### Form **990**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

For the 2019 calendar year, or tax year beginning

**Return of Organization Exempt From Income Tax** 

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

► Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

, 2019, and ending

OMB No. 1545-0047

Open to Public Inspection

В	Check	if applicable:	С						D Employer identification number					
	Ad	ddress change	Schoolhou	se of W			56-	16704	172					
	Na	ame change				Blvd. #220			E	Telepho	one numb	er		
	In	itial return	Durham, N	IC 27707						919	-477-	-2116		
	Fir	nal return/terminated												
	Ar	mended return							G	Gross r	eceipts \$	1,051	. 287.	
	Ar	oplication pending	F Name and add	ress of principa	al officer: Dob	ecca Dodder	•	Н	(a) Is this a g				X No	
	ш.	., ,	Same As C	Above	Keb	ecca Dodder	-	н	(b) Are all sub If "No," at	ordinates	included	? Yes	No	
ī	Tax-	exempt status:	X 501(c)(3)	501(c) (	) <b> </b>	sert no.) 4947	(a)(1) or	527	If "No," at	ach a list	. (see ins	tructions) —		
J			w.schoolh				( / ( /		(c) Group exe	mption n	umber ►			
K		n of organization:	X Corporation	Trust	Association	Other ►	L Year	of formation	• •			egal domicile: NC	<u></u>	
Pa		Summar			<u> </u>		<u>l</u>							
				ation's miss	ion or most s	ignificant activitie	es: Schoo	lhous	e of Wo	nder	crea	ates kind		
a)						igh nature-							<b></b> _	
ĕ														
Governance														
8		Check this bo				ed its operations						ets.		
						art VI, line 1a)					3		5 5	
es						rning body (Part ' ar 2019 (Part V,					5		5	
틯						ai 2019 (Fait V,					6		69 8	
Activities &				-		ımn (C), line 12 .					7a		0.	
						90-T, line 39					7b		0.	
									Pric	r Year		Current Y		
a)	8	Contributions	and grants (Pa	art VIII, line	1h)					74,8	359.	71	,431.	
Revenue	9									339,0	)41.	961	,299.	
eve	10					and 7d)					398.		,948.	
ď	11		•			, 9c, 10c, and 11				10,3			,563.	
	12					Part VIII, column				925,6	547.	1,044		
	13				•	A), lines 1-3)							894.	
	14 Benefits paid to or for members (Part IX, column (A), line 4)													
S	15	Salaries, other	ther compensation, employee benefits (Part IX, column (A), lines 5-10)						756,500.			914	,279.	
Jse	16a	Professional	fundraising fee	s (Part IX,	column (A), li	ne 11e)								
Expenses	b	Total fundrais	sing expenses (	(Part IX, co	lumn (D), line	25) ▶	88,	712.						
ш	17	Other expens	ses (Part IX, co	lumn (A), li	nes 11a-11d,	11f-24e)				178,0	37.	271	,207.	
	18	Total expense	es. Add lines 1	3-17 (must	equal Part IX	, column (A), line	e 25)			934,5		1,186		
	19	Revenue less	expenses. Sul	otract line 1	8 from line 1:	2				-8,8			,139.	
₽ 8 8									Beginning of			End of Ye		
ets or lances	20	Total assets	(Part X, line 16	)						499,6		506	,889.	
Ass	21	Total liabilitie	es (Part X, line	26)						294,4			,655.	
Ret	22	Net assets or	fund balances	. Subtract I	ine 21 from li	ne 20				205,2	250.	86	,234.	
Pa	rt II	Signatur	e Block						•	•				
Unde	r penal	Ities of perjury, I de	eclare that I have ex	amined this ret	urn, including acc	ompanying schedules a which preparer has an	and statement	s, and to the	e best of my k	nowledge	and belie	ef, it is true, correct	t, and	
com	olete. D	eclaration of prepa	arer (other than office	er) is based on	all information of	which preparer has an	ıy knowledge.							
		<u> </u>												
Siç	jn	, ,	ire of officer						Date					
He	re		dy Tonker						Execut	ive I	Direc	tor		
		, ,	print name and title	)	T		1.5			-				
			oreparer's name		Preparer's sign		Da	ate	Ch	ieck	<b>」</b> "	PTIN		
Pa			n Hunicutt			Hunicutt			se	lf-employ	ed ]	P01294583		
Pre	pare	.1		URPHY S	•	CPA, PC								
US	e On	Firm's addre		Whitley					Fi	m's EIN		-8021147		
			DURHA		7707-1469				Ph	ione no.	9194	191119		
May	the I	IRS discuss th	is return with th	ne preparer	shown above	e? (see instructio	ns)					X Yes	No	

Par		
1	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	
	Schoolhouse of Wonder creates kind, curious, and confident kids through	<u>nature-based</u>
	<pre>outdoor adventures.</pre>	
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.	n n
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 me Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	asured by expenses.
	and revenue, if any, for each program service reported.	the total expenses,
4 a	(Code: ) (Expenses \$ 868,465. including grants of \$ 894.) (Revenue \$	882,273.)
	Camps: Award-winning, year-round outdoor day camps with areas of focus t	
	nature exploration and naturalist skills, games, problem-solving, and me	
	curious, and confident kids. 2966 summer and intercession camp seats fil	
	currous, and confident kids. 2900 summer and intercession camp seats in	<u>.1ed_111_2019.</u>
		. – – – – – – – – –
4 b	(Code:) (Expenses \$ 45,626. including grants of \$) (Revenue \$	
	Field Studies: Curriculum-aligned, hands-on, outdoor field trips that in	
	students' curiosity and excitement to learn more about science, social s	
	cultural history. 4175 elementary and middle school students were served	l_in_2019
4 c	: (Code:) (Expenses \$9,056. including grants of \$) (Revenue \$	53,867.
	Leadership Development: Opportunities for 13-17 year olds to discover the	eir own
	leadership style and practice necessary leadership skills in our award-w	inning
	outdoor day camps. Skill building occurs through the creation of individ	lualized
	goals, personal development plans, real time feedback, and a weekly coach	
	with senior staff to assess individual progress. During 2019, we had 309	
	training experiences for 13-15 year olds, and 16 employment opportunities	
	year olds.	
	<b>*</b>	
Δ d	Other program services (Describe on Schedule O.)	
→u	(Expenses \$ including grants of \$ ) (Revenue \$	)
40	Total program service expenses ► 923,147.	
<b>→</b> €	Total program service expenses - 325, 147.	

# Form 990 (2019) Schoolhouse of Wonder Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I.	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If 'Yes,' complete Schedule D, Part V	10	Х	
11	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.			
á	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule  D, Part VI.	11 a	Х	
	Did the organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.	11 b		Х
(	Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
(	I Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
12 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		Х
ŀ	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
ł	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100.000 or more? If 'Yes,' complete Schedule F. Parts I and IV.	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If 'Yes,' complete Schedule F. Parts III and IV</i>	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If 'Yes,'</i> complete Schedule G, Part III	19		X
<b>20</b> a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		X
	olf 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21		Х

# Form 990 (2019) Schoolhouse of Wonder Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		X
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23		Х
24 a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
ŀ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
c	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
ŀ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	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>	26		Х
27	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? If 'Yes,' complete Schedule L, Part III.	27		Х
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
ā	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV.	28a		Х
ŀ	A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV	28b		X
C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
ł	o If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	<b>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>	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note: All Form 990 filers are required to complete Schedule O.	38	X	
Pai	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			No
1:	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	NO
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
(	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		,,	
ΒΔΔ	(gambling) winnings to prize winners?	1 c	990 (	(2010)

Form 990 (2019) Schoolhouse of Wonder

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

			Yes	No
2 8	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 69			
ı	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Χ	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 8	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
ı	b If 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation on Schedule O.</i>	3 b		
4 8	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
ı	b If 'Yes,' enter the name of the foreign country ►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
•	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 8	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
ı	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
ć	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a		X
ı	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
•	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			17
	Form 8282?	7с		X
	d If 'Yes,' indicate the number of Forms 8282 filed during the year	_		X
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e 7 f		X
	g If the organization, during the year, pay premiums, directly of multicity, on a personal benefit contract:	/1		71
,	as required?	7 g		
ı	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring			
	organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:			
	a Initiation fees and capital contributions included on Part VIII, line 12			
	Section 501(c)(12) organizations. Enter:			
	a Gross income from members or shareholders			
	b Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?	13a		
•	Note: See the instructions for additional information the organization must report on Schedule O.	ısa		
	b Enter the amount of reserves the organization is required to maintain by the states in			
	which the organization is licensed to issue qualified health plans			
	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O	14b		<u> </u>
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	0		
1.3	excess parachute payment(s) during the year?	15		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If 'Yes,' complete Form 4720, Schedule O.			

Form 990 (2019) Schoolhouse of Wonder 56-1670472 Page 6 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 No Yes 1 a 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. **b** Enter the number of voting members included on line 1a, above, who are independent..... 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Χ 2 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?..... 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?..... Χ 4 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? .... 5 Did the organization have members or stockholders?..... X 6 7 a 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? . . 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... 8 a X Χ 8 b 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses on Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10 a Did the organization have local chapters, branches, or affiliates? 10 a 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? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?.......... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Χ 12b to conflicts?..... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done...See. Schedule O...... Χ 12 c 13 Did the organization have a written whistleblower policy?...... 13 Χ Χ 14 Did the organization have a written document retention and destruction policy?..... 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official.. See. Schedule. 0...... X 15 a **b** Other officers or key employees of the organization..... 15b Χ If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year?..... 16 a 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 16b organization's exempt status with respect to such arrangements?..... Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > 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 X Upon request Own website Another's website Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records

Suite 220

Durham NC 27707 919-477-2116

Wendy Tonker 2634 Durham-Chapel Hill Blvd.

Form **990** (2019)

### 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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

BAA

Check this box if neither the organization nor any relation	ted organiz	ation	con	nper	ısate	ed any	y cu	rrent officer, direct	or, or trustee.	
				(C)	)					
(A) Name and title		is	both dir	an c	officer /truste	eck moss pers and a ee)		Reportable compensation from	(E)  Reportable compensation from	<b>(F)</b> Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Wendy Tonker	50									
Executive Dir.	0			Χ				69,542.	0.	5,055.
_(2) Christine Hendren Board Member	2	Х						0.	0.	0.
(3) Jennifer Costanza	2									
Board Member	0	Х						0.	0.	0.
(4) Anne Gering	11									
Board Member	0	Χ						0.	0.	0.
(5) John Offenberg	22									
Board Member	0	Χ						0.	0.	0.
(6) Elyse Bernstein	$-\frac{2}{0}$	Х		Х				0.	0.	0.
Treasurer (7) Jane Cooper	1	Λ		Λ				0.	0.	0.
Board Member	0	Х						0.	0.	0.
(8) Rebecca Dodder	2									
Chairperson	0	Х		Χ				0.	0.	0.
_(9) Paul Mosca	22									
Board Member	0	Χ						0.	0.	0.
<u>(10)</u>										
(11)										
(12)										
(13)										
(14)										

TEEA0107L 07/31/19

Form 990 (2019) Schoolhouse of Wonder 56-1670472										Page 8
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
<b>(A)</b> Name and title	Average hours per	hours box, unless person is both an officer and a director/trustee)				is both or/trus	n an tee)	<b>(D)</b> Reportable compensation from the organization	(E)  Reportable compensation from	<b>(F)</b> Estimated amount of other
	(list any hours for related organiza - tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)		•								
(24)										
(25)		:								
1 b Subtotal	on A						► ► ►	69,542.	0.	5,055.
d Total (add lines 1b and 1c)							ved	69,542. more than \$100,00	0. 0 of reportable comp	5,055. ensation
from the organization   0										Yes No
3 Did the organization list any <b>former</b> officer, direct on line 1a? <i>If 'Yes,' complete Schedule J for sucl</i>										. 3 X
<b>4</b> For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual.	r than \$1	50,00	00'?	If 'Y	es,'	com	plet	te Schedule J for		4 X
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes	e compen s,' comple	satio <i>te Sc</i>	n fro	om a lule	any i <i>J foi</i>	unrel r <i>suc</i>	ated h pe	d organization or	individual	
1 Complete this table for your five highest compensation from the organization. Report compensation from the organization.	sated inde	epend	dent	cor	ntrac	tors	that	received more th	an \$100,000 of	
(A)  Name and business addr		trie ca	alen	uar <u>y</u>	year	enan	ig w	Description of		(C) Compensation
								•		·
Total number of independent contractors (including b \$100,000 of compensation from the organization		ted to	o tho	se I	ıstec	abo	ve) v	wno received more	tnan	

Part VIII	Statement of Revenue
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		Check if Schedule O contains a response or note to	any line in this Part V	III		
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns				
a an	h	Total. Add lines 1a-1f	<b>▶</b> 71,431.			
ıne		Business Code				
Program Service Revenue	2a b	Camps, other program fees 611600 Camp scholarships awarded 611600	986,458. -25,159.	986,458. -25,159.		
Servic(	c d					
Ę	е					
g		All other program service revenue				
ď	g	Total. Add lines 2a-2f	961,299.			
	3	Investment income (including dividends, interest, and other similar amounts)	1/0101			1,648.
	5	Royalties	•			
		(i) Real (ii) Personal				
		Gross rents 6a				
		Less: rental expenses 6b				
		Rental income or (loss) 6c				
	d	Net rental income or (loss)				
	7 a	Gross amount from (i) Securities (ii) Other				
		sales of assets other than inventory 7a 30	0.			
	b	Less: cost or other basis				
		and sales expenses 7b				
		Gain or (loss)         7c         30           Net gain or (loss)				200
		, , ,	300.			300.
Other Revenue	8 a	Gross income from fundraising events (not including \$ of contributions reported on line 1c).  See Part IV, line 18				
ē	b	Less: direct expenses 8b				
ㅎ		Net income or (loss) from fundraising events				
•		Gross income from gaming activities. See Part IV, line 19				
	b	Less: direct expenses 9b				
	С	Net income or (loss) from gaming activities	•			
		Gross sales of inventory, less returns and allowances 10a 16, 60				
		Less: cost of goods sold 10b 7,04				
	С	Net income or (loss) from sales of inventory  Business Code	9,563.	9,563.		
	11 ~					
	11 a b c d					
	ņ					
scellaneous Revenue	4	All other revenue				
Σ — 		Total. Add lines 11a-11d	<b>&gt;</b>			
		Total revenue. See instructions.		970,862.	0.	1,948.
		TOTAL TOTAL COO HIGH MOUNTING TO THE TAIL	1.044.74.	110.007	(1).	1.740.

# Form 990 (2019) Schoolhouse of Wonder 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 re	sponse or note to any  (A)  Total expenses	(B) Program service	(C) Management and	(D) Fundraising
6b,	7b, 8b, 9b, and 10b of Part VIII.	rotal expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22	894.	894.		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	77,664.	29,943.	40,925.	6,796.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	714,172.	613,194.	43,882.	57,096.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	714,172.	013,134.	43,002.	37,030.
9	Other employee benefits	58,617.	48,111.	4,534.	5,972.
10	Payroll taxes	63,826.	52,097.	6,585.	5,144.
11	Fees for services (nonemployees):	00,000		7,555	-,
á	Management				
	Legal	315.		315.	
	Accounting	14,138.		14,138.	
	Lobbying	14,150.		14,150.	
	Professional fundraising services. See Part IV, line 17				
	Investment management fees	300.		300.	
	Other. (If line 11g amount exceeds 10% of line 25, column		0.670		150
	(A) amount, list line 11g expenses on Schedule O.)	4,189.	3,673.	358.	158.
	Advertising and promotion	43,190.	40,894.	1,493.	803.
13	Office expenses	64,716.	17,937.	39,926.	6,853.
14	Information technology	31,159.	27,569.	2,427.	1,163.
15	Royalties				
16	Occupancy	41,396.	37,950.	2,197.	1,249.
17	Travel	783.	587.	98.	98.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	4,895.	3,921.	843.	131.
20	Interest	ŕ	,		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	18,117.	15,563.	1,549.	1,005.
23	Insurance	18,045.	6,665.	11,092.	288.
24	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.)	·	·	·	
á	Training & Development	6,997.	5,582.	1,255.	160.
	Program Supplies	6,964.	6,867.	14.	83.
	Equipment Rental	5,055.	4,954.	101.	
	Dues, Licenses & Fees	4,404.	1,843.	936.	1,625.
	All other expenses	6,544.	4,903.	1,553.	88.
25	Total functional expenses. Add lines 1 through 24e	1,186,380.	923,147.	174,521.	88,712.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Total cash			Check if Schedule O contains a response or note to	any li	ine in this Part X			
Savings and temporary cash investments.   3984. 2 4,066.						(A) Beginning of year		(B) End of year
3   Pledges and grants receivable, net   15,915, 3   847.		1	Cash — non-interest-bearing			372,808.	1	397,078.
A Accounts receivable, net.   5,655.   4   9,216.		2	Savings and temporary cash investments			984.	2	4,066.
S   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.   5		3	Pledges and grants receivable, net		15,915.	3	847.	
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of riamily member of any of these persons.  5   6   Loans and other receivables from other disqualified persons (as defined under section 4958(r)(1)), and persons described in section 4958(c)(3)(B).  7   Notes and loans receivable, net.  9   Prepaid expenses and deferred charges.  10a   Land, buildings, and equipment: cost or other basis.  10a   Land, buildings, and equipment: cost or other basis.  10a   Land, buildings, and equipment: cost or other basis.  10a   Land, buildings, and equipment: cost or other basis.  10a   Land, buildings, and equipment: cost or other basis.  10b   Less: accumulated depreciation.  10b   18, 942.  11, 405.  10c   11, 405.  10c   7, 133.  11   Investments – publicity traded securities.  12   Investments – publicity traded securities.  12   Investments – program-related. See Part IV, line 11.  13   Investments – program-related. See Part IV, line 11.  14   Intangible assets.  42, 650.  15   Other assets. See Part IV, line 11.  16   G. 882.  17   Accounts payable and accrued expenses.  38, 174.  17   38, 813.  18   Grants payable.  19   Deferred revenue.  20   Tax-exempt bond liabilities.  21   Escrow or custodial account liability. Complete Part IV of Schedule D.  22   Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% counted multiplication of any of these persons.  22   Secured mortgages and notes payable to unrelated third parties.  23   Other liabilities (including federal income lax, payables to related third parties, and other liabilities on included on lines 17-24). Complete Part X of Schedule D.  25   Organizations that follow FASB ASC 998, check here   Marchael Complete Part X of Schedule D.  26   Organizations that do not follow FASB ASC 998, check here   Marchael Complete Part X of Schedule D.  27   Organizations that do not follow FASB ASC 998, check here   Marchael Complete Part X of Sc		4	Accounts receivable, net			5,655.	4	9,216.
10		5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantial					
Section 4958(r)(1)), and persons described in section 4958(c)(3)(B)   6   7   7   7   7   7   7   7   7   7					H		5	
7   Notes and loans receivable, net		6			_			
8   Inventories for sale or use.   6,597.   8   4,899.     9   Prepaid expenses and deferred charges.   10a   26,075.     10a   26,075.   11   4,344.   9   16,568.     10a   26,075.   12   11   4,05.   10c   7,133.     11   Investments – publicity traded securities.   22,439.   1   26,170.     12   Investments – program-related. See Part IV, line 11.   12   13     13   Investments – program-related. See Part IV, line 11.   13   14   Intangible assets.   42,650.   14   34,533.     15   Other assets. See Part IV, line 11.   6,882.   15   6,379.     16   Total assets. Add lines 1 through 15 (must equal line 33).   499,679.   16   506,889.     17   Accounts payable and accrued expenses.   38,174.   17   38,813.     18   Grants payable and accrued expenses.   38,174.   17   38,813.     19   Deferred revenue.   256,255.   19   381,842.     21   Escrow or custodial account liabilities.   20   21     22   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   22   22   23   24   24   25   24   25   24   25   24   25   25		_		•	/ ` / ` /			
10a   26,075.		-			<u> </u>			
10a   26,075.	ets	_			L			
10a   26,075.	(55	9	Prepaid expenses and deferred charges	 I I		14,344.	9	16,568.
11   Investments - publicly traded securities.   22,439.   11   26,170.     12   Investments - other securities. See Part IV, line 11.   12   13   Investments - program-related. See Part IV, line 11.   13   13   14   Intangible assets.   42,650.   14   34,533.     15   Other assets. See Part IV, line 11.   6,882.   15   6,379.     16   Total assets. Add lines 1 through 15 (must equal line 33).   499,679.   16   506,889.     17   Accounts payable and accrued expenses.   38,174.   17   38,813.     18   Grants payable.   18   18   19   Defrered revenue.   256,255.   19   381,842.     20   Tax-exempt bond liabilities.   20   21     21   Escrow or custodial account liability. Complete Part IV of Schedule D.   21   22   Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%   22   23   24   24   25   25   25   25   25   25	þ	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10 a	26,075.			
12   Investments - other securities. See Part IV, line 11.   13   Investments - program-related. See Part IV, line 11.   13   Intensible assets   42,650. 14   34,533.   15   Other assets. See Part IV, line 11.   6,882. 15   6,379.   16   Total assets. Add lines 1 through 15 (must equal line 33).   499,679. 16   506,889.   17   Accounts payable and accrued expenses   38,174. 17   38,813.   18   Grants payable   18   19   Deferred revenue   256,255. 19   381,842.   20   20   Tax-exempt bond liabilities   20   21   Escrow or custodial account liability. Complete Part IV of Schedule D.   21   22   Loans and other payables to 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   22   23   Secured mortgages and notes payable to unrelated third parties   23   24   Unsecured notes and loans payable to unrelated third parties   24   25   Other liabilities (including federal income tax, payables to related third parties, and other liabilities included on lines 17-24). Complete Part X of Schedule D.   25   294,429. 26   420,655.   294,429. 2		b	Less: accumulated depreciation	10 b	18,942.	11,405.	10 c	
13   Investments - program-related. See Part IV, line 11.   14   Intangible assets   42,650, 14   34,533.   15   Other assets. See Part IV, line 11.   6,882.   15   6,379.   16   70tal assets. Add lines 1 through 15 (must equal line 33).   499,679.   16   506,889.   17   38,813.   18   Grants payable and accrued expenses   38,174.   17   38,813.   18   Grants payable   18   256,255.   19   381,842.   20   Tax-exempt bond liabilities.   20   21   22   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   22   23   24   25   Other liabilities (including federal income tax, payables to related third parties.   24   25   Other liabilities (including federal income tax, payables to related third parties.   25   25   27   27   27   27   27   27		11	Investments — publicly traded securities			22,439.	11	26,170.
14   Intangible assets   42,650. 14   34,533.     15   Other assets. See Part IV, line 11.   6,882. 15   6,379.     16   Total assets. Add lines 1 through 15 (must equal line 33).   499,679. 16   506,889.     17   Accounts payable and accrued expenses.   38,174. 17   38,813.     18   Grants payable   18   256,255. 19   381,842.     20   Tax-exempt bond liabilities.   20   21     21   Escrow or custodial account liability. Complete Part IV of Schedule D.   21     22   Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%   22     23   Secured mortgages and notes payable to unrelated third parties.   23     24   Unsecured notes and loans payable to unrelated third parties.   24     25   Other liabilities (including federal income tax, payables to related third parties, and other liabilities on tincluded on lines 17-24). Complete Part X of Schedule D.   25     26   Total liabilities. Add lines 17 through 25.   294,429. 26   420,655.     27   Net assets without donor restrictions.   138,927. 27   13,938.     28   Net assets with donor restrictions.   138,927. 27   13,938.     29   Capital stock or trust principal, or current funds.   29     30   Paid-in or capital surplus, or land, building, or equipment fund.   30     31   Retained earnings, endowment, accumulated income, or other funds.   205,250. 32   86,234.     32   Total net assets or fund balances   205,250. 32   86,234.     34   Total net assets or fund balances   205,250. 32   86,234.     35   Total net assets or fund balances   205,250. 32   86,234.     36   Total net assets or fund balances   205,250. 32   86,234.     37   Total net assets or fund balances   205,250. 32   86,234.     38   Total net assets or fund balances   205,250. 32   86,234.     39   Total net assets or fund balances   205,250. 32   86,234.     30   Total net assets or fund balances   205,250. 32   205,250. 32   205,250.     30   Total net assets or fund balances   205,250. 32   205,250.		12	Investments - other securities. See Part IV, line 11				12	
15 Other assets. See Part IV, line 11.		13	Investments — program-related. See Part IV, line 11.			13		
16   Total assets. Add lines 1 through 15 (must equal line 33).   499,679.   16   506,889.     17   Accounts payable and accrued expenses.   38,174.   17   38,813.     18   Grants payable.   18   256,255.   19   381,842.     19   Deferred revenue.   20   21   22   25   25   25   29   21     20   Tax-exempt bond liabilities.   20   21   22   25   25   25   25   25   25		14	Intangible assets			42,650.	14	34,533.
17		15	Other assets. See Part IV, line 11			6,882.	15	6,379.
18   Grants payable   18   256, 255   19   381, 842   20   20   21   22   20   21   22   20   22   22		16	Total assets. Add lines 1 through 15 (must equal line	499,679.	16	506,889.		
19   Deferred revenue   256, 255   19   381, 842     20   Tax-exempt bond liabilities   20     21   Escrow or custodial account liability. Complete Part IV of Schedule D.   21     22   Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%   22     23   Secured mortgages and notes payable to unrelated third parties   23     24   Unsecured notes and loans payable to unrelated third parties   24     25   Other liabilities (including federal income tax, payables to related third parties, and other liabilities on tincluded on lines 17-24). Complete Part X of Schedule D.   25     26   Total liabilities. Add lines 17 through 25.   294, 429.   26   420, 655.     27   Organizations that follow FASB ASC 958, check here   X     and complete lines 27, 28, 32, and 33.   27   Net assets with donor restrictions   138, 927.   27   13, 938.     27   Net assets with donor restrictions   138, 927.   27   13, 938.     28   Net assets with donor restrictions   66, 323.   28   72, 296.     30   Paid-in or capital surplus, or land, building, or equipment fund   30     31   Retained earnings, endowment, accumulated income, or other funds   31     32   Total net assets or fund balances   205, 250.   32   86, 234.		17	Accounts payable and accrued expenses		38,174.	17	38,813.	
20 Tax-exempt bond liabilities. 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 22 Loans and other payables to 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. 22 23 Secured mortgages and notes payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties. 25 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. 25 26 Total liabilities. Add lines 17 through 25. 294, 429. 26 420, 655.  Organizations that follow FASB ASC 958, check here And complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions. 28 Net assets with donor restrictions. 29 Capital stock or trust principal, or current funds. 29 Capital stock or trust principal, or current funds. 29 Paid-in or capital surplus, or land, building, or equipment fund. 30 31 Retained earnings, endowment, accumulated income, or other funds. 31 32 Total net assets or fund balances. 205, 250. 32 86, 234.		18	, ,					
21 Escrow or custodial account liability. Complete Part IV of Schedule D		19				256,255.	19	381,842.
23   Secured mortgages and notes payable to unrelated third parties   24		20	·		<b> </b>			
23   Secured mortgages and notes payable to unrelated third parties   24	es	21	- · · · · · · · · · · · · · · · · · · ·				21	
23   Secured mortgages and notes payable to unrelated third parties   24	abilit	22	Loans and other payables to any current or former off key employee, creator or founder, substantial contribution controlled entity or family member of any of these per	ficer, d utor, or rsons .	irector, trustee, 35%		22	
24 Unsecured notes and loans payable to unrelated third parties.  25 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.  26 Total liabilities. Add lines 17 through 25.  27 Organizations that follow FASB ASC 958, check here   28 Net assets without donor restrictions.  29 Organizations that do not follow FASB ASC 958, check here   29 Organizations that do not follow FASB ASC 958, check here   20 Organizations that do not follow FASB ASC 958, check here   29 Capital stock or trust principal, or current funds.  29 Capital stock or trust principal, or current funds.  30 Paid-in or capital surplus, or land, building, or equipment fund.  31 Retained earnings, endowment, accumulated income, or other funds.  32 Total net assets or fund balances.  24  25  26	_	23					23	
VOTE TOTAL Hisbilities. Add lines 17 through 25.       294,429.       26       420,655.         VOTE TOTAL Hisbilities. Add lines 17 through 25.       294,429.       26       420,655.         VOTE TOTAL HISBILITIES.       X       X       X         And complete lines 27, 28, 32, and 33.       X       138,927.       27       13,938.         28       Net assets with donor restrictions.       66,323.       28       72,296.         Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.       29       Capital stock or trust principal, or current funds.       29         30       Paid-in or capital surplus, or land, building, or equipment fund.       30         31       Retained earnings, endowment, accumulated income, or other funds.       31         32       Total net assets or fund balances.       205,250.       32       86,234.		24					24	
Organizations that follow FASB ASC 958, check here And complete lines 27, 28, 32, and 33.  Net assets without donor restrictions.  Net assets with donor restrictions.  Organizations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Capital stock or trust principal, or current funds.  Paid-in or capital surplus, or land, building, or equipment fund.  Retained earnings, endowment, accumulated income, or other funds.  Total net assets or fund balances.  Organizations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations t		25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	es to re plete F	elated third parties, Part X of Schedule D.		25	
Organizations that follow FASB ASC 958, check here And complete lines 27, 28, 32, and 33.  Net assets without donor restrictions.  Net assets with donor restrictions.  Organizations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Capital stock or trust principal, or current funds.  Paid-in or capital surplus, or land, building, or equipment fund.  Retained earnings, endowment, accumulated income, or other funds.  Total net assets or fund balances.  Organizations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations that do not follow FASB ASC 958, check here And complete lines 29 through 33.  Zaparations t		26	Total liabilities. Add lines 17 through 25			294,429.	26	420,655.
The composition of	ıces			<b>,</b> ►	X	·		
28 Net assets with donor restrictions   66, 323.   28   72, 296.	ā	27	Net assets without donor restrictions			138,927.	27	13,938.
Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  29 Capital stock or trust principal, or current funds.  Paid-in or capital surplus, or land, building, or equipment fund.  Retained earnings, endowment, accumulated income, or other funds.  Total net assets or fund balances.  Total liabilities and net assets/fund balances.  29  205, 250. 32  86, 234.  499, 679. 33  506, 889.	Ba	28	Net assets with donor restrictions			·	28	
29 Capital stock or trust principal, or current funds. 29 Paid-in or capital surplus, or land, building, or equipment fund. 30 Paid-in or capital surplus, or land, building, or equipment fund. 31 Retained earnings, endowment, accumulated income, or other funds. 32 Total net assets or fund balances. 33 Total liabilities and net assets/fund balances. 499,679. 33 506,889.	Fund			ck her	e ►	,		·
Paid-in or capital surplus, or land, building, or equipment fund.  Retained earnings, endowment, accumulated income, or other funds.  Total net assets or fund balances.  Total liabilities and net assets/fund balances.  205,250. 32 86,234. 499,679. 33 506,889.	ក	29				29		
31 Retained earnings, endowment, accumulated income, or other funds.  31 Total net assets or fund balances.  32 Total liabilities and net assets/fund balances.  33 Total liabilities and net assets/fund balances.  36,234.	इ		·	<u></u>				
32       Total net assets or fund balances       205,250. 32       86,234.         33       Total liabilities and net assets/fund balances       499,679. 33       506,889.	SS							
<b>2</b> 33 Total liabilities and net assets/fund balances 499,679. 33 506,889.	t A					205,250.		86,234.
	ş							

Pa	rt 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	1,0	44,2	241.	
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,1	86,3	80.	
3	Revenue less expenses. Subtract line 2 from line 1	3	-1	42,1	39.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2	05,2	250.	
5	Net unrealized gains (losses) on investments.	5		2,7	98.	
6	Donated services and use of facilities	6		20,3	325.	
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		86,2	234.	
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII				П	
				Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in 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 separate basis, consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis	d on a				
	<b>b</b> Were the organization's financial statements audited by an independent accountant?		. 2b		Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separal 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?		. 2c			
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.					
3	a 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?		. 3a		Х	
1	<b>b</b> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required aud	it				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u>	. 3b			
BAA	TEEA0112L 01/21/20		Form	990 (	(2019)	

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

Department of the Treasury Internal Revenue Service

### **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**2019** 

Open to Public Inspection

Name of the organization Employer identification number											
Schoolhouse of Wonder 56-1670472											
	Reason for Public Cha						structions.				
The o	The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)										
1	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).										
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)										
3	A hospital or a cooperative h	ospital service organi	ization described in sec	ction 17	0(b)(1)( <i>A</i>	A)(iii).					
4	A medical research organiza	tion operated in conju	unction with a hospital o	describe	d in <b>sec</b>	tion 170(b)(1)(A)	(iii). Enter the hosp	pital's			
	name, city, and state:										
5	An organization operated for section 170(b)(1)(A)(iv). (Co	the benefit of a collection		or opera	ated by a	a governmental u	nit described in				
6	A federal, state, or local government	ernment or governme	ntal unit described in s	ection 1	70(b)(1)	)(A)(v).					
7	An organization that normally r in section 170(b)(1)(A)(vi).	receives a substantial p Complete Part II.)	part of its support from a	governm	ental un	it or from the gene	ral public described				
8	A community trust described	in section 170(b)(1)(	A)(vi). (Complete Part I	l.)							
9	An agricultural research organi	zation described in sec	<b>:tion 170(b)(1)(A)(ix)</b> oper	ated in c	oniunctio	on with a land-gran	nt college				
-	or university or a non-land-graduniversity:										
10	An organization that normally refrom activities related to its einvestment income and unre June 30, 1975. See section	exempt functions -sub lated business taxable	oject to certain exception is income (less section)	ns, and	(2) no r	more than 33-1/3°	% of its support fro	om gross			
11	An organization organized ar	nd operated exclusive	ly to test for public safe	ety. See	section	n 509(a)(4).					
12	An organization organized and or more publicly supported on lines 12a through 12d that de	rganizations describe	d in <b>section 509(a)(1)</b> d	r section	n 509(a	)(2). See section	509(a)(3). Check tl	es of one he box in			
а	Type I. A supporting organization organization organization organization organization.	on operated, supervise gularly appoint or elect						ed			
b		ration supervised or c	ontrolled in connection the same persons that c	with its ontrol or	support manage	ed organization(s the supported org	), by having contro anization(s). <b>You</b>	ol or			
С	Type III functionally integrated	. A supporting organizat	ion operated in connectio	n with, a	nd function						
d	functionally integrated. The o	rated. A supporting org	anization operated in cor	nnection	with its s	supported organiza t and an attentive	tion(s) that is not ness requirement	(see			
е	instructions). <b>You must com</b> Check this box if the organiz	plete Part IV, Section ation received a writte	s A and D, and Part V.  en determination from t	he IRS t							
f	integrated, or Type III non-fu Enter the number of supported		supporting organization	• 							
g	Dravida the following information	a about the supported	l organization(s)				<u> </u>				
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	in your g	s the tion listed poverning ment?	(v) Amount of mon support (see instruc	etary (vi) Amour support (see	nt of other instructions)			
				Yes	No						
(4)											
(A)											
(B)											
(C)											
(D)											
(E)											
Total											

### 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.)

Sec	tion A. Public Support						
begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2015	<b>(b)</b> 2016	<b>(c)</b> 2017	<b>(d)</b> 2018	<b>(e)</b> 2019	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	66,788.	45,943.	56,282.	74,860.	71,432.	315,305.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
	<b>Total.</b> Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	66,788.	45,943.	56,282.	74,860.	71,432.	315,305. 65,481.
6	Public support. Subtract line 5 from line 4						249,824.
Sec	tion B. Total Support		•		•		,
	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2015	<b>(b)</b> 2016	<b>(c)</b> 2017	<b>(d)</b> 2018	<b>(e)</b> 2019	(f) Total
7	Amounts from line 4	66,788.	45,943.	56,282.	74,860.	71,432.	315,305.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	830.	598.	1,104.	1,398.	1,648.	5,578.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	300.	3301	1,101.	176361	1,010.	0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) See Part VI				1,831.		1,831.
11	Total support. Add lines 7 through 10						322,714.
12	Gross receipts from related activ	ities, etc. (see ins	tructions)			12	3,730,724.
13	<b>First five years.</b> If the Form 990 is organization, check this box and	for the organization stop here	's first, second, thi	rd, fourth, or fifth to	ax year as a sectio	n 501(c)(3)	▶ □
Sec	tion C. Computation of Pul	olic Support Po	ercentage				
	Public support percentage for 20						77.41 %
	Public support percentage from 2					<u> </u>	75.84 %
	<b>33-1/3% support test—2019.</b> If the and <b>stop here.</b> The organization	qualifies as a pub	licly supported or	ganization			► X
b	<b>33-1/3% support test—2018.</b> If th and <b>stop here.</b> The organization	e organization did qualifies as a pub	not check a box olicly supported or	on line 13 or 16a ganization	, and line 15 is 33	3-1/3% or more, cl	neck this box
17a	<b>10%-facts-and-circumstances te</b> or more, and if the organization the organization meets the 'facts	meets the 'facts-a	nd-circumstances	' test. check this l	box and <b>stop her</b>	e. Explain in Part	VI how
	<b>10%-facts-and-circumstances te</b> or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances' t	nd-circumstances est. The organiza	' test, check this l tion qualifies as a	box and <b>stop her</b> publicly supporte	<b>e.</b> Explain in Part ed organization	VI how the▶
18	Private foundation. If the organiz	zation did not che	ck a box on line 1	3, 16a, 16b, 17a,	or 17b, check this	s box and see ins	tructions ►

Page 3

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.)

Sec	tion A. Public Support	•	'	,				
Calend	dar year (or fiscal year beginning in) F	<b>(a)</b> 2015	<b>(b)</b> 2016	<b>(c)</b> 2017	<b>(d)</b> 2018	<b>(e)</b> 2019	)	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')							
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that are not an unrelated trade or business under section 513.							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
С	Add lines 7a and 7b							
	<b>Public support.</b> (Subtract line 7c from line 6.)							
	tion B. Total Support		T T		T	1		
	dar year (or fiscal year beginning in)	<b>(a)</b> 2015	<b>(b)</b> 2016	<b>(c)</b> 2017	<b>(d)</b> 2018	<b>(e)</b> 2019	9	<b>(f)</b> Total
	Amounts from line 6							
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b							
-	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.							
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
13	Total support. (Add lines 9,							
	10c, 11, and 12.)				c:cu		1 ( ) (0)	
	First five years. If the Form 990 organization, check this box and	stop here		d, third, fourth, o	or fifth tax year as	a section 50	1(c)(3)	▶
Sec	First five years. If the Form 990 organization, check this box and tion C. Computation of Pul	stop here olic Support P	ercentage					
Sec 15	First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage for 20	stop here blic Support P 19 (line 8, colum	Percentage n (f), divided by lir	ne 13, column (f)	)		15	%
<b>Sec</b> 15 16	First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage for 20 Public support percentage from 2	stop here blic Support P 19 (line 8, columi 2018 Schedule A,	Percentage n (f), divided by lir Part III, line 15	ne 13, column (f)	)			
Sec 15 16 Sec	First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage for 20 Public support percentage from 2 tion D. Computation of Inv	stop here	Percentage n (f), divided by lir Part III, line 15 ne Percentage	ne 13, column (f)	)		15 16	90
Sec 15 16 Sec 17	First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage for 20 Public support percentage from 2 tion D. Computation of Inv	stop here	Percentage  n (f), divided by lir  Part III, line 15  ne Percentage  column (f), divide	ne 13, column (f)	umn (f))		15 16	% % %
Sec 15 16 Sec 17 18	First five years. If the Form 990 organization, check this box and tion C. Computation of Pulpublic support percentage for 20 Public support percentage from 2 tion D. Computation of Investment income percentage for Investment income percentage for the support perc	blic Support P 19 (line 8, column 2018 Schedule A, estment Incor or 2019 (line 10c, rom 2018 Schedul	Percentage In (f), divided by lin Part III, line 15 IN Percentage Column (f), divided le A, Part III, line	ne 13, column (f)	umn (f))		15   16   17   18	00 00 00
Sec 15 16 Sec 17 18 19a	First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage for 20 Public support percentage from 2 tion D. Computation of Inv	stop here	Percentage  n (f), divided by lir Part III, line 15  ne Percentage column (f), divided le A, Part III, line lid not check the bephere. The organ lid not check a box	ne 13, column (f) ad by line 13, col 17 nox on line 14, ar ization qualifies a	umn (f))	than 33-1/3° orted organiz	15   16   17   18   %, and lin zation an 33-1/39	% % % e 17 ► [] %, and

#### Part IV Supporting Organizations

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

#### **Section A. All Supporting Organizations**

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	103	NO
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , 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).	5a		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
6	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>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in <b>Part VI</b> .	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in <b>Part VI</b> .	9с		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		
BAA	TEEA0404L 07/03/19 Schedule A (Form 990	0 or 9	9 <b>0-EZ</b>	2019

Par	t IV	Supporting Organizations (continued)			
11	∐ac ti	he organization accepted a gift or contribution from any of the following persons?		Yes	No
		son who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
-		rining body of a supported organization?	11a		
b	A fan	nily member of a person described in (a) above?	11b		
		% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		
Sect	tion I	B. Type I Supporting Organizations		1	1
	D: al 4la	a diversion to the control of the co		Yes	No
'	or ele <b>Part</b> I If the direct	e directors, trustees, or membership of one or more supported organizations have the power to regularly appoint ct at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in <b>VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. organization had more than one supported organization, describe how the powers to appoint and/or remove tors or trustees were allocated among the supported organizations and what conditions or restrictions, if any,	1		
•		ed to such powers during the tax year.	•		
2	that o	ne organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If 'Yes,' explain in <b>Part VI</b> how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the porting organization.	2		
Sect	tion (	C. Type II Supporting Organizations			
				Yes	No
1	of eac	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ch of the organization's supported organization(s)? If 'No,' describe in <b>Part VI</b> how control or management of the orting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sect	tion [	D. All Type III Supporting Organizations		•	•
		,		Yes	No
1	organ year,	ne organization provide to each of its supported organizations, by the last day of the fifth month of the nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	1		
	organ	nization's governing documents in effect on the date of notification, to the extent not previously provided?			
2	Were organ	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported nization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in <b>Part VI</b> how rganization maintained a close and continuous working relationship with the supported organization(s).	2		
3	voice all tin	ason of the relationship described in (2), did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at nes during the tax year? If 'Yes,' describe in <b>Part VI</b> the role the organization's supported organizations played is regard.	3		
Sect	tion I	E. Type III Functionally Integrated Supporting Organizations		•	•
1	Check	the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а		the organization satisfied the Activities Test. Complete line 2 below.			
b	H	he organization is the parent of each of its supported organizations. Complete line 3 below.			
c		he organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see in	struci	tions).	
2	 Δctivi	ties Test. <i>Answer (a) and (b) below.</i>	ĺ	Yes	No
				res	NO
а	suppo organ respo	ubstantially all of the organization's activities during the tax year directly further the exempt purposes of the organization(s) to which the organization was responsive? If 'Yes,' then in <b>Part VI identify those supported nizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was onsive to those supported organizations, and how the organization determined that these activities constituted	2a		
		antially all of its activities.	Za		
b	the or	ne activities described in (a) constitute activities that, but for the organization's involvement, one or more of organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for organization's position that its supported organization(s) would have engaged in these activities but for the nization's involvement.	2b		
3		nt of Supported Organizations. <i>Answer (a) and (b) below.</i>			
	Did th	ne organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did th	be organization exercise a substantial degree of direction over the policies, programs, and activities of each of its organizations? If 'Yes,' describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

	edule A (Form 990 or 990-EZ) 2019 Schoolhouse of Wonder			70472 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	anizati	ons	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	st on No	v. 20, 1970 (explain in t complete Sections A	Part VI). <b>See</b> through E.
Sec	ction A – Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	ction B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	d Total (add lines 1a, 1b, and 1c)	1d		
•	e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

Schedule A (Form 990 or 990-EZ) 2019

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

	, , , , , , , , , , , , , , , , , , , ,						
Par	Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Sec	Section D — Distributions						
1	Amounts paid to supported organizations to accomplish exempt purposes						
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purposes of supported organizations						
4	Amounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval required)						
6	Other distributions (describe in Part VI). See instructions.						
7	Total annual distributions. Add lines 1 through 6.						

8 Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions. Distributable amount for 2019 from Section C, line 6

10 Line 8 amount divided by line 9 amount

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
<b>a</b> From 2014			
<b>b</b> From 2015			
<b>c</b> From 2016			
<b>d</b> From 2017			
<b>e</b> From 2018			
f Total of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
<b>b</b> Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
<b>b</b> Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			
BAA		Schedule A (Fo	rm 990 or 990-EZ) 2019

BAA

Schedule A (Form 990 or 990-EZ) 2019

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, Line 10 - Other Income

Nature and Source		2019			2018	 2017	 2016	 2015
Rebates Received	Total	\$	<del>0.</del>	\$ \$	1,831. 1,831.	\$ 0.	\$ 0.	\$ 0.

#### Schedule B

(Form 990, 990-EZ, or 990-PF)
Department of the Treasury Internal Revenue Service

Name of the organization

### PUBLIC DISCLOSURE COPY Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2019

Employer identification number

Schoolhouse of Wonder 56-1670472								
Organization type (check one):								
Filers of:	Section:							
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization							
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	1						
Form 990-PF	527 political organization							
	501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
•	ered by the <b>General Rule</b> or a <b>Special Rule</b> .  ), (8), or (10) organization can check boxes for both the General Rule and a Spe	cial Rule. See instructions.						
General Rule								
	ling Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor							
Special Rules								
under sections 509(a) received from any or	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% s (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line ne contributor, during the year, total contributions of the greater of (1) \$5,000; c line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.	13, 16a, or 16b, and that						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contribut during the year, total contributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.								
during the year, con \$1,000. If this box is charitable, etc., purp	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received tributions exclusively for religious, charitable, etc., purposes, but no such contributions checked, enter here the total contributions that were received during the year for pose. Don't complete any of the parts unless the <b>General Rule</b> applies to this or usively religious, charitable, etc., contributions totaling \$5,000 or more during the	butions totaled more than or an exclusively religious, ganization because						
990-PF), but it must answer 'N	isn't covered by the General Rule and/or the Special Rules doesn't file Schedule No' on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990 doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-P	0-EZ or on its Form 990-PF,						

Schedule D (FOITH 3	30, 330-L2, 0i	JJU-1 1 ) (201	. ))	
Name of organization				

Employer identification number

56-1670472

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional sp	pace is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>7,500</u> .	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$9,627.	Person X Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>5,000</u> .	Person X Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)

Name of organization Employer identification number

Schoolhouse of Wonder

56-1670472

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	<u>N/A</u>		
		·   ·   ·	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		·	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		; ; \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		·	
ŀ		·  <sup>۲</sup>	

Name of organization Employer identification number Schoolhouse of Wonder 56-1670472 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 following line entry. For organizations of contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional	ompleting Part III, enter the total (Enter this information once. Se	of exclusively religious, charitable, etc.,
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee

## SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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.

Open to Public Inspection

Employer identification number

	Schoolhouse of Wonder			56-16	70472	
Pai	rt I Organizations Maintaining Donor	Advised Funds or Other	Similar Fund	ds or Accounts.		
	Complete if the organization answ	·				
		(a) Donor advised fun	nds	<b>(b)</b> Funds and	other acco	unts
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and dono are the organization's property, subject to the or	r advisors in writing that the ass rganization's exclusive legal cor	sets held in dor ntrol?	nor advised funds	Yes	No
6	Did the organization inform all grantees, donors for charitable purposes and not for the benefit of	, and donor advisors in writing of the donor or donor advisor, or	that grant funds for any other p	s can be used only ourpose conferring	_ ¬v	
	impermissible private benefit?				Yes	No
Pai				_		
	Complete if the organization answ			7.		
1			apply).			
	Preservation of land for public use (for example	e, recreation or education)	Preservation	on of a historically imp	oortant land	d area
	Protection of natural habitat		Preservation	on of a certified histor	ic structure	
	Preservation of open space		_			
2	Complete lines 2a through 2d if the organization he last day of the tax year.	ld a qualified conservation contrib	oution in the form	of a conservation eas	ement on th	e
				Held at the	e End of the	e Tax Year
	a Total number of conservation easements			-		
ı	<b>b</b> Total acreage restricted by conservation easeme	ents				
(	c Number of conservation easements on a certifie	ed historic structure included in	(a)	2c		_
•	<b>d</b> Number of conservation easements included in structure listed in the National Register					
3	Number of conservation easements modified, transtax year ►	ferred, released, extinguished, or	terminated by th	e organization during t	he	
4	Number of states where property subject to conserv	vation easement is located ►				
5	Does the organization have a written policy rega	arding the periodic monitoring, i	inspection, hand	dling of violations.		
•	and enforcement of the conservation easements				Yes	No
6	Staff and volunteer hours devoted to monitoring, ins	specting, handling of violations, a	nd enforcing con	servation easements d	uring the ye	ar
7	Amount of expenses incurred in monitoring, inspect ▶\$	ting, handling of violations, and en	nforcing conserva	ation easements during	; the year	
8	Does each conservation easement reported on I and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requi	rements of sect	tion 170(h)(4)(B)(i)	Yes	No
9	In Part XIII, describe how the organization repoinclude, if applicable, the text of the footnote to	rts conservation easements in it the organization's financial stat	ts revenue and tements that de	expense statement a scribes the organization	nd balance ion's accou	sheet, and nting for
Da	conservation easements.  rt III Organizations Maintaining Collec	tions of Art Historical Tr	ASSIIVES OF	Other Similar Acc	cats	
Pai	Complete if the organization answ	ered 'Yes' on Form 990, F	Part IV, line	8.	<u> </u>	
1 8	a If the organization elected, as permitted under F historical treasures, or other similar assets held Part XIII the text of the footnote to its financial s	for public exhibition, education	, or research in			
I	b If the organization elected, as permitted under F historical treasures, or other similar assets held for following amounts relating to these items:	public exhibition, education, or re	esearch in further	rance of public service,	provide the	art,
	(i) Revenue included on Form 990, Part VIII, lin	ne 1		▶\$	;	
	(ii) Assets included in Form 990, Part X					
2	If the organization received or held works of art, his amounts required to be reported under FASB AS	storical treasures, or other similar SC 958 relating to these items:	assets for financ	cial gain, provide the fo	llowing	
i	a Revenue included on Form 990, Part VIII, line 1			▶\$	;	
	h Assets included in Form 990 Part Y					

Part III   Organizations Mainta	ining Collect	tions of	Art, Histo	rical	Treasures, or	Other	Similar Ass	ets (c	ontınu	ed)
3 Using the organization's acquisition items (check all that apply):	, accession, and	other reco	ords, check a	ny of t	he following that m	ake signi	ficant use of its	collectio	n	
<b>a</b> Public exhibition			<b>d</b> Loan	or exc	hange program					
<b>b</b> Scholarly research			e Other							
c Preservation for future gener	ations									
4 Provide a description of the organiz Part XIII.	ation's collection	ns and exp	plain how they	/ furthe	er the organization'	s exempt	purpose in			
5 During the year, did the organiza to be sold to raise funds rather the	nan to be maint	ained as <sub>l</sub>	part of the o	rganiz	ation's collection?			Yes		No
Part IV Escrow and Custodia line 9, or reported an	<b>I Arrangeme</b> amount on F	nts. Co orm 990	mplete if t 0, Part X,	the or line :	rganization an 21.	swered	'Yes' on Fo	rm 990	), Par	i IV,
<b>1 a</b> Is the organization an agent, trus on Form 990, Part X?	stee, custodian	or other in	ntermediary	for co	ntributions or othe	er assets	not included	Yes	Г	No
<b>b</b> If 'Yes,' explain the arrangement									L	
								Amoun	t	
c Beginning balance										
<b>d</b> Additions during the year										
e Distributions during the year										
f Ending balance										
2a Did the organization include an a							-	Yes	_	No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIII. Ch	eck here	if the explan	ation	has been provide	d on Par	t XIII			
Dort V Fredominant Fredo C			.:1:				Dort IV 1:	- 10		
Part V Endowment Funds. C										
<b>1 a</b> Beginning of year balance	(a) Current ye		(b) Prior yea		(c) Two years back		Three years back		our years	
<b>b</b> Contributions	22,4	140.	24,3	31.	21,53	Σ.	20,267.		Z1,	058.
c Net investment earnings, gains, and losses	4 (	30.	-1,5	91	3,09	6	1,568.		_	491.
<b>d</b> Grants or scholarships	4,0	750.	1,5	71.	3,03	0.	1,500.			471.
e Other expenditures for facilities										
and programs							0 .			
f Administrative expenses		300.		00.	30		300.			300.
<b>g</b> End of year balance	26,1		22,4		24,33		21,535.		20,	267.
2 Provide the estimated percentage		year end	balance (lin	e 1g,	column (a)) held a	as:				
<b>a</b> Board designated or quasi-endowm			%							
<b>b</b> Permanent endowment	79.00 %									
	L.00 %									
The percentages on lines 2a, 2b, a	nd 2c should equ	al 100%.								
3 a Are there endowment funds not in t	the possession o	f the orgar	nization that a	are hel	d and administered	for the		Г	V	NI-
organization by:								2-(1)	Yes	No
(i) Unrelated organizations								3a(i)	Χ	37
<ul><li>(ii) Related organizations</li><li>b If 'Yes' on line 3a(ii), are the relations</li></ul>								3a(ii) 3b		Х
4 Describe in Part XIII the intended	-		•					30		
		yai iizatioi	15 endowine	iii iuii	us. See Par	t XII.	L			
Part VI Land, Buildings, and Complete if the organi		ered 'Ye	es' on Fori	n 990	0, Part IV, line	: 11a. S	See Form 99	0, Par	t X, Iir	ne 10.
Description of property	(a	Cost or (invest	other basis tment)	(b)	Cost or other oasis (other)	(c) Ad	ccumulated preciation	(d) I	Book va	lue
<b>1 a</b> Land										
<b>b</b> Buildings										
c Leasehold improvements										
<b>d</b> Equipment					26,075.		18,942.		7,	133.
e Other										
Total. Add lines 1a through 1e. (Colum	nn (d) must equ	al Form 9	990, Part X, o	columi	n (B), line 10c.)					133.
DAA							اممام ح	ulo D (E	000 ann	v 20110

Schedule D (Form 990) 2019

(a) Description of security or category (including name of security)	(b) Book value	(c) Method o	of valuation: Cost or end	-of-year market value
1) Financial derivatives				
2) Closely held equity interests				
3) Other				
A)				
3)				
C)				
D)				
<u>=</u>				
F)				
 G)				
 H)				
  )				
otal. (Column (b) must equal Form 990, Part X, column (B) line 12.) •	>			
Part VIII Investments – Program Related.	•	N/A		
Complete if the organization answere		0, Part IV, line		
(a) Description of investment	(b) Book value	(c) Method of va	luation: Cost or en	d-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(0)				
(9)				
(10)				
(10) otal. (Column (b) must equal Form 990, Part X, column (B) line 13.) •	•			
otal. (Column (b) must equal Form 990, Part X, column (B) line 13.).	N/P	Deat IV Line	11.1.0	000 Dark V. Fran 1
otal. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answere	d 'Yes' on Form 99	D, Part IV, line	11d. See Form	
otal. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answere  (a) Do	N/Ad 'Yes' on Form 990	0, Part IV, line	11d. See Form	990, Part X, line 1:
otal. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.  Complete if the organization answere  (a) Do	d 'Yes' on Form 99	D, Part IV, line	11d. See Form	
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Part XI Reconciliation of Revenue per Audited Financial Statement	s With Revenue per Ret	turn. N/A
Complete if the organization answered 'Yes' on Form 990, Page 1	art IV, line 12a.	
1 Total revenue, gains, and other support per audited financial statements		1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments.	2 a	
<b>b</b> Donated services and use of facilities	2 b	
c Recoveries of prior year grants	2 c	
d Other (Describe in Part XIII.)	2 d	
e Add lines 2a through 2d		2 e
3 Subtract line 2e from line 1		3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a	
<b>b</b> Other (Describe in Part XIII.)	4 b	
c Add lines 4a and 4b		4 c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).		5
B 13/11 B 11/11 4 B 11/11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Part XII Reconciliation of Expenses per Audited Financial Statemen	ts With Expenses per F	Return. N/A
Complete if the organization answered 'Yes' on Form 990, P.		Return. N/A
	art IV, line 12a.	Return. N/A 
Complete if the organization answered 'Yes' on Form 990, P	art IV, line 12a.	
Complete if the organization answered 'Yes' on Form 990, P.  1 Total expenses and losses per audited financial statements	art IV, line 12a.	
Complete if the organization answered 'Yes' on Form 990, P.  1 Total expenses and losses per audited financial statements	art IV, line 12a.	
Complete if the organization answered 'Yes' on Form 990, P.  1 Total expenses and losses per audited financial statements	2a 2b	
Complete if the organization answered 'Yes' on Form 990, P.  1 Total expenses and losses per audited financial statements	2a 2b 2c	
Complete if the organization answered 'Yes' on Form 990, P.  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  b Prior year adjustments.  c Other losses	2a 2b 2c 2d	
Complete if the organization answered 'Yes' on Form 990, P.  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  b Prior year adjustments.  c Other losses.  d Other (Describe in Part XIII.)	2a 2b 2c 2d	1
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Complete if the organization answered 'Yes' on Form 990, P.  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  b Prior year adjustments.  c Other losses.  d Other (Describe in Part XIII.)  e Add lines 2a through 2d.  3 Subtract line 2e from line 1.  4 Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b.  b Other (Describe in Part XIII.)	2a	1 2e 3

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 XI, 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 V, Line 4 - Intended Uses Of Endowment Fund

The intended use of income produced from Endowment funds is to further the programs and mission of Schoolhouse of Wonder.

BAA Schedule D (Form 990) 2019

#### **SCHEDULE 0** (Form 990 or 990-EZ)

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

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

Attach to Form 990 or 990-EZ.

OMB No. 1545-0047 2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Schoolhouse of Wonder

Employer identification number

56-1670472

#### Form 990, Part VI, Line 11b - Form 990 Review Process

Prior to filing, the Form 990 will be reviewed by the Executive Director, and then distributed to the Executive Committee and the full board for review.

#### Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

The Conflict of Interest policy is monitored by the Board Chairperson and reviewed and signed at the beginning of each fiscal year by all staff and board members with significant decision-making authority. It is each signator's obligation to disclose any potential conflict as soon as it is known or reasonably should be known. An individual with a conflict shall leave the meeting during the discussion of, and the vote on, the transaction or arrangement that results in the conflict of interest.

#### Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

The process for determining executive compensation includes review and approval by independent persons, review of comparability data, and contemporaneous substantiation of the deliberation and decision.

#### Form 990. Part VI. Line 19 - Other Organization Documents Publicly Available

The three most recent Form 990s (including financial information), the Bylaws, Articles of Incorporation, Form 1023 Application for Exemption, and Conflict of Interest policy are provided to the public upon request.