAL PROMISE GLOBAL</b>	Employer identification number  <b>46-5460594</b>
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**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
19	9,604 VERIZON TABLETS _____ _____ _____	\$ 4,060,003.	06/30/22
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization  <b>DIGITAL PROMISE GLOBAL</b>	Employer identification number  <b>46-5460594</b>
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization DIGITAL PROMISE GLOBAL Employer identification number 46-5460594

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Form with multiple sections: 1. Purpose(s) of conservation easements (checkboxes for land, habitat, open space, historic area, structure). 2. Conservation contribution details (2a-2d table). 3-7. Monitoring and enforcement details. 8-9. Reporting requirements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form with sections 1a-1b and 2. 1a: Reporting requirements for public exhibition. 1b: Reporting requirements for public service with revenue and asset amounts. 2: Reporting requirements for financial gain with revenue and asset amounts.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange program
  - e  Other \_\_\_\_\_
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment  \_\_\_\_\_ %
  - b Permanent endowment  \_\_\_\_\_ %
  - c Term endowment  \_\_\_\_\_ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |   | Yes    | No |
|---|--------|----|
| (i) Unrelated organizations   | 3a(i)  |    |
| (ii) Related organizations  | 3a(ii) |    |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b     |    |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		2,649,093.	1,995,917.	653,176.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				653,176.



**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely held equity interests .....		
(3) Other		
(A) CERTIFICATES OF DEPOSIT	6,947,761.	END-OF-YEAR MARKET VALUE
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	6,947,761.	

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) REFUNDABLE ADVANCES	87,012,303.
(3) DEFERRED RENT	56,144.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	87,068,447.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

**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.

<b>1</b>	Total revenue, gains, and other support per audited financial statements		<b>1</b>	181,517,838.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	-3,367.	
<b>b</b>	Donated services and use of facilities	<b>2b</b>	92,229,904.	
<b>c</b>	Recoveries of prior year grants	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	92,226,537.	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	89,291,301.	
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	0.	
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)	<b>5</b>	89,291,301.	

**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.

<b>1</b>	Total expenses and losses per audited financial statements		<b>1</b>	169,716,606.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b>	Donated services and use of facilities	<b>2a</b>	92,229,904.	
<b>b</b>	Prior year adjustments	<b>2b</b>		
<b>c</b>	Other losses	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	92,229,904.	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	77,486,702.	
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	0.	
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)	<b>5</b>	77,486,702.	

**Part XIII Supplemental Information.**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

EXPLANATION: THE ORGANIZATION REQUIRES THAT A TAX POSITION BE RECOGNIZED OR DERECOGNIZED BASED ON A "MORE-LIKELY-THAN-NOT" THRESHOLD. THIS APPLIES TO POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. THE ORGANIZATION DOES NOT BELIEVE ITS FINANCIAL STATEMENTS INCLUDE, OR REFLECT, ANY UNCERTAIN TAX POSITIONS.

**SCHEDULE F  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Statement of Activities Outside the United States**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021**

Open to Public  
Inspection

Name of the organization

DIGITAL PROMISE GLOBAL

Employer identification number

46-5460594

**Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .....  **Yes**  **No**

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
NORTH AMERICA	0	0	PROGRAM SERVICES	DEVELOPMENT OF A CHALLENGE LIBRARY, CHALLENGE CONTEST, PROGRAM	30,000.
<b>3 a</b> Subtotal .....	0	0			30,000.
<b>b</b> Total from continuation sheets to Part I .....	0	0			0.
<b>c Totals</b> (add lines 3a and 3b) .....	0	0			30,000.

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

Schedule F (Form 990) 2021

**Part II** **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	DEVELOPMENT OF A CHALLENGE LIBRARY, CHALLENGE CONTEST, PROGRAM	20,000.		0.		
		NORTH AMERICA	DEVELOPMENT OF A CHALLENGE LIBRARY, CHALLENGE CONTEST, PROGRAM	10,000.		0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ \_\_\_\_\_

3 Enter total number of other organizations or entities ▶ \_\_\_\_\_



Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* .....  Yes  No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* .....  Yes  No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* .....  Yes  No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* .....  Yes  No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* .....  Yes  No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* .....  Yes  No

**Part V Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

**PART I, LINE 2:**

PROGRAM STAFF WORKS WITH RECIPIENTS ABROAD TO ENSURE THAT SUPPLIES AND EQUIPMENT ARE PROPERLY RECEIVED AND FUNCTIONING AS INTENDED. IN MANY CASES, PROGRAM STAFF HANDLES THE PROCUREMENT PROCESS FOR RECIPIENTS BY WORKING WITH SUPPLIERS DIRECTLY OR IN-COUNTRY CUSTOMS PROFESSIONALS. RECIPIENT ORGANIZATIONS ARE THEN REQUIRED TO SUBMIT AN ACKNOWLEDGMENT FORM THAT THEY HAVE RECEIVED THE EQUIPMENT.

Multiple horizontal lines for supplemental information.

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021**

**Open to Public  
Inspection**

Name of the organization **DIGITAL PROMISE GLOBAL** Employer identification number **46-5460594**

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ALGIERS CHARTER SCHOOL ASSOCIATION, INC. - 2401 WESTBEND PARKWAY, SUITE 2001 - NEW ORLEANS, LA 70114	20-3737902		20,000.	47,350.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
ALUM ROCK UNION ELEMENTARY SCHOOL DISTRICT - 2930 GAY AVENUE - SAN JOSE, CA 95127	77-0016360	STATE GOVERNMENT	95,000.	193,738.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
ARISE ACADEMY 3819 ST. CLAUDE AVENUE NEW ORLEANS, LA 70117	26-3240588		20,000.	26,727.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
ATLANTA INDEPENDENT SCHOOL SYSTEM 130 TRINITY AVENUE ATLANTA, GA 30303	58-6000134		1,120,000.	5,112,982.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
BALTIMORE CITY PUBLIC SCHOOLS 200 E. NORTH AVENUE BALTIMORE, MD 21202	52-2064235		63,750.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
BALTIMORE CITY PUBLIC SCHOOLS 200 E. NORTH AVENUE BALTIMORE, MD 21202	52-2064235		0.	89,403.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **9.**

3 Enter total number of other organizations listed in the line 1 table **89.**

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

Schedule I (Form 990) 2021

**SEE PART IV FOR COLUMN (H) DESCRIPTIONS**



**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIRMINGHAM BOARD OF EDUCATION 2015 PARK PLACE NORTH BIRMINGHAM , AL 35203	63-6000767	STATE GOVERNMENT	5,000.	489.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
BOARD OF EDUCATION OF JEFFERSON COUNTY, KENTUCKY - PO BOX 34020 - LOUISVILLE, KY 40232	61-0001316	STATE GOVERNMENT	224,750.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
BOARD OF EDUCATION OF JEFFERSON COUNTY, KENTUCKY - PO BOX 34020 - LOUISVILLE, KY 40232	61-0001316	STATE GOVERNMENT	0.	392,091.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
BOARD OF EDUCATION OF MONTGOMERY COUNTY, MARYLAND - 45 WEST GUDE DRIVE, STE 3200 - ROCKVILLE, MD 20850	52-6000989	STATE GOVERNMENT	75,000.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
BOARD OF EDUCATION OF PRINCE GEORGE'S COUNTY, MARYLAND - 14201 SCHOOLLANE - UPPER MARLBORO , MD 20772	52-6000992	STATE GOVERNMENT	184,000.	681,181.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
CEDAR RAPIDS COMMUNITY SCHOOL DISTRICT - 2500 EDGEWOOD RD. NW - MARION , IA 52405	42-6023551	STATE GOVERNMENT	25,000.	12,732.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
CINCINNATI PUBLIC SCHOOLS 2651 BURNET AVENUE CINCINNATI, OH 45219	31-6000758		50,000.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
CITY OF FALL RIVER ONE GOVERNMENT CENTER FALL RIVER, MA 02722	04-6001387	STATE GOVERNMENT	101,250.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
CITY OF FALL RIVER ONE GOVERNMENT CENTER FALL RIVER, MA 02722	04-6001387	STATE GOVERNMENT	0.	46,020.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY OF LAWRENCE 200 COMMON STREET LAWRENCE, MA 01840	04-6001394	STATE GOVERNMENT	192,000.	540,082.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
CITY OF NORWALK 125 EAST AVENUE NORWALK, CT 06852	06-6011881	STATE GOVERNMENT	300,000.	1,025,462.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
CITY OF WORCESTER 455 MAIN STREET, ROOM 203 WORCESTER, MA 01608	04-6001418	STATE GOVERNMENT	173,000.	340,817.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
CLARKSDALE MUNICIPAL SCHOOL DISTRICT - P.O. BOX 1088 - CLARKSDALE, MS 38614	64-6008786		40,000.	19,256.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
COMPTON UNIFIED SCHOOL DISTRICT 501 S. SANTA FE AVENUE COMPTON, CA 90221-3814	95-2650551	STATE GOVERNMENT	121,250.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
COMPTON UNIFIED SCHOOL DISTRICT 501 S. SANTA FE AVENUE COMPTON, CA 90221-3814	95-2650551	STATE GOVERNMENT	0.	553,070.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
COUNTY OF MARICOPA 301 W. JEFFERSON STREET, SUITE 100 PHOENIX, AZ 85003	86-6000472	STATE GOVERNMENT	165,000.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
CRESCENT CITY SCHOOLS 3811 NORTH GALVEZ STREET NEW ORLEANS, LA 70117	27-2811737	501(C)(3)	7,500.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
DALLAS INDEPENDENT SCHOOL DISTRICT 9400 N. CENTRAL EXPWY DALLAS, TX 75231	75-6001278	STATE GOVERNMENT	64,000.	147,733.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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EDUCATION DEVELOPMENT CENTER, INC. 43 FOUNDRY AVENUE WALTHAM, MA 02453	04-2241718	OTHER	195,451.	0.			TO PROVIDE DATA ANALYSIS TO SUPPORT THE WORK OF THE LEARNING SCIENCES RESEARCH PORTFOLIO
FLOYD COUNTY BOARD OF EDUCATION 442 KY RT 550 EASTERN, KY 41622	61-6001347	OTHER	84,737.	0.			SUBAWARD UNDER THE TOUGH AS NAILS RESEARCH PROJECT
FORT BEND INDEPENDENT SCHOOL DISTRICT - 16431 LEXINGTON BLVD - SUGAR LAND, TX 77479	74-6025253	STATE GOVERNMENT	17,000.	27,674.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
FRIENDSHIP PUBLIC CHARTER SCHOOL, INC. - 1400 FIRST STREET NW, SUITE 300 - WASHINGTON, DC 20001	58-2398964	LLC	301,000.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
FRIENDSHIP PUBLIC CHARTER SCHOOL, INC. - 1400 FIRST STREET NW, SUITE 300 - WASHINGTON, DC 20001	58-2398964	LLC	0.	522,162.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
GLENDALE UNIFIED SCHOOL DISTRICT 223 N. JACKSON STREET GLENDALE, CA 91206	95-6001464	STATE GOVERNMENT	12,000.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
GRESHAM-BARLOW SCHOOL DISTRICT 1331 NW EASTMAN PKWY GRESHAM, OR 97030	93-6000831	STATE GOVERNMENT	8,000.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
GRESHAM-BARLOW SCHOOL DISTRICT 1331 NW EASTMAN PKWY GRESHAM, OR 97030	93-6000831	STATE GOVERNMENT	0.	14,755.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
GUILFORD COUNTY BOARD OF EDUCATION 712 NORTH EUGENE STREET GREENSBORO, NC 27401	56-6000522	STATE GOVERNMENT	64,000.	25,043.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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HIGHLINE PUBLIC SCHOOLS 15675 AMBAUM BLVD. SW BURIEN, WA 98166	91-6001631	STATE GOVERNMENT	76,250.	37,038.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
HOLYOKE PUBLIC SCHOOLS 57 SUFFOLK STREET HOLYOKE, MA 01073	04-6001393	STATE GOVERNMENT	50,000.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
HOUSTON INDEPENDENT SCHOOL DISTRICT - 4400 WEST 18TH STREET - HOUSTON, TX 77092	74-6001255	STATE GOVERNMENT	1,164,000.	5,658,273.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
INDIAN PRAIRIE SCHOOL DISTRICT 204 780 SHORELINE DRIVE AURORA, IL 60504	36-2746876	OTHER	25,349.	0.			SUBAWARD UNDER THE COMPUTATIONAL THINKING PATHWAYS RESEARCH PROJECT
IOWA CITY COMMUNITY SCHOOL DISTRICT - 1725 N DODGE STREET - IOWA CITY, IA 52245	42-6023567	OTHER	21,040.	0.			SUBAWARD UNDER THE COMPUTATIONAL THINKING PATHWAYS RESEARCH PROJECT
IRVING INDEPENDENT SCHOOL DISTRICT 2621 WEST AIRPORT FRWY IRVING, TX 75062	75-6001854	STATE GOVERNMENT	211,750.	188,023.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
JERSEY CITY PUBLIC SCHOOLS 346 CLAREMONT AVENUE JERSEY CITY, NJ 07305	22-6002012		216,000.	326,915.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
KIPP METRO ATLANTA SCHOOLS 1445 MAYNARD RD. NW ATLANTA, GA 30331	11-3723114	NON-PROFIT C COR	84,000.	49,034.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
LEARNING OVATIONS 16 COLTRANE COURT IRVINE, CA 92617	46-3659775	OTHER	2,105,137.	0.			A SUBAWARD TO LEARNING OVATIONS FOR THE UNITED2READ PROJECT. A PROJECT FUNDED BY THE US

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LITTLE ROCK SCHOOL DISTRICT 810 WEST MARKHAM STREET LITTLE ROCK, AR 72201	71-6014717	STATE GOVERNMENT	75,000.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
LOS ANGELES UNIFIED SCHOOL DISTRICT - 333 SOUTH BEAUDRY AVENUE - LOS ANGELES, CA 90017-1466	95-6001908	STATE GOVERNMENT	218,000.	41,039.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
MARICOPA COUNTY SCHOOL DISTRICT 40 GLENDALE ELEMENTARY SCHOOL - 7301 N. 58TH AVENUE - GLENDALE, AZ 85301	86-6000498	STATE GOVERNMENT	30,000.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
MARSHALLTOWN COMMUNITY SCHOOL DISTRICT - 1002 SOUTH 3RD AVENUE - MARSHALLTOWN, IA 50158	42-6021927	STATE GOVERNMENT	63,750.	75,445.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
MATER ACADEMY OF NEVADA 6630 SURREY STREET LAS VEGAS, NV 89119	46-5122331	501(C)(3)	312,000.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
MATER ACADEMY OF NEVADA 6630 SURREY STREET LAS VEGAS, NV 89119	46-5122331	501(C)(3)	0.	744,001.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
MATER ACADEMY, INC. 6340 SUNSET DRIVE MIAMI, FL 33143	65-0857507	501(C)(3)	396,500.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
MATER ACADEMY, INC. 6340 SUNSET DRIVE MIAMI, FL 33143	65-0857507	501(C)(3)	0.	2,342,958.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
MCCOMB SCHOOL DISTRICT 695 MINNESOTA AVENUE MCCOMB, MS 39648	64-6000685		20,000.	44,299.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MDRC 200 VESEY STREET, 23RD FLOOR NEW YORK, NY 10281	23-7379473	501(C)3	254,341.	0.			A SUBAWARD TO MDRC FOR THE UNITED2READ PROJECT. A PROJECT FUNDED BY THE US DEPARTMENT OF EDUCATION
METROPOLITAN SCHOOL DISTRICT OF WAYNE TOWNSHIP - 1220 S. HIGH SCHOOL ROAD - INDIANAPOLIS, IN 46241	35-1072270	STATE GOVERNMENT	78,000.	96,910.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
MILWAUKEE BOARD OF SCHOOL DIRECTORS - 5225 W. VLIET STREET, PO BOX 2181 - MILWAUKEE, WI 53201-2181	39-6003457	STATE GOVERNMENT	307,000.	954,261.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
MORGAN LOCAL SCHOOL DISTRICT PO BOX 509 MCCONNELSVILLE, OH 43756	31-6402662	STATE GOVERNMENT	20,000.	31,777.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
NEW BRUNSWICK BOARD OF EDUCATION 268 BALDWIN STREET NEW BRUNSWICK, NJ 08901	22-6002128	STATE GOVERNMENT	200,000.	939,934.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
NEW HORIZONS REGIONAL EDUCATION CENTERS - 520 BUTLER FARM ROAD - HAMPTON, VA 23666	54-0974022	STATE GOVERNMENT	10,000.	4,419.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
NEW YORK CITY DEPARTMENT OF EDUCATION - 52 CHAMBERS STREET - NEW YORK, NY 10007	13-6400434	STATE GOVERNMENT	178,000.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
NEW YORK CITY DEPARTMENT OF EDUCATION - 52 CHAMBERS STREET - NEW YORK, NY 10007	13-6400434	STATE GOVERNMENT	0.	435,161.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
NEWARK PUBLIC SCHOOLS 2 CEDAR STREET NEWARK, NJ 07102	22-6002140	STATE GOVERNMENT	75,000.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEWBURGH ENLARGED CITY SCHOOL DISTRICT - 124 GRAND STREET - NEWBURGH, NY 12550	14-6001726	STATE GOVERNMENT	68,750.	49,034.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
ORANGE UNIFIED SCHOOL DISTRICT 1401 N. HANDY STREET ORANGE, CA 92867	95-6004968	STATE GOVERNMENT	152,000.	593,049.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
ORANGEBURG COUNTY SCHOOL DISTRICT 102 FOUNDERS COURT ORANGEBURG, SC 29118	83-3861927		100,000.	180,983.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
PENDERGAST ELEMENTARY SCHOOL DISTRICT 92 - 3802 N 91ST AVENUE - PHOENIX, AZ 85037-2368	86-6000522		186,000.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
PENDERGAST ELEMENTARY SCHOOL DISTRICT 92 - 3802 N 91ST AVENUE - PHOENIX, AZ 85037-2368	86-6000522		0.	446,464.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
PIKEVILLE INDEPENDENT SCHOOLS 148 SECOND STREET PIKEVILLE, KY 41501	61-6001430	STATE GOVERNMENT	8,655.	0.			SUBAWARD UNDER THE TOUGH AS NAILS RESEARCH PROJECT
POLK COUNTY BOARD OF EDUCATION PO BOX 665 BENTON, TN 37307	62-6000791	STATE GOVERNMENT	20,000.	21,571.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
PORTLAND PUBLIC SCHOOLS 501 N. DIXON STREET PORTLAND, OR 97227	93-6000830		234,000.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
PORTLAND PUBLIC SCHOOLS 501 N. DIXON STREET PORTLAND, OR 97227	93-6000830		0.	1,365,988.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REYNOLDS SCHOOL DISTRICT #7 1204 NE 201ST AVENUE FAIRVIEW, OR 97024	93-6000836	STATE GOVERNMENT	75,000.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
REYNOLDS SCHOOL DISTRICT #7 1204 NE 201ST AVENUE FAIRVIEW, OR 97024	93-6000836		0.	5,867.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
RICHARD WRIGHT PUBLIC CHARTER SCHOOL OF JOURNALISM AND MEDIA ARTS - 475 SCHOOL STREET, SW - WASHINGTON, DC 20024	27-2713037	501(C)(3)	10,000.	24,938.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
RICHMOND COUNTY BOARD OF EDUCATION 864 BROAD STREET 4TH FLOOR AUGUSTA, GA 30901-2609	58-6000310	STATE GOVERNMENT	360,000.	1,281,176.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
ROOSEVELT SCHOOL DIST 66 6000 S. 7TH STREET PHOWNIX, AZ 85042	86-6000509	STATE GOVERNMENT	4,091.	29,778.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
SAN ANTONIO INDEPENDENT SCHOOL DISTRICT - 141 LAVACA STREET - SAN ANTONIO, TX 74-6002167	74-6002167		0.	12,185.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
SAN FRANCISCO UNIFIED SCHOOL DISTRICT - 135 VAN NESS AVENUE - ROOM 315 - SAN FRANCISCO, CA 94102	94-6000416	STATE GOVERNMENT	11,750.	23,444.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
SCHOOL BOARD OF MIAMI-DADE COUNTY, FLORIDA - 1450 N.E. 2ND AVENUE - MIAMI, FL 33132	59-6000572		147,000.	58,113.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
SHELBY COUNTY SCHOOLS 160 S. HOLLYWOOD STREET ROOM 226 MEMPHIS, TN 38112	62-6000834	STATE GOVERNMENT	576,000.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS

Schedule I (Form 990)



**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHELBY COUNTY SCHOOLS 160 S. HOLLYWOOD STREET ROOM 226 MEMPHIS , TN 38112	62-6000834		0.	1,653,071.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
SRI INTERNATIONAL 333 RAVENSWOOD AVE MENLO PARK, CA 94025	94-1160950	501(C)3	74,765.	0.			TO SUPPORT THE RESEARCH WORK OF THE LEARNING SCIENCES RESEARCH AWARDS
SWEETWATER PUBLIC SCHOOLS 11107 N. HWY 30 SWEETWATER, OK 73666	73-1173545	STATE GOVERNMENT	20,000.	9,154.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
TALLADEGA COUNTY SCHOOLS PO BOX 887 TALLADEGA, AL 35161	63-6001115	STATE GOVERNMENT	13,321.	0.			SUBAWARD UNDER THE COMPUTATIONAL THINKING PATHWAYS RESEARCH PROJECT
THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA - 600 S.E. 3RD AVENUE, TREASURERER'S OFFICE, 2ND FLOOR - FORT LAUDERDALE, FL 33301	59-6000530		300,000.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA - 600 S.E. 3RD AVENUE, TREASURERER'S OFFICE, 2ND FLOOR - FORT LAUDERDALE, FL 33301	59-6000530		0.	1,492,420.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
TRENTON BOARD OF EDUCATION 108 N. CLINTON AVENUE TRENTON , NJ 08609	21-6000326		376,000.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
TRENTON BOARD OF EDUCATION 108 N. CLINTON AVENUE TRENTON , NJ 08609	21-6000326		0.	1,450,947.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
TUCSON UNIFIED SCHOOL DISTRICT TUSD FINANCE DEPT. 1010 E. 10TH STR TUCSON, AZ 85719	86-6000551	STATE GOVERNMENT	75,000.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED NATIONS DEVELOPMENT PROGRAMME - ONE UNITED NATIONS PLAZA - NEW YORK, NY 10017		OTHER	50,000.	0.			AWARD FOR FACEBOOK/360FILM 2021 PROJECT
UNIVERSITY OF PITTSBURGH 500 ROSS STREET PITTSBURGH, PA 15262	25-0965591		42,390.	0.			SUBAWARD UNDER THE POST DOC RESEARCH PROJECT
VALLEJO CITY UNIFIED SCHOOL DISTRICT - 665 WALNUT AVENUE - VALLEJO, CA 94592	68-0111380	STATE GOVERNMENT	37,000.	54,295.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
WGBH EDUCATIONAL FOUNDATION ONE GUEST STREET BOSTON, MA 02135	04-2104397	501(C)3	431,301.	0.			TO PROVIDE EXPERTISE ON DEVELOPING PROTOTYPES TO SUPPORT THE NEXT GENERATION PRESCHOOL
WICHITA PUBLIC SCHOOLS 903 S. EDGEMOOR STREET WICHITA, KS 67218	48-6000351		969,000.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
WICHITA PUBLIC SCHOOLS 903 S. EDGEMOOR STREET WICHITA, KS 67218	48-6000351		0.	5,072,155.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
WINSTON-SALEM/FORSYTH COUNTY SCHOOLS - 475 CORPORATE SQUARE DRIVE - WINSTON-SALEM, NC 27105	55-0795164	STATE GOVERNMENT	125,000.	188,635.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
YAZOO COUNTY SCHOOL DISTRICT 94 PANTHER DRIVE, YAZOO CITY, MS 39194	64-6001271		20,000.	24,833.	PURCHASE PRICE	TABLETS	TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS
ST. LOUIS BOARD OF EDUCATION 801 N 11TH STREET ST. LOUIS, MO 63101	43-6003220	STATE GOVERNMENT	248,000.	0.			TO PROVIDE TEACHERS AND STUDENTS IN U.S. MIDDLE/HIGH SCHOOLS WITH ALWAYS-AVAILABLE ACCESS

Schedule I (Form 990)



**Part III Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

**Part IV Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

**PART I, LINE 2:**

ALL ENTITIES RECEIVING GRANT FUNDS SIGN A MEMORANDUM OF UNDERSTANDING (MOU) OR GRANT AGREEMENT THAT INCLUDES THE POLICIES AND REQUIREMENTS FOR RECEIVING THE GRANT FUNDS. DIGITAL PROMISE STAFF THEN WORK WITH THE RECIPIENTS ON AN ONGOING BASIS, THROUGHOUT THE GRANT PERIOD, THROUGH REGULAR CALLS AND WRITTEN UPDATES, TO ENSURE THAT THE GRANT FUNDS ARE USED IN COMPLIANCE WITH THE MOU. ADDITIONALLY, DPG ACTIVELY MONITORS THE USE OF GRANT FUNDS IN ACCORDANCE WITH THE UNIFORM GUIDANCE. FOR GRANTEEES THAT ARE FUNDED BY FEDERAL MONIES, DPG INQUIRES ABOUT SINGLE AUDIT REPORTS AND

**Part IV** Supplemental Information

FINDINGS DIRECTLY WITH THE GRANTEE AS WELL AS SEARCHING THE FEDERAL AUDIT CLEARINGHOUSE. ADDITIONALLY, DPG REQUIRES PERIODIC BUDGET REPORTS TO MONITOR SPENDING WITH ORIGINAL AWARD AMOUNTS AND BUDGET CATEGORIES FOR ALL GRANTEES. VARIANCES AND UNALLOWABLE COSTS ARE FOLLOWED UP ON BY DPG FINANCE STAFF.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: LEARNING OVATIONS

(H) PURPOSE OF GRANT OR ASSISTANCE: A SUBAWARD TO LEARNING OVATIONS FOR THE UNITED2READ PROJECT. A PROJECT FUNDED BY THE US DEPARMENT OF EDUCATION TO IMPROVE LITERACY.

NAME OF ORGANIZATION OR GOVERNMENT: MDRC

(H) PURPOSE OF GRANT OR ASSISTANCE: A SUBAWARD TO MDRC FOR THE UNITED2READ PROJECT. A PROJECT FUNDED BY THE US DEPARMENT OF EDUCATION TO IMPROVE LITERACY.

NAME OF ORGANIZATION OR GOVERNMENT: WGBH EDUCATIONAL FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE EXPERTISE ON DEVELOPING PROTOTYPES TO SUPPORT THE NEXT GENERATION PRESCHOOL SCIENCE PROJECT

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees  
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.  
 ▶ Attach to Form 990.  
 ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**2021**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization

DIGITAL PROMISE GLOBAL

Employer identification number

46-5460594

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use   |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence   |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees     |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain .....

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? .....

**3** Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |  |   |
|--|---|
| <input type="checkbox"/> Compensation committee              | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study                               |
| <input type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? .....
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? .....
- c** Participate in or receive payment from an equity-based compensation arrangement? .....
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III .....

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III .....

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

	Yes	No
<b>1b</b>		
<b>2</b>		
<b>4a</b>		X
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>	X	
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) 2021

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

**Note:** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) KATHRYN PETRILLO-SMITH VP & COO	(i)	230,417.	15,000.	300.	7,381.	782.	253,880.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) DR. BARBARA MEANS EXEC DIR - RESEARCH CENTER	(i)	225,417.	6,000.	0.	6,943.	14,841.	253,201.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) DR. JEREMY ROSCHELLE EXEC DIR - RESEARCH CENTER	(i)	225,417.	6,000.	0.	6,943.	14,465.	252,825.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JEAN-CLAUDE BRIZARD PRESIDENT & CHIEF EXECUTIVE OFFICER	(i)	237,500.	0.	0.	4,988.	6,738.	249,226.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) VICTOR VUCHIC CHIEF INNOVATION OFFICER	(i)	225,417.	6,000.	300.	6,961.	585.	239,263.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) KIMBERLY ANN SMITH EXEC DIR - LEAGUE OF INNOV. SCHOOLS	(i)	182,667.	5,000.	0.	5,630.	9,171.	202,468.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) CHRISTINA C LUKE LUNA SENIOR DIRECTOR - LIFELONG LEARNING	(i)	164,917.	5,000.	0.	5,098.	14,762.	189,777.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) DR. DERRICK BROWNING COMPTROLLER	(i)	164,700.	10,000.	0.	5,241.	9,112.	189,053.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) DR. VIKI YOUNG SENIOR RESEARCH DIRECTOR	(i)	170,500.	5,000.	300.	5,283.	300.	181,383.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) SARA CRAWFORD DEP DIR FOR PROF LEARNING - VILS	(i)	162,000.	12,000.	300.	5,238.	523.	180,061.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) KACEY BAKER CHIEF PEOPLE & EQUITY OFFICER	(i)	160,117.	5,000.	150.	4,963.	8,809.	179,039.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							





**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2021**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization **DIGITAL PROMISE GLOBAL** Employer identification number **46-5460594**

Part I Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ( <u>COMPUTER TABL</u> )	X	9,604	4,060,003.	FMV OF DEVICES
26 Other ▶ ( _____ )				
27 Other ▶ ( _____ )				
28 Other ▶ ( _____ )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? .....		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? .....		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? .....		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

PART I, LINE 25, COLUMN B:

AMOUNT REFLECTS THE NUMBER OF ITEMS RECEIVED.

**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021**

Open to Public  
Inspection

Name of the organization

DIGITAL PROMISE GLOBAL

Employer identification number

46-5460594

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SOLUTIONS ACROSS RESEARCH, PRACTICE, AND TECHNOLOGY.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

HISTORICALLY AND SYSTEMATICALLY EXCLUDED. OUR MISSION IS TO SHAPE THE  
FUTURE OF LEARNING AND ADVANCE EQUITABLE EDUCATION SYSTEMS BY BRINGING  
TOGETHER SOLUTIONS ACROSS RESEARCH, PRACTICE, AND TECHNOLOGY.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

LAUNCHED IN 2020, CONTINUES ITS WORK WITH A VISION OF A WORLD WHERE  
STUDENTS WHO ARE FURTHERS FROM OPPORTUNITY CAN LEARN, GROWN AND THRIVE  
AS THEIR AUTHENTIC SELVES. THROUGH THE VERIZON INNOVATIVE LEARNING  
SCHOOLS, DIGITAL PROMISE COLLABORATES WITH VERIZON TO EQUIP EVERY  
STUDENT AND TEACHER AT SELECT MIDDLE AND HIGH SCHOOLS ACROSS AMERICA  
WITH A DEVICE AND UP TO A FOUR-YEAR DATA PLAN, AND PROVIDE STUDENTS  
WITHOUT RELIABLE HOME INTERNET ACCESS WITH A MOBILE HOTSPOT. IN  
ADDITION TO FREE TECHNOLOGY AND ACCESS, VERIZON INNOVATIVE LEARNING  
SCHOOLS RECEIVE EXTENSIVE TEACHER TRAINING, SUPPORT, AND THE  
OPPORTUNITY TO ENGAGE IN A UNIQUE, IMMERSIVE CURRICULUM TO LEVERAGE  
TECHNOLOGY IN THEIR CLASSROOMS. IN 2021, THE VERIZON INNOVATIVE  
LEARNING SCHOOLS LAUNCHED ITS 8TH COHORT OF SCHOOLS, EXPANDING THE  
PROGRAM TO SERVE 512 SCHOOLS. IT ALSO LAUNCHED A HOTSPOT MODEL TO  
PROVIDE INTERNET CONNECTIVITY TO STUDENTS WHO LACK RELIABLE ACCESS. TO  
LEARN MORE ABOUT THE SCHOOLS THAT MAKE UP THE LEAGUE OF INNOVATIVE  
SCHOOLS OR THE VERIZON INNOVATIVE LEARNING SCHOOLS GO TO

[HTTPS://DIGITALPROMISE.ORG/INITIATIVE/LEAGUE-OF-INNOVATIVE-SCHOOLS/](https://digitalpromise.org/initiative/league-of-innovative-schools/) AND

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2021

Name of the organization DIGITAL PROMISE GLOBAL	Employer identification number 46-5460594
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[HTTPS://VERIZON.DIGITALPROMISE.ORG/.](https://verizon.digitalpromise.org/)

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

EDUCATION RESEARCH GRANTS THAT WERE AWARDED IN PREVIOUS YEARS. IN ADDITION TO ITS FEDERALLY FUNDED RESEARCH, IN 2021 DIGITAL PROMISE LAUNCHED A MULTI-YEAR STUDY TO EVALUATE THE IMPACT OF HIGHER ED COURSEWARE ENABLED TEACHING PRACTICES AND IMPLEMENTATION SUPPORTS ON THE COURSE COMPLETION RATES OF BLACK, LATINX AND INDIGENOUS STUDENTS; AND STUDENTS FROM A LOW-INCOME BACKGROUND.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

NECESSITY FOR FULLY PARTICIPATING IN A COMPUTATIONAL WORLD. ADDITIONALLY, DIGITAL PROMISE'S MICRO-CREDENTIALS CONTINUE TO OFFER EDUCATORS FLEXIBLE, VIRTUAL AVENUES TO EARN RECOGNITION FOR THE MANY WAYS THEY HAVE GROWN THEIR INSTRUCTIONAL PRACTICE. IN 2021, THE MICRO-CREDENTIAL PLATFORM HOSTED MORE THAN 550 ACTIVE MICRO-CREDENTIALS. WITH A CATALOG REPRESENTING MORE THAN 50 ISSUING ORGANIZATIONS, MORE THAN 8,000 NEW LEARNERS JOINED OUR PLATFORM TO PURSUE THEIR PROFESSIONAL AND NEARLY 5,000 EDUCATORS WERE AWARDED MICRO-CREDENTIALS. DIGITAL PROMISE'S POWERFUL LEARNING PORTFOLIO ALSO INCLUDES EFFORTS TO IDENTIFY AND PROMOTE DIGITAL LITERACY SKILLS AND SUPPORTS FOUNDATIONAL AND/OR OCCUPATIONAL AMONG HISTORICALLY AND SYSTEMATICALLY EXCLUDED ADULT LEARNERS. IN 2021 THE ORGANIZATION PRODUCED RESEARCH EXPLORING THE USE OF MICRO-CREDENTIALS ON THE SOCIAL MOBILITY OF RURAL LEARNERS, PRIORITIZING THOSE IMPACTED BY POVERTY, PARTICULARLY BLACK, LATINO, AND INDIGENOUS POPULATIONS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

Name of the organization DIGITAL PROMISE GLOBAL	Employer identification number 46-5460594
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RESEARCH IN ACTION WORKS TO TRANSFORM THE RELATIONSHIP BETWEEN EDUCATION RESEARCH AND PRACTICE. AS PART OF THESE EFFORT THE LEARNER VARIABILITY PROJECT (LVP) AND THE LEARNER VARIABILITY NAVIGATOR (LVN) A WEB APP, SEEK TO UNCOVER EVIDENCE-BASED FACTORS AND STRATEGIES TO MEET LEARNERS WHERE THEY ARE ACROSS VARIED CONTEXTS AND NEEDS. IN 2021 DIGITAL PROMISE CONDUCTED A REFRESH OF THE LEARNER VARIABILITY NAVIGATOR WITH A LENS TOWARD EQUITY BY SOLICITING PERSPECTIVES AND FEEDBACK FROM EDUCATORS AND EDTECH TEAMS. WE'VE ADDED A SENSE OF BELONGING FACTOR TO OUR LEARNER MODELS, AS WELL AS CULTURALLY RESPONSIVE PRACTICES FOR LEARNERS, SUCH AS BUILDING EMPATHY, DEVELOPING CULTURAL AWARENESS, AND DISCUSSING RACE.

EXPENSES \$ 3,164,347. INCLUDING GRANTS OF \$ 0. REVENUE \$ 109,462.

FORM 990, PART VI, SECTION B, LINE 11B:

EXPLANATION: THE FULL BOARD WILL REVIEW THE FORM 990 AND VOTE TO APPROVE OR MODIFY.

FORM 990, PART VI, SECTION B, LINE 12C:

ANNUALLY ALL STAFF AND BOARD MEMBERS ARE SENT A LIST OF ALL CONTRIBUTORS AND VENDORS OF \$5,000 OR MORE AND THE CONFLICT OF INTEREST POLICY. STAFF AND BOARD MEMBERS ARE ASKED TO REVIEW THE POLICY AND THE LIST OF CONTRIBUTORS AND VENDORS. THEY ARE THEN ASKED TO EMAIL THE CHIEF OPERATING OFFICER INDICATING THAT THEY HAVE READ AND REVIEWED THE POLICY AND INDICATE WHETHER OR NOT THEY HAVE ANY CONFLICTS THAT NEED TO BE DISCLOSED. ADDITIONALLY, THROUGHOUT THE YEAR AS NEW CONTRACTS ARE SIGNED, STAFF INVOLVED IN THE VENDOR SELECTION PROCESS ARE ASKED WHETHER OR NOT A CONFLICT OF INTEREST EXISTS. SIGNIFICANT CONTRACTS THAT REQUIRE BOARD APPROVAL ALSO FOLLOW THE SAME PROCESS.

Name of the organization DIGITAL PROMISE GLOBAL	Employer identification number 46-5460594
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FORM 990, PART VI, SECTION B, LINE 15A:

THE BOARD OF DIRECTORS REVIEWS AND APPROVES THE CEO'S COMPENSATION.

FORM 990, PART VI, SECTION C, LINE 19:

EXPLANATION: DOCUMENTS ARE AVAILABLE ON OUR WEBSITE, GUIDESTAR AND THE WEBSITE OF THE CALIFORNIA SECRETARY OF STATE/ATTORNEY GENERAL WEBSITE. GOVERNING DOCUMENTS ARE ALSO AVAILABLE BY E-MAIL REQUEST.

FORM 990, PART XII, LINE 2C:

NO CHANGE WAS MADE DURING FISCAL YEAR 2021.