



## TEACH Public Schools

### TEACH Regular Board Meeting

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#### **Date and Time**

Wednesday May 31, 2023 at 5:00 PM PDT

#### **Location**

Location: TEACH Academy of Technologies, Theater  
10000 S. Western Ave  
Los Angeles CA 90047

#### Alternate Public Access Locations:

3680 Wilshire Blvd.  
Los Angeles CA 90010

3740 S Crenshaw Blvd.  
Los Angeles, CA 90016

1340 W 106th St.  
Los Angeles, CA 90044

#### School Location and via Zoom

Beth Bulgeron is inviting you to a scheduled Zoom meeting.

Topic: TEACH Regular Board Meeting

Time: May 31, 2023 05:00 PM Pacific Time (US and Canada)

Join Zoom Meeting

<https://teachpublicschools-org.zoom.us/j/88038981523>

Meeting ID: 880 3898 1523

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## Agenda

	Purpose	Presenter	Time
<b>I. Opening Items</b>			<b>5:00 PM</b>
<b>A.</b> Record Attendance		Beth Bulgeron	2 m
<b>B.</b> Call the Meeting to Order		Cecilia Sandoval	
<b>C.</b> Public Comment		Cecilia Sandoval	5 m
<b>II. Consent Items</b>			<b>5:07 PM</b>
<b>A.</b> Consent Items: Approve the Current Agenda and Minutes From the April 26, 2023 Meeting	Approve Minutes	Cecilia Sandoval	3 m
Consent Items- Items included as Consent Items will be voted on in one motion, unless a member of the Board requests than an item be removed and voted on separately, in which case the Board Chair will determine when it will be called and considered for action.			
<b>III. Items Scheduled for Information and Potential Action</b>			<b>5:10 PM</b>
<b>A.</b> Fiscal Report	Discuss	Richard McNeel	10 m
<b>B.</b> Presentation of Student Behavior and Discipline Data	FYI	Suzette Torres and Steven Menduke	5 m
<b>C.</b> TEACH Inc., Cunningham & Morris LL, and Wooten Avila LLC Form 990 Income Tax Return for Year Ended June 30, 2022	Vote	Matthew Brown	3 m
TEACH Inc, Cunningham & Morris LLC, and Wooten Avila LLC Form 990 Income Tax Return for Year Ended June 30, 2022.			
<b>D.</b> Consider and Vote on the Summer Contract with After School All Stars Los Angeles for TEACH Prep Elementary School	Vote	Enrique Robles	5 m

	Purpose	Presenter	Time
<b>E.</b> Consider and Vote on The CompTherapy Services Agreement	Vote	Matthew Brown	5 m
<b>F.</b> Consider and Vote on the Purchase of Instructional Materials from McGraw-Hill	Vote	Raul Carranza	5 m
<b>G.</b> CEO Report	FYI	Raul Carranza	7 m
<b>H.</b> Update on Evaluation of the CEO	FYI	Beth Bulgeron	5 m
<b>I.</b> Update and Discussion- Annual Board Reporting Plan	Discuss	Beth Bulgeron	4 m

The attached calendar describes the proposed reporting dates and content for academic data, dashboard data and Principal reports to the board.

#### **IV. Closing Items**

**5:59 PM**

<b>A.</b> Upcoming Meeting Date	FYI	Beth Bulgeron	
The next Regular Board Meeting is scheduled for June 14th at 5 pm			
<b>B.</b> Public Comment		Matthew Brown	5 m
<b>C.</b> Board Member Comments			5 m
<b>D.</b> Adjourn Meeting	Vote		

## Coversheet

### Consent Items: Approve the Current Agenda and Minutes From the April 26, 2023 Meeting

**Section:** II. Consent Items  
**Item:** A. Consent Items: Approve the Current Agenda and Minutes From the  
April 26, 2023 Meeting  
**Purpose:** Approve Minutes  
**Submitted by:**  
**Related Material:** Minutes for TEACH Special Board Meeting on April 26, 2023  
2023\_04\_26\_board\_meeting\_minutes.pdf

DRAFT



## TEACH Public Schools

# Minutes

## TEACH Special Board Meeting

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### Date and Time

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Topic: TEACH Regular Board Meeting

Time: Apr 26, 2023 05:00 PM Pacific Time (US and Canada)

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Meeting ID: 876 1126 5552

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**Directors Present**

A. Dragon (remote), C. Sandoval, J. Lobdell (remote), S. Athalye (remote), S. Burrows (remote)

**Directors Absent**

*None*

**Ex Officio Members Present**

R. Carranza

**Non Voting Members Present**

R. Carranza

**Guests Present**

B. Bulgeron (remote), E. Robles, M. Brown (remote), M. Pimienta

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## I. Opening Items

### A. Record Attendance

### B. Call the Meeting to Order

C. Sandoval called a meeting of the board of directors of TEACH Public Schools to order on Wednesday Apr 26, 2023 at 6:01 PM.

### C. Public Comment

There was no public comment.

## II. Consent Items

### A. Consent Items: Approve the Current Agenda and Minutes From the March 29, 2023 Meeting

J. Lobdell made a motion to approve the minutes from the March 29th meeting TEACH Regular Board Meeting on 03-29-23.

S. Burrows seconded the motion.

The board **VOTED** to approve the motion.

#### Roll Call

J. Lobdell Aye

S. Athalye Aye

A. Dragon Aye

C. Sandoval Aye

S. Burrows Aye

J. Lobdell made a motion to Approve the current board agenda.

S. Burrows seconded the motion.

The board **VOTED** to approve the motion.

#### Roll Call

A. Dragon Aye

C. Sandoval Aye

J. Lobdell Aye

S. Burrows Aye

S. Athalye Aye

## III. Items Scheduled for Information and Potential Action

### A. Fiscal Report

Richard McNeel gave the fiscal report. The report covered the last two months. There were no significant changes from the previous report. There is positive cash flow and fund balances meet or exceed the cash on hand requirement after moving money to the money

market account. McNeed gave detailed reports for each school and noted that there was some saving due to unfilled positions but no significant changes. The detailed report is included in the packet materials.

## **B. Renew Spencer Burrows for a Two Year Term**

J. Lobdell made a motion to Renew the term of Spencer Burrows.

S. Athalye seconded the motion.

Cecelia introduced the agenda item and thanked Spencer for his commitment to TEACH.

The board enthusiastically encouraged him to remain on the board.

The board **VOTED** to approve the motion.

### **Roll Call**

C. Sandoval Aye

S. Burrows Aye

J. Lobdell Aye

S. Athalye Aye

A. Dragon Aye

## **C. Presentation on Work to Sustain Morale**

Maria Pimienta gave a presentation on the efforts to support morale among staff and teachers. She described using surveys to assess needs, the positive work culture of sharing and collaboration, professional growth opportunities, work/life balance and competitive compensation.

## **D. TEACH Draft 23/24 Budgets**

Matt Brown presented this item and informed the board that the drafts would not be discussed or voted on at the meeting because there were too many variables to be settled from the State at this time and that a draft budget would be provided at the May meeting.

He reminded the board that the full budget would be voted on in June along with the LCAPs.

## **E. 23/24 Teacher Salary Schedule**

J. Lobdell made a motion to Approve the 2023-2024 Teacher Salary Schedule.

S. Burrows seconded the motion.

Matt Brown presented this agenda item and explained that TEACH might be losing good candidates in the hiring process because other charter schools are offering enticing bonuses to new teachers. He explained that the current salary schedule is competitive with other charters in Los Angeles as well as LAUSD, although the LAUSD compensation schedule is difficult to discern. Board member Lobdell asked for more details about the comparisons and Matt explained TEACH was on par with Alliance, the highest paying charter, in the early years of service, but is less competitive with them as the years experience reach 20 plus years. Board Member Sanjay asked about additional bonuses

for hard to fill positions and Matt replied that with this proposal TEACH would be able to incentivize those hard to fill positions such as math, science and special education,. The board **VOTED** to approve the motion.

**Roll Call**

S. Athalye Aye  
 C. Sandoval Aye  
 A. Dragon Aye  
 J. Lobdell Aye  
 S. Burrows Aye

**F. TEACH Las Vegas CMO Agreement Amendment**

S. Burrows made a motion to Approve the Amendment to the CMO Agreement.

A. Dragon seconded the motion.

Matt Brown provided an overview of the financial status of TEACH Las Vegas and described the amendment that extended the term of service by two years, eliminated the fee for the current year and reduced the fee for the second year. He emphasized that TEACH wanted to be a long term partner with TEACH Las Vegas and that Charter Impact had approved a similar amendment to support the school during the start-up process. Board member Lobdell asked if the delay would hurt TEACH Public Schools and Matt explained that it would not because the cash position was healthy. Board member Burrows asked for assurance that there would not be a loan and Matt assured him there would not be.

The board **VOTED** to approve the motion.

**Roll Call**

S. Burrows Aye  
 J. Lobdell Aye  
 A. Dragon Aye  
 S. Athalye Aye  
 C. Sandoval Aye

**G. Enrollment and Recruitment Update**

Luis Ramirez presented an update on enrollment and recruitment. He described a ten-point plan and emphasized that recruitment was a team effort and that the strategies and tactics have evolved during his years in the role. Luis described strategies such as visiting local preschools, bus ads, social media, working with Schola, door to door flyers. He also stated that word of mouth from our current students and families.

**H. Presentation on Student Performance Data**

Suzette Torres presented the State DASHboard data and the school administered interim assessments that can be used as verified data for renewal- the NWEA and the iReady assessments. She explained the data and explained how the interim assessments functioned as a predictor for SBAC results. Ms. Torres described the trends for each school. Board member Lobdell asked how she felt about the data and Ms. Torres

explained that the Principals were present and able to answer any questions about their school level data during the Principal reports.

### **I. Principal Reports**

The first presentation was given by Mr. Menduke, Principal of the High School. He reviewed the detailed report that is attached to the board materials. He described the feeling of safety among the staff to try new strategies and he stated that the students have a positive sense of ownership over the school. He shared with the board the academic strategies that the school was using and also shared elements of the restorative justice program and steps the school was taking to reduce absenteeism.

Sharon Rhee provided the report for the Elementary School and described the academic strategies the school was using, including an intense use of using data, peer to peer observations, creating a culture of collaboration and teamwork. Grade level teachers collaborate and design lessons together. She stated the school is still struggling with chronic absenteeism but that teachers were active in contacting home when a student is absent. Board member Lobdell asked about teacher morale and Rhee assured it was high and the culture was positive.

Beth Bulgeron gave a brief update on behalf of Ms. Williams, the middle school Principal. The school just finished their WASC visit and the LAUSD oversight visit. There will be an awards ceremony coming up.

Board member Sandoval asked if the schools could report on discipline data at the next meeting and detail the strategies the school is using to keep the suspension rate down.

### **J. CEO Report**

Dr. Carranza gave the CEO report and discussed the state dashboard data and some of the strategies to improve test scores such as working with the Principals to align curricular materials. He emphasized that this year and next year, Principals would have goals to improve data points and this will be part of their evaluations.

### **K. Consider the Approval of a Three Year Contract for Curriculum with Achieve 3000**

### **L. Consider and Vote on the Ratification of Concrete Work**

J. Lobdell made a motion to Ratify the Concrete work.

A. Dragon seconded the motion.

Matt Brown explained that the work on the concrete did not reach the amount that required board approval but it was before the board in case the same vendor was needed to provide additional services there would not be the appearance of parceling.

The board **VOTED** to approve the motion.

#### **Roll Call**

C. Sandoval Aye

**Roll Call**

J. Lobdell Aye  
A. Dragon Aye  
S. Burrows Aye  
S. Athalye Aye

**IV. Closing Items**

**A. Upcoming Meeting Date**

The next board meeting is scheduled for May 31st at 5 pm.

**B. Public Comment**

There was no public comment.

**C. Board Member Comments**

No board member comments.

**D. Adjourn Meeting**

There being no further business to be transacted, and upon motion duly made, seconded and approved, the meeting was adjourned at 6:30 PM.

Respectfully Submitted,  
C. Sandoval

DRAFT



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# Minutes

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A. Dragon (remote), C. Sandoval, J. Lobdell (remote), S. Athalye (remote), S. Burrows (remote)

**Directors Absent**

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**Ex Officio Members Present**

R. Carranza

**Non Voting Members Present**

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S. Burrows seconded the motion.

The board **VOTED** to approve the motion.

#### Roll Call

S. Burrows Aye

C. Sandoval Aye

J. Lobdell Aye

A. Dragon Aye

S. Athalye Aye

J. Lobdell made a motion to Approve the current board agenda.

S. Burrows seconded the motion.

The board **VOTED** to approve the motion.

#### Roll Call

A. Dragon Aye

S. Athalye Aye

C. Sandoval Aye

S. Burrows Aye

J. Lobdell Aye

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S. Athalye seconded the motion.

Cecelia introduced the agenda item and thanked Spencer for his commitment to TEACH.

The board enthusiastically encouraged him to remain on the board.

The board **VOTED** to approve the motion.

### **Roll Call**

A. Dragon Aye

S. Burrows Aye

J. Lobdell Aye

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Maria Pimienta gave a presentation on the efforts to support morale among staff and teachers. She described using surveys to assess needs, the positive work culture of sharing and collaboration, professional growth opportunities, work/life balance and competitive compensation.

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**Roll Call**

J. Lobdell Aye  
S. Burrows Aye  
C. Sandoval Aye  
A. Dragon Aye  
S. Athalye Aye

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C. Sandoval Aye  
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S. Athalye Aye

**G. Enrollment and Recruitment Update**

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### **I. Principal Reports**

The first presentation was given by Mr. Menduke, Principal of the High School. He reviewed the detailed report that is attached to the board materials. He described the feeling of safety among the staff to try new strategies and he stated that the students have a positive sense of ownership over the school. He shared with the board the academic strategies that the school was using and also shared elements of the restorative justice program and steps the school was taking to reduce absenteeism.

Sharon Rhee provided the report for the Elementary School and described the academic strategies the school was using, including an intense use of using data, peer to peer observations, creating a culture of collaboration and teamwork. Grade level teachers collaborate and design lessons together. She stated the school is still struggling with chronic absenteeism but that teachers were active in contacting home when a student is absent. Board member Lobdell asked about teacher morale and Rhee assured it was high and the culture was positive.

Beth Bulgeron gave a brief update on behalf of Ms. Williams, the middle school Principal. The school just finished their WASC visit and the LAUSD oversight visit. There will be an awards ceremony coming up.

Board member Sandoval asked if the schools could report on discipline data at the next meeting and detail the strategies the school is using to keep the suspension rate down.

### **J. CEO Report**

Dr. Carranza gave the CEO report and discussed the state dashboard data and some of the strategies to improve test scores such as working with the Principals to align curricular materials. He emphasized that this year and next year, Principals would have goals to improve data points and this will be part of their evaluations.

### **K. Consider the Approval of a Three Year Contract for Curriculum with Achieve 3000**

### **L. Consider and Vote on the Ratification of Concrete Work**

J. Lobdell made a motion to Ratify the Concrete work.

A. Dragon seconded the motion.

Matt Brown explained that the work on the concrete did not reach the amount that required board approval but it was before the board in case the same vendor was needed to provide additional services there would not be the appearance of parceling.

The board **VOTED** to approve the motion.

#### **Roll Call**

S. Burrows Aye

**Roll Call**

C. Sandoval Aye  
J. Lobdell Aye  
A. Dragon Aye  
S. Athalye Aye

**IV. Closing Items**

**A. Upcoming Meeting Date**

The next board meeting is scheduled for May 31st at 5 pm.

**B. Public Comment**

There was no public comment.

**C. Board Member Comments**

No board member comments.

**D. Adjourn Meeting**

There being no further business to be transacted, and upon motion duly made, seconded and approved, the meeting was adjourned at 6:30 PM.

Respectfully Submitted,  
C. Sandoval

# Coversheet

## Presentation of Student Behavior and Discipline Data

**Section:** III. Items Scheduled for Information and Potential Action  
**Item:** B. Presentation of Student Behavior and Discipline Data  
**Purpose:** FYI  
**Submitted by:**  
**Related Material:** Restorative Practices & Discipline (BOARD).pdf

*Restorative Practices @*  
**TEACH Tech**  
**Charter High School**

*Go Rams!*



# Why Restorative Practices?

From our charter petition:

*The collective goal is to create an atmosphere where **high expectations** are set for student behavior and thinking. The ultimate goal is to build positive relationships with students and to expand upon these relationships to enhance the safe, and progressive atmosphere of mutual respect and harmony. TEACH administrators work with all staff to use restorative justice practices that **reduce conflict, minimize strife, and repair damage** by returning to order when harm has occurred. The key elements of restorative justice are accountability and responsibility. The overarching goals of restorative justice are to decrease suspensions, improve attendance, increase academic development, and create and maintain a healthy, safe school climate. This in turn **fosters an environment of care**, and addresses undesired conduct in an inclusive manner that fosters order and strengthens relationships.*

**We have an unflinching belief in students and their ability to think critically, learn, reflect, and take part in restoration.**

**We know that all harm must be repaired in ways that are honoring and authentic.**

**We believe that when done well, restorative practices lead to a environment of empathy and success.**

# What Does it Look Like?

**Harm is caused**



**Both parties are given space to de-escalate in healthy ways**



**Culture team facilitates reflection and preparation for both parties 1:1**



**When deemed ready, a restorative meeting is held**



**Culture team follows up at 1 week, 2 week, and 3 week mark**



**Adjustments are made as needed including further meetings**

Checked by Culture Team: \_\_\_\_\_



TEACH Tech Charter High School  
Student Reflection

Name		
Date		

Did you...(circle your response)		
Do you feel generally rested and in an overall positive mood today?	Yes	No
Did you eat healthy food today?	Yes	No
Did you have any negative experiences or interactions with anyone last night at home or on your way to school today?	Yes	No

<i>How are you feeling today? What has gone well for you, and what has been challenging?</i>	
<i>What happened that was <u>out of your control</u> that led to you completing this reflection form today?</i>	
<i>What happened that was <u>within your control</u> that led to you completing this reflection form today?</i>	
<i>What harm might have been <u>caused to others</u> by your actions today?</i>	
<i>What harm might have been <u>caused to yourself</u> by your actions today?</i>	
<i>What do you think you need to do to "<u>make things right</u>"?</i>	
<i>What do you need from anyone else involved in what happened today in order to <u>feel respected and valued</u>?</i>	

Checked by Culture Team: \_\_\_\_\_

Student Name \_\_\_\_\_ Date \_\_\_\_\_

Describe the incident (Please be very specific and answer who, what, where, when, why and how)

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How can this incident be solved?

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What can you commit to doing to solve the issue?

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Office use only: Actions Taken as a result of the incident:

Student Signature \_\_\_\_\_

Administrator Signature \_\_\_\_\_

# Successes

0% Suspension Rate  
21-22 School Year

59th  
Percentile  
in  
School  
Safety

Increased 2  
percentile in  
teacher-student  
relationships  
from Winter to  
Fall

“It was kind of weird to be able to share how I was feeling with a teacher, but when I did it, I felt better. It was nice to feel like my voice mattered just as much as the adult’s voice.”

- 9th Grade Student

“The meeting with the student that I did restoration with went really well. It helped me and the student understand what the expectations were, and how I could support them and how they could meet my standards. It resulted in our relationship getting stronger.”

- 12th Grade Teacher

# Areas for Improvement

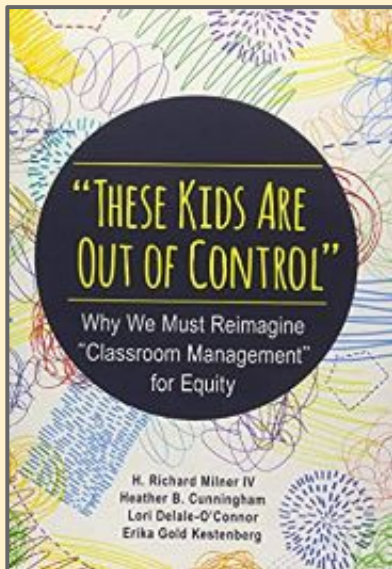
**Consistency in implementation of restorative practices with our new Culture Leadership Team (CLT)**

**Full teacher and community buy in to the process**

**“What are the consequences?”**

# What Next?

Campus wide book study over the summer with the text, *"These Kids Are Out of Control": Why We Must Reimagine "Classroom Management" for Equity.*



Sending CLT (AP of Culture and Restorative Justice Coordinator) to a summer Restorative Practices Institute at LMU.

## Training Agenda

- **Day 1 — Monday, July 17, 2023**  
Restorative Leadership
- **Day 2 — Tuesday, July 18, 2023**  
Restorative Systems Culture & Tier 1
- **Day 3 — Wednesday, July 19, 2023**  
Systemic Implementation
- **Day 4 — Thursday, July 20, 2023**  
Responding Restoratively to Harm Tiers 2 & 3
- **Day 5 — Friday, July 21, 2023**  
Implementation Planning

# What Next?

Our summer professional development will focus on...

- unpacking our learning from the the text, *"These Kids Are Out of Control": Why We Must Reimagine "Classroom Management" for Equity*,
- ensuring that all staff understand the “why” behind and the implementation process of restorative practices on our campus,
- and building clear structures that lead students and staff to have a mutual understanding of expectations for being a part of our school culture and community.

# Questions?



## Coversheet

### TEACH Inc., Cunningham & Morris LL, and Wooten Avila LLC Form 990 Income Tax Return for Year Ended June 30, 2022

**Section:** III. Items Scheduled for Information and Potential Action  
**Item:** C. TEACH Inc., Cunningham & Morris LL, and Wooten Avila LLC Form  
990 Income Tax Return for Year Ended June 30, 2022  
**Purpose:** Vote  
**Submitted by:**  
**Related Material:** Tax\_Return\_for\_Cunningham\_and\_Morris\_LLC-\_A25.pdf  
Tax\_Return\_for\_Wooten\_Avila\_LLC-\_A140954\_-\_2.pdf  
Tax\_Return\_for\_Teach\_Inc\_A274771-\_2021.pdf



## Instructions

Included in this DocuSign are the assembled copies of the filings for the organization's records as follows:

1. **Internal Copy:** Includes all letters, instructions, and return pages without any redaction. Please review this file, sign, and date where indicated and submit back to CLA.
2. **Public Inspection Copy:** Redacted to just the information that is required for public inspection. If anyone from the public were to request a copy of the return or if the return were to be posted, the Public Inspection Copy should be used.

Please note:

After the documents have been e-signed and you click 'Finish' - DocuSign will give you the option to log-in - you can log-in at that time and download the executed documents; alternatively, DocuSign will send you another email indicating that the documents have been 'finished' and you can click that link to download and/or print the documents. **Downloading is important as you will not be receiving a paper copy. You have 120 days to download.**

CLA cannot e-file any return until its signed e-file authorization is returned to CLA.

CLA does recommend all returns included in each PDF be signed and dated for your records.

CLA is not making any payments as part of the e-file or submitting any paper returns on your behalf.

Please initial to indicate that you have read and understand the above:

DS  
MB

[CLAconnect.com](https://www.claconnect.com)

CPAs | CONSULTANTS | WEALTH ADVISORS

CLA (CliftonLarsonAllen LLP) is an independent network member of CLA Global. See [CLAGlobal.com/disclaimer](https://www.claglobal.com/disclaimer).

Investment advisory services are offered through CliftonLarsonAllen Wealth Advisors, LLC, an SEC-registered investment advisor.





CliftonLarsonAllen LLP  
CLAconnect.com

May 16, 2023

CUNNINGHAM AND MORRIS LLC  
10000 S. Western Ave  
Los Angeles, CA 90047  
Attention: Matt Brown

Dear Matt,

We have prepared and enclosed your 2021 California return. The return should be signed, dated, and mailed.

CALIFORNIA FORM 199 RETURN:

The California Form 199 should be mailed as soon as possible to:

Franchise Tax Board  
P.O. Box 942857  
Sacramento, CA 94257-0500

No payment is required.

A copy of the return is enclosed for your files. We suggest that you retain this copy indefinitely.

Sincerely,

Mei-Li Huang

TAXABLE YEAR  
**2021**

# California Exempt Organization Annual Information Return

128941 12-29-21  
FORM

**199**

Calendar Year 2021 or fiscal year beginning (mm/dd/yyyy) **07/01/2021**, and ending (mm/dd/yyyy) **06/30/2022**

Corporation/Organization name **CUNNINGHAM AND MORRIS LLC** California corporation number **201623810329**

Additional information. See instructions. FEIN **95-4856901**

Street address (suite or room) **10000 S. WESTERN AVE** PMB no.

City **LOS ANGELES** State **CA** ZIP code **90047**

Foreign country name Foreign province/state/county Foreign postal code

**A** First return  Yes  No  
**B** Amended return  Yes  No  
**C** IRC Section 4947(a)(1) trust  Yes  No  
**D** Final information return?  
 Dissolved  Surrendered (Withdrawn)  Merged/Reorganized  
 Enter date: (mm/dd/yyyy) \_\_\_\_\_  
**E** Check accounting method: (1)  Cash (2)  Accrual (3)  Other  
**F** Federal return filed? (1)  990T (2)  990PF (3)  Sch H (990) (4)  Other 990 series  
**G** Is this a group filing? See instructions  Yes  No  
**H** Is this organization in a group exemption  Yes  No  
 If "Yes," what is the parent's name? \_\_\_\_\_  
**I** Did the organization have any changes to its guidelines not reported to the FTB? See instructions  Yes  No  
**J** If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions.  Yes  No  
**K** Is the organization exempt under R&TC Section 23701g?  Yes  No  
 If "Yes," enter the gross receipts from nonmember sources \$ \_\_\_\_\_  
**L** Is the organization a limited liability company?  Yes  No  
**M** Did the organization file Form 100 or Form 109 to report taxable income?  Yes  No  
**N** Is the organization under audit by the IRS or has the IRS audited in a prior year?  Yes  No  
**O** Is federal Form 1023/1024 pending?  Yes  No  
 Date filed with IRS \_\_\_\_\_

**Part I Complete Part I unless not required to file this form. See General Information B and C.**

<b>Receipts and Revenues</b>	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8	1	867,961	00
	2	Gross dues and assessments from members and affiliates	2		00
	3	Gross contributions, gifts, grants, and similar amounts received	3		00
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. <b>This line must be completed.</b> If the result is less than \$50,000, see General Information B	4	867,961	00
	5	Cost of goods sold	5		00
	6	Cost or other basis, and sales expenses of assets sold	6		00
	7	Total costs. Add line 5 and line 6	7		00
	8	Total gross income. Subtract line 7 from line 4	8	867,961	00
<b>Expenses</b>	9	Total expenses and disbursements. From Side 2, Part II, line 18	9	1,032,883	00
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	-164,922	00
<b>Filing Fee</b>	11	Total payments	11		00
	12	Use tax. See General Information K	12		00
	13	Payments balance. If line 11 is more than line 12, subtract line 12 from line 11	13		00
	14	Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12	14		00
	15	Penalties and interest. See General Information J	15		00
	16	<b>Balance due.</b> Add line 12 and line 15. Then subtract line 11 from the result	16		00
<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.				
	Signature of officer <b>Matt Brown</b> <small>DocuSigned by: C74C49325FB147B...</small>	Title <b>CFO</b>	Date <b>5/17/2023</b>	• Telephone	
<b>Paid Preparer's Use Only</b>	Preparer's signature <b>MEI-LI HUANG</b>	Date <b>05/16/23</b>	Check if self-employed <input type="checkbox"/>	• PTIN <b>P02383735</b>	
	Firm's name (or yours, if self-employed) and address <b>CLIFTONLARSONALLEN LLP 2210 EAST ROUTE 66 GLEN DORA 91740</b>			• Firm's FEIN <b>41-0746749</b>	
				• Telephone <b>626-857-7300</b>	
	May the FTB discuss this return with the preparer shown above? See instructions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				



CUNNINGHAM AND MORRIS LLC95-4856901

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**CA 199                    COMPENSATION OF OFFICERS, DIRECTORS AND TRUSTEES                    STATEMENT 1**

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<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HRS WORKED/WK</u>	<u>COMPENSATION</u>
MATT BROWN 10000 S. WESTERN AVE LOS ANGELES, CA 90047	CFO 40.00	0.
RAUL CARRANZA 10000 S. WESTERN AVE LOS ANGELES, CA 90047	EXECUTIVE DIRECTOR 40.00	0.
J.J. LEWIS 10000 S. WESTERN AVE LOS ANGELES, CA 90047	CHAIR 1.00	0.
JAMES LOBDELL 10000 S. WESTERN AVE LOS ANGELES, CA 90047	SECRETARY 1.00	0.
SPENCER BURROWS 10000 S. WESTERN AVE LOS ANGELES, CA 90047	MEMBER 1.00	0.
AUSTIN DRAGON 10000 S. WESTERN AVE LOS ANGELES, CA 90047	MEMBER 1.00	0.
KELVIN PIAZZA 10000 S. WESTERN AVE LOS ANGELES, CA 90047	MEMBER 1.00	0.
CECILIA SANDOVAL 10000 S. WESTERN AVE LOS ANGELES, CA 90047	MEMBER 1.00	0.
TOTAL TO FORM 199, PART II, LINE 11		<hr/> <hr/> 0.

CUNNINGHAM AND MORRIS LLC95-4856901

CA 199	OTHER ASSETS	STATEMENT 2
<u>DESCRIPTION</u>	<u>BEG. OF YEAR</u>	<u>END OF YEAR</u>
DEFERRED RENT	215,370.	203,827.
TOTAL TO FORM 199, SCHEDULE L, LINE 12	215,370.	203,827.

CA 199	BONDS AND NOTES PAYABLE	STATEMENT 3
<u>DESCRIPTION</u>	<u>BEG. OF YEAR</u>	<u>END OF YEAR</u>
TAX-EXEMPT BONDS LIABILITIES	11,765,554.	11,630,660.
TOTAL TO FORM 199, SCHEDULE L, LINE 16	11,765,554.	11,630,660.

CA 199	OTHER LIABILITIES	STATEMENT 4
<u>DESCRIPTION</u>	<u>BEG. OF YEAR</u>	<u>END OF YEAR</u>
INTEREST PAYABLE	59,217.	58,498.
INTERCOMPANY PAYABLES	0.	11,556.
TOTAL TO FORM 199, SCHEDULE L, LINE 18	59,217.	70,054.

CA 199	INCOME RECORDED ON BOOKS THIS YEAR NOT INCLUDED IN THIS RETURN	STATEMENT 5
<u>DESCRIPTION</u>		<u>AMOUNT</u>
UNREALIZED GAIN/LOSS ON INVESTMENT		-55,375.
TOTAL TO FORM 199, SCHEDULE M-1, LINE 7		-55,375.



CliftonLarsonAllen LLP  
CLAconnect.com

May 16, 2023

CUNNINGHAM AND MORRIS LLC  
10000 S. Western Ave  
Los Angeles, CA 90047  
Attention: Matt Brown

Dear Matt,

We have prepared and enclosed your 2021 California return. The return should be signed, dated, and mailed.

CALIFORNIA FORM 199 RETURN:

The California Form 199 should be mailed as soon as possible to:

Franchise Tax Board  
P.O. Box 942857  
Sacramento, CA 94257-0500

No payment is required.

A copy of the return is enclosed for your files. We suggest that you retain this copy indefinitely.

Sincerely,

Mei-Li Huang



TAXABLE YEAR  
**2021**

# California Exempt Organization Annual Information Return

128941 12-29-21  
FORM

**199**

Calendar Year 2021 or fiscal year beginning (mm/dd/yyyy) **07/01/2021**, and ending (mm/dd/yyyy) **06/30/2022**

Corporation/Organization name **CUNNINGHAM AND MORRIS LLC** California corporation number **201623810329**

Additional information. See instructions. FEIN **95-4856901**

Street address (suite or room) **10000 S. WESTERN AVE** PMB no.

City **LOS ANGELES** State **CA** ZIP code **90047**

Foreign country name Foreign province/state/county Foreign postal code

**A** First return  Yes  No  
**B** Amended return  Yes  No  
**C** IRC Section 4947(a)(1) trust  Yes  No  
**D** Final information return?  
 Dissolved  Surrendered (Withdrawn)  Merged/Reorganized  
 Enter date: (mm/dd/yyyy) \_\_\_\_\_  
**E** Check accounting method: (1)  Cash (2)  Accrual (3)  Other  
**F** Federal return filed? (1)  990T (2)  990PF (3)  Sch H (990) (4)  Other 990 series  
**G** Is this a group filing? See instructions  Yes  No  
**H** Is this organization in a group exemption  Yes  No  
 If "Yes," what is the parent's name? \_\_\_\_\_  
**I** Did the organization have any changes to its guidelines not reported to the FTB? See instructions  Yes  No  
**J** If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions.  Yes  No  
**K** Is the organization exempt under R&TC Section 23701g?  Yes  No  
 If "Yes," enter the gross receipts from nonmember sources \$ \_\_\_\_\_  
**L** Is the organization a limited liability company?  Yes  No  
**M** Did the organization file Form 100 or Form 109 to report taxable income?  Yes  No  
**N** Is the organization under audit by the IRS or has the IRS audited in a prior year?  Yes  No  
**O** Is federal Form 1023/1024 pending?  Yes  No  
 Date filed with IRS \_\_\_\_\_

**Part I Complete Part I unless not required to file this form. See General Information B and C.**

<b>Receipts and Revenues</b>	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8	1	867,961	00
	2	Gross dues and assessments from members and affiliates	2		00
	3	Gross contributions, gifts, grants, and similar amounts received	3		00
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. <b>This line must be completed.</b> If the result is less than \$50,000, see General Information B	4	867,961	00
	5	Cost of goods sold	5		00
	6	Cost or other basis, and sales expenses of assets sold	6		00
	7	Total costs. Add line 5 and line 6	7		00
	8	Total gross income. Subtract line 7 from line 4	8	867,961	00
<b>Expenses</b>	9	Total expenses and disbursements. From Side 2, Part II, line 18	9	1,032,883	00
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	-164,922	00
<b>Filing Fee</b>	11	Total payments	11		00
	12	Use tax. See General Information K	12		00
	13	Payments balance. If line 11 is more than line 12, subtract line 12 from line 11	13		00
	14	Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12	14		00
	15	Penalties and interest. See General Information J	15		00
	16	<b>Balance due.</b> Add line 12 and line 15. Then subtract line 11 from the result	16		00
<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.				
	Signature of officer	Title <b>CFO</b>	Date	• Telephone	
<b>Paid Preparer's Use Only</b>	Preparer's signature	<b>MEI-LI HUANG</b> <i>Mei-Li Huang</i>	Date <b>05/16/23</b>	Check if self-employed <input type="checkbox"/>	• PTIN <b>P02383735</b>
	Firm's name (or yours, if self-employed) and address	<b>CLIFTONLARSONALLEN LLP</b> <b>2210 EAST ROUTE 66</b> <b>GLEN DORA 91740</b>			• Firm's FEIN <b>41-0746749</b>
					• Telephone <b>626-857-7300</b>
May the FTB discuss this return with the preparer shown above? See instructions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					

**CUNNINGHAM AND MORRIS LLC**

95-4856901

**Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.**

128951 01-19-22

<b>Receipts from Other Sources</b>	1	Gross sales or receipts from all business activities. See instructions	•	1		00	
	2	Interest	•	2	6,533	00	
	3	Dividends	•	3		00	
	4	Gross rents	•	4	861,428	00	
	5	Gross royalties	•	5		00	
	6	Gross amount received from sale of assets (See instructions)	•	6		00	
	7	Other income	•	7		00	
	8	<b>Total</b> gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1	•	8	867,961	00	
	9	Contributions, gifts, grants, and similar amounts paid	•	9		00	
	10	Disbursements to or for members	•	10		00	
	11	Compensation of officers, directors, and trustees <b>SEE STATEMENT 1</b>	•	11	0	00	
	12	Other salaries and wages	•	12		00	
	<b>Expenses and Disbursements</b>	13	Interest	•	13	716,880	00
		14	Taxes	•	14	12,735	00
		15	Rents	•	15		00
		16	Depreciation and depletion (See instructions)	•	16	303,268	00
		17	Other expenses and disbursements	•	17		00
		18	<b>Total</b> expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	•	18	1,032,883	00

<b>Schedule L Balance Sheet</b>	Beginning of taxable year		End of taxable year	
	(a)	(b)	(c)	(d)
<b>Assets</b>				
1 Cash		1,160,312		1,120,542
2 Net accounts receivable		1,318		3,005
3 Net notes receivable				
4 Inventories				
5 Federal and state government obligations				
6 Investments in other bonds				
7 Investments in stock				
8 Mortgage loans				
9 Other investments				
10 a Depreciable assets	11,066,510		7,786,399	
b Less accumulated depreciation	( 1,312,837 )	9,753,673	( 1,607,565 )	6,178,834
11 Land				3,280,111
12 Other assets <b>STMT 2</b>		215,370		203,827
13 <b>Total assets</b>		11,130,673		10,786,319
<b>Liabilities and net worth</b>				
14 Accounts payable				
15 Contributions, gifts, or grants payable				
16 Bonds and notes payable <b>STMT 3</b>		11,765,554		11,630,660
17 Mortgages payable				
18 Other liabilities <b>STMT 4</b>		59,217		70,054
19 Capital stock or principal fund				
20 Paid-in or capital surplus. Attach reconciliation				
21 Retained earnings or income fund		-694,098		-914,395
22 <b>Total liabilities and net worth</b>		11,130,673		10,786,319

**Schedule M-1 Reconciliation of income per books with income per return**  
Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000.

1 Net income per books	• -220,297	7 Income recorded on books this year not included in this return. Attach schedule *	• -55,375
2 Federal income tax	•	8 Deductions in this return not charged against book income this year. Attach schedule	•
3 Excess of capital losses over capital gains	•	9 Total. Add line 7 and line 8	-55,375
4 Income not recorded on books this year. Attach schedule	•	10 Net income per return. Subtract line 9 from line 6	-164,922
5 Expenses recorded on books this year not deducted in this return. Attach schedule	•		
6 Total. Add line 1 through line 5	-220,297		

\* SEE STATEMENT

CUNNINGHAM AND MORRIS LLC95-4856901

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**CA 199                    COMPENSATION OF OFFICERS, DIRECTORS AND TRUSTEES                    STATEMENT 1**

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<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HRS WORKED/WK</u>	<u>COMPENSATION</u>
MATT BROWN 10000 S. WESTERN AVE LOS ANGELES, CA 90047	CFO 40.00	0.
RAUL CARRANZA 10000 S. WESTERN AVE LOS ANGELES, CA 90047	EXECUTIVE DIRECTOR 40.00	0.
J.J. LEWIS 10000 S. WESTERN AVE LOS ANGELES, CA 90047	CHAIR 1.00	0.
JAMES LOBDELL 10000 S. WESTERN AVE LOS ANGELES, CA 90047	SECRETARY 1.00	0.
SPENCER BURROWS 10000 S. WESTERN AVE LOS ANGELES, CA 90047	MEMBER 1.00	0.
AUSTIN DRAGON 10000 S. WESTERN AVE LOS ANGELES, CA 90047	MEMBER 1.00	0.
KELVIN PIAZZA 10000 S. WESTERN AVE LOS ANGELES, CA 90047	MEMBER 1.00	0.
CECILIA SANDOVAL 10000 S. WESTERN AVE LOS ANGELES, CA 90047	MEMBER 1.00	0.
TOTAL TO FORM 199, PART II, LINE 11		<hr/> <hr/> 0.

CUNNINGHAM AND MORRIS LLC95-4856901

CA 199	OTHER ASSETS	STATEMENT 2
DESCRIPTION	BEG. OF YEAR	END OF YEAR
DEFERRED RENT	215,370.	203,827.
TOTAL TO FORM 199, SCHEDULE L, LINE 12	215,370.	203,827.

CA 199	BONDS AND NOTES PAYABLE	STATEMENT 3
DESCRIPTION	BEG. OF YEAR	END OF YEAR
TAX-EXEMPT BONDS LIABILITIES	11,765,554.	11,630,660.
TOTAL TO FORM 199, SCHEDULE L, LINE 16	11,765,554.	11,630,660.

CA 199	OTHER LIABILITIES	STATEMENT 4
DESCRIPTION	BEG. OF YEAR	END OF YEAR
INTEREST PAYABLE	59,217.	58,498.
INTERCOMPANY PAYABLES	0.	11,556.
TOTAL TO FORM 199, SCHEDULE L, LINE 18	59,217.	70,054.

CA 199	INCOME RECORDED ON BOOKS THIS YEAR NOT INCLUDED IN THIS RETURN	STATEMENT 5
DESCRIPTION		AMOUNT
UNREALIZED GAIN/LOSS ON INVESTMENT		-55,375.
TOTAL TO FORM 199, SCHEDULE M-1, LINE 7		-55,375.

### Certificate Of Completion

Envelope Id: 59B756D605FC400B91DD1CB90D912A52	Status: Completed
Subject: Tax Return for Cunningham and Morris LLC- A253470 - 2021	
Client Name: Cunningham and Morris LLC	
Client Number: A253470	
Source Envelope:	
Document Pages: 11	Signatures: 2
Certificate Pages: 5	Initials: 1
AutoNav: Enabled	Envelope Originator:
Envelopeld Stamping: Enabled	CLA Operations
Time Zone: (UTC-06:00) Central Time (US & Canada)	220 S 6th St Ste 300
	Minneapolis, MN 55402-1418
	Erlinda.Tomas@claconnect.com
	IP Address: 144.91.232.178

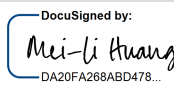
### Record Tracking

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5/16/2023 6:33:36 PM	Erlinda.Tomas@claconnect.com	

### Signer Events

Mei-Li Huang  
 Lili.Huang@claconnect.com  
 Business Assurance Principal  
 CLA  
 Security Level: Email, Account Authentication (None)

### Signature

DocuSigned by:  
  
 DA20FA268ABD478...  
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 Signed using mobile

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Sent: 5/16/2023 6:35:37 PM  
 Viewed: 5/16/2023 11:35:43 PM  
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 Not Offered via DocuSign

Matt Brown  
 mbrown@teachpublicschools.org  
 CFO/COO  
 Security Level: Email, Account Authentication (None), Access Code

DocuSigned by:  
  
 C74C49325FB1478...  
 Signature Adoption: Pre-selected Style  
 Using IP Address: 98.184.228.61

Sent: 5/16/2023 11:36:03 PM  
 Viewed: 5/17/2023 10:31:18 AM  
 Signed: 5/17/2023 10:31:52 AM

**Electronic Record and Signature Disclosure:**  
 Accepted: 5/17/2023 10:31:18 AM  
 ID: a97a9f0c-0aad-4596-86b6-6b54bf6f5099

In Person Signer Events	Signature	Timestamp
Editor Delivery Events	Status	Timestamp
Agent Delivery Events	Status	Timestamp
Intermediary Delivery Events	Status	Timestamp
Certified Delivery Events	Status	Timestamp
Carbon Copy Events	Status	Timestamp
Witness Events	Signature	Timestamp
Notary Events	Signature	Timestamp
Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	5/16/2023 6:35:37 PM

<b>Envelope Summary Events</b>	<b>Status</b>	<b>Timestamps</b>
Certified Delivered	Security Checked	5/17/2023 10:31:18 AM
Signing Complete	Security Checked	5/17/2023 10:31:52 AM
Completed	Security Checked	5/17/2023 10:31:52 AM

<b>Payment Events</b>	<b>Status</b>	<b>Timestamps</b>
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<b>Electronic Record and Signature Disclosure</b>
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### **Withdrawing your consent**

If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

### **Consequences of changing your mind**

If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. Further, you will no longer be able to use the DocuSign system to receive required notices and consents electronically from us or to sign electronically documents from us.

### **All notices and disclosures will be sent to you electronically**

Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

### **How to contact CliftonLarsonAllen LLP:**

You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:

To contact us by email send messages to: [BusinessTechnology@CLAconnect.com](mailto:BusinessTechnology@CLAconnect.com)

### **To advise CliftonLarsonAllen LLP of your new email address**

To let us know of a change in your email address where we should send notices and disclosures electronically to you, you must send an email message to us at [BusinessTechnology@CLAconnect.com](mailto:BusinessTechnology@CLAconnect.com) and in the body of such request you must state: your previous email address, your new email address. We do not require any other information from you to change your email address.

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To inform us that you no longer wish to receive future notices and disclosures in electronic format you may:



i. decline to sign a document from within your signing session, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may;

ii. send us an email to [BusinessTechnology@CLAconnect.com](mailto:BusinessTechnology@CLAconnect.com) and in the body of such request you must state your email, full name, mailing address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

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To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please confirm that you have read this ERSD, and (i) that you are able to print on paper or electronically save this ERSD for your future reference and access; or (ii) that you are able to email this ERSD to an email address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format as described herein, then select the check-box next to ‘I agree to use electronic records and signatures’ before clicking ‘CONTINUE’ within the DocuSign system.

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- You can access and read this Electronic Record and Signature Disclosure; and
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- Until or unless you notify CliftonLarsonAllen LLP as described above, you consent to receive exclusively through electronic means all notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you by CliftonLarsonAllen LLP during the course of your relationship with CliftonLarsonAllen LLP.



## Instructions

Included in this DocuSign are the assembled copies of the filings for the organization's records as follows:

1. **Internal Copy:** Includes all letters, instructions, and return pages without any redaction. Please review this file, sign, and date where indicated and submit back to CLA.
2. **PRINT & PAPER FILE Copy:** CLA will not be mailing in these returns. The first page of the PDF is the filing instructions page, this includes instructions on any payment(s) that may be due. **All the remaining pages in the PDF should be printed for signature and mailing.** Any return that must be paper filed we recommend that you use certified mail with return receipt as proof of mailing.

Please note:

After the documents have been e-signed and you click 'Finish' - DocuSign will give you the option to log-in - you can log-in at that time and download the executed documents and print any PRINT & PAPER FILE documents; alternatively, DocuSign will send you another email indicating that the documents have been 'finished' and you can click that link to download and/or print the documents. **Downloading is important as you will not be receiving a paper copy. You have 120 days to download.**

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CLA is not making any payments as part of the e-file or submitting any paper returns on your behalf.

Please initial to indicate that you have read and understand the above:

A blue rectangular box with rounded corners containing the handwritten initials 'MB'. Above the box is a small 'DS' label. Below the box is a horizontal line.

[CLAconnect.com](https://www.claconnect.com)

CPAs | CONSULTANTS | WEALTH ADVISORS

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CliftonLarsonAllen LLP  
CLAconnect.com

May 16, 2023

Wooten Avila LLC  
1846 W. Imperial Hwy.  
Los Angeles, CA 90047  
Attention: Matthew Brown

Dear Matt,

We have prepared and enclosed your 2021 California return.

CALIFORNIA FORM 199 RETURN:

The California Form 199 should be mailed as soon as possible to:

Franchise Tax Board  
P.O. Box 942857  
Sacramento, CA 94257-0500

No payment is required.

A copy of the return is enclosed for your files. We suggest that you retain this copy indefinitely.

Sincerely,

Mei-Li Huang

TAXABLE YEAR  
**2021**

# California Exempt Organization Annual Information Return

128941 12-29-21  
FORM

**199**

Calendar Year 2021 or fiscal year beginning (mm/dd/yyyy) **07/01/2021**, and ending (mm/dd/yyyy) **06/30/2022**

Corporation/Organization name **WOOTEN AVILA LLC** California corporation number **201819810727**

Additional information. See instructions. FEIN **95-4856901**

Street address (suite or room) **1846 W. IMPERIAL HWY.** PMB no.

City **LOS ANGELES** State **CA** ZIP code **90047**

Foreign country name Foreign province/state/county Foreign postal code

**A** First return  Yes  No  
**B** Amended return  Yes  No  
**C** IRC Section 4947(a)(1) trust  Yes  No  
**D** Final information return?  
 Dissolved  Surrendered (Withdrawn)  Merged/Reorganized  
Enter date: (mm/dd/yyyy)  
**E** Check accounting method: (1)  Cash (2)  Accrual (3)  Other  
**F** Federal return filed? (1)  990T (2)  990PF (3)  Sch H (990) (4)  Other 990 series  
**G** Is this a group filing? See instructions  Yes  No  
**H** Is this organization in a group exemption  Yes  No  
If "Yes," what is the parent's name?  
**I** Did the organization have any changes to its guidelines not reported to the FTB? See instructions  Yes  No  
**J** If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions.  Yes  No  
**K** Is the organization exempt under R&TC Section 23701g?  Yes  No  
If "Yes," enter the gross receipts from nonmember sources \$  
**L** Is the organization a limited liability company?  Yes  No  
**M** Did the organization file Form 100 or Form 109 to report taxable income?  Yes  No  
**N** Is the organization under audit by the IRS or has the IRS audited in a prior year?  Yes  No  
**O** Is federal Form 1023/1024 pending?  Yes  No  
Date filed with IRS

**Part I Complete Part I unless not required to file this form. See General Information B and C.**

<b>Receipts and Revenues</b>	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8	1	1,310,160	00
	2	Gross dues and assessments from members and affiliates	2		00
	3	Gross contributions, gifts, grants, and similar amounts received	3		00
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. <b>This line must be completed.</b> If the result is less than \$50,000, see General Information B	4	1,310,160	00
	5	Cost of goods sold	5		00
	6	Cost or other basis, and sales expenses of assets sold	6		00
	7	Total costs. Add line 5 and line 6	7		00
	8	Total gross income. Subtract line 7 from line 4	8	1,310,160	00
<b>Expenses</b>	9	Total expenses and disbursements. From Side 2, Part II, line 18	9	1,796,750	00
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	-486,590	00
<b>Filing Fee</b>	11	Total payments	11		00
	12	Use tax. See General Information K	12		00
	13	Payments balance. If line 11 is more than line 12, subtract line 12 from line 11	13		00
	14	Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12	14		00
	15	Penalties and interest. See General Information J	15		00
	16	<b>Balance due.</b> Add line 12 and line 15. Then subtract line 11 from the result	16		00

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

**Sign Here**  
Signature of officer **Matt Brown** Title **DIRECTOR** Date **5/17/2023** Telephone **3238720808**

Preparer's signature **MEI-LI HUANG** Date **05/16/23** Check if self-employed  PTIN **P02383735**

**Paid Preparer's Use Only**  
Firm's name (or yours, if self-employed) and address **CLIFTONLARSONALLENLLP** Firm's FEIN **41-0746749**

**2210 EAST ROUTE 66** Telephone **6268577300**  
**GLEN DORA, CA 91740**

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

**WOOTEN AVILA LLC**

95-4856901

**Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.**

128951 01-19-22

<b>Receipts from Other Sources</b>	1	Gross sales or receipts from all business activities. See instructions	•	1		00	
	2	Interest	•	2	11,245	00	
	3	Dividends	•	3		00	
	4	Gross rents	•	4	1,298,915	00	
	5	Gross royalties	•	5		00	
	6	Gross amount received from sale of assets (See instructions)	•	6		00	
	7	Other income	•	7		00	
	8	<b>Total</b> gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1	•	8	1,310,160	00	
	9	Contributions, gifts, grants, and similar amounts paid	•	9		00	
	10	Disbursements to or for members	•	10		00	
	11	Compensation of officers, directors, and trustees <b>SEE STATEMENT 1</b>	•	11	0	00	
	12	Other salaries and wages	•	12		00	
	<b>Expenses and Disbursements</b>	13	Interest	•	13	1,057,549	00
		14	Taxes	•	14	12,058	00
		15	Rents	•	15		00
		16	Depreciation and depletion (See instructions)	•	16	724,131	00
		17	Other expenses and disbursements <b>SEE STATEMENT 2</b>	•	17	3,012	00
		18	<b>Total</b> expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	•	18	1,796,750	00

<b>Schedule L Balance Sheet</b>	Beginning of taxable year		End of taxable year	
	(a)	(b)	(c)	(d)
<b>Assets</b>				
1 Cash		2,869,474		2,727,860
2 Net accounts receivable		891		4,935
3 Net notes receivable				
4 Inventories				
5 Federal and state government obligations				
6 Investments in other bonds				
7 Investments in stock				
8 Mortgage loans				
9 Other investments				
10 a Depreciable assets	20,231,712		20,319,013	
b Less accumulated depreciation	( 1,028,537 )	19,203,175	( 1,740,064 )	18,578,949
11 Land		900,000		900,000
12 Other assets <b>STMT 3</b>		3,625		3,625
13 <b>Total assets</b>		22,977,165		22,215,369
<b>Liabilities and net worth</b>				
14 Accounts payable		7,160		
15 Contributions, gifts, or grants payable				
16 Bonds and notes payable		23,578,643		23,375,977
17 Mortgages payable				
18 Other liabilities <b>STMT 4</b>		226,080		235,595
19 Capital stock or principal fund				
20 Paid-in or capital surplus. Attach reconciliation				
21 Retained earnings or income fund		-834,718		-1,396,203
22 <b>Total liabilities and net worth</b>		22,977,165		22,215,369

<b>Schedule M-1 Reconciliation of income per books with income per return</b>			
Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000.			
1 Net income per books	•	-561,485	7 Income recorded on books this year not included in this return. Attach schedule
2 Federal income tax	•		•
3 Excess of capital losses over capital gains	•	74,895	8 Deductions in this return not charged against book income this year. Attach schedule
4 Income not recorded on books this year. Attach schedule	•		•
5 Expenses recorded on books this year not deducted in this return. Attach schedule	•		9 Total. Add line 7 and line 8
6 Total. Add line 1 through line 5		-486,590	10 Net income per return. Subtract line 9 from line 6
			-486,590

WOOTEN AVILA LLC

95-4856901

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CA 199                    COMPENSATION OF OFFICERS, DIRECTORS AND TRUSTEES                    STATEMENT 1

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NAME AND ADDRESS	TITLE AND AVERAGE HRS WORKED/WK	COMPENSATION
MATT BROWN 1846 W. IMPERIAL HWY. LOS ANGELES, CA 90047	CFO 40.00	0.
RAUL CARRANZA 1846 W. IMPERIAL HWY. LOS ANGELES, CA 90047	EXECUTIVE DIRECTOR, PRESID 40.00	0.
J.J. LEWIS 1846 W. IMPERIAL HWY. LOS ANGELES, CA 90047	CHAIR 1.00	0.
JAMES LOBDELL 1846 W. IMPERIAL HWY. LOS ANGELES, CA 90047	SECRETARY 1.00	0.
SPENCER BURROWS 1846 W. IMPERIAL HWY. LOS ANGELES, CA 90047	MEMBER 1.00	0.
AUSTIN DRAGON 1846 W. IMPERIAL HWY. LOS ANGELES, CA 90047	MEMBER 1.00	0.
KELVIN PIAZZA 1846 W. IMPERIAL HWY. LOS ANGELES, CA 90047	MEMBER 1.00	0.
CECILIA SANDOVAL 1846 W. IMPERIAL HWY. LOS ANGELES, CA 90047	MEMBER 1.00	0.
TOTAL TO FORM 199, PART II, LINE 11		<u>0.</u>

WOOTEN AVILA LLC95-4856901


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<u>CA 199</u>	<u>OTHER EXPENSES</u>	<u>STATEMENT 2</u>
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<u>DESCRIPTION</u>	<u>AMOUNT</u>
OTHER PROFESSIONAL FEES	3,000.
OFFICE EXPENSES	12.
TOTAL TO FORM 199, PART II, LINE 17	3,012.

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<u>CA 199</u>	<u>OTHER ASSETS</u>	<u>STATEMENT 3</u>
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<u>DESCRIPTION</u>	<u>BEG. OF YEAR</u>	<u>END OF YEAR</u>
PREPAID EXPENSES AND DEFERRED CHARGES	3,625.	3,625.
TOTAL TO FORM 199, SCHEDULE L, LINE 12	3,625.	3,625.

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<u>CA 199</u>	<u>OTHER LIABILITIES</u>	<u>STATEMENT 4</u>
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<u>DESCRIPTION</u>	<u>BEG. OF YEAR</u>	<u>END OF YEAR</u>
INTERCOMPANY PAYABLES	141,967.	148,943.
DEFERRED RENT LIABILITY	56,507.	58,578.
DEFERRED REVENUE	27,606.	28,074.
TOTAL TO FORM 199, SCHEDULE L, LINE 18	226,080.	235,595.



CliftonLarsonAllen LLP  
CLAconnect.com

May 16, 2023

Wooten Avila LLC  
1846 W. Imperial Hwy.  
Los Angeles, CA 90047  
Attention: Matthew Brown

Dear Matt,

We have prepared and enclosed your 2021 California return.

CALIFORNIA FORM 199 RETURN:

The California Form 199 should be mailed as soon as possible to:

Franchise Tax Board  
P.O. Box 942857  
Sacramento, CA 94257-0500

No payment is required.

A copy of the return is enclosed for your files. We suggest that you retain this copy indefinitely.

Sincerely,

Mei-Li Huang



TAXABLE YEAR  
**2021**

# California Exempt Organization Annual Information Return

128941 12-29-21  
FORM

**199**

Calendar Year 2021 or fiscal year beginning (mm/dd/yyyy) **07/01/2021**, and ending (mm/dd/yyyy) **06/30/2022**

Corporation/Organization name **WOOTEN AVILA LLC** California corporation number **201819810727**

Additional information. See instructions. FEIN **95-4856901**

Street address (suite or room) **1846 W. IMPERIAL HWY.** PMB no.

City **LOS ANGELES** State **CA** ZIP code **90047**

Foreign country name Foreign province/state/county Foreign postal code

**A** First return  Yes  No  
**B** Amended return  Yes  No  
**C** IRC Section 4947(a)(1) trust  Yes  No  
**D** Final information return?  
 Dissolved  Surrendered (Withdrawn)  Merged/Reorganized  
 Enter date: (mm/dd/yyyy) \_\_\_\_\_  
**E** Check accounting method: (1)  Cash (2)  Accrual (3)  Other  
**F** Federal return filed? (1)  990T (2)  990PF (3)  Sch H (990) (4)  Other 990 series  
**G** Is this a group filing? See instructions  Yes  No  
**H** Is this organization in a group exemption  Yes  No  
 If "Yes," what is the parent's name? \_\_\_\_\_  
**I** Did the organization have any changes to its guidelines not reported to the FTB? See instructions  Yes  No  
**J** If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions.  Yes  No  
**K** Is the organization exempt under R&TC Section 23701g?  Yes  No  
 If "Yes," enter the gross receipts from nonmember sources \$ \_\_\_\_\_  
**L** Is the organization a limited liability company?  Yes  No  
**M** Did the organization file Form 100 or Form 109 to report taxable income?  Yes  No  
**N** Is the organization under audit by the IRS or has the IRS audited in a prior year?  Yes  No  
**O** Is federal Form 1023/1024 pending?  Yes  No  
 Date filed with IRS \_\_\_\_\_

**Part I Complete Part I unless not required to file this form. See General Information B and C.**

<b>Receipts and Revenues</b>	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8	1	1,310,160	00
	2	Gross dues and assessments from members and affiliates	2		00
	3	Gross contributions, gifts, grants, and similar amounts received	3		00
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. <b>This line must be completed.</b> If the result is less than \$50,000, see General Information B	4	1,310,160	00
	5	Cost of goods sold	5		00
	6	Cost or other basis, and sales expenses of assets sold	6		00
	7	Total costs. Add line 5 and line 6	7		00
	8	Total gross income. Subtract line 7 from line 4	8	1,310,160	00
<b>Expenses</b>	9	Total expenses and disbursements. From Side 2, Part II, line 18	9	1,796,750	00
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	-486,590	00
<b>Filing Fee</b>	11	Total payments	11		00
	12	Use tax. See General Information K	12		00
	13	Payments balance. If line 11 is more than line 12, subtract line 12 from line 11	13		00
	14	Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12	14		00
	15	Penalties and interest. See General Information J	15		00
	16	<b>Balance due.</b> Add line 12 and line 15. Then subtract line 11 from the result	16		00

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

Signature of officer **DIRECTOR** Title Date **3238720808** Telephone

Preparer's signature **MEI-LI HUANG** Date **05/16/23** Check if self-employed  **P02383735** PTIN

Firm's name (or yours, if self-employed) and address **CLIFTONLARSONALLENLLP** Firm's FEIN **41-0746749**

**2210 EAST ROUTE 66** Telephone **6268577300**  
**GLENDORA, CA 91740**

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

**WOOTEN AVILA LLC**

95-4856901

**Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.**

128951 01-19-22

<b>Receipts from Other Sources</b>	1	Gross sales or receipts from all business activities. See instructions	•	1		00	
	2	Interest	•	2	11,245	00	
	3	Dividends	•	3		00	
	4	Gross rents	•	4	1,298,915	00	
	5	Gross royalties	•	5		00	
	6	Gross amount received from sale of assets (See instructions)	•	6		00	
	7	Other income	•	7		00	
	8	<b>Total</b> gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1	•	8	1,310,160	00	
	9	Contributions, gifts, grants, and similar amounts paid	•	9		00	
	10	Disbursements to or for members	•	10		00	
	11	Compensation of officers, directors, and trustees <b>SEE STATEMENT 1</b>	•	11	0	00	
	12	Other salaries and wages	•	12		00	
	<b>Expenses and Disbursements</b>	13	Interest	•	13	1,057,549	00
		14	Taxes	•	14	12,058	00
		15	Rents	•	15		00
		16	Depreciation and depletion (See instructions)	•	16	724,131	00
		17	Other expenses and disbursements <b>SEE STATEMENT 2</b>	•	17	3,012	00
		18	<b>Total</b> expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	•	18	1,796,750	00

<b>Schedule L Balance Sheet</b>	Beginning of taxable year		End of taxable year	
	(a)	(b)	(c)	(d)
<b>Assets</b>				
1 Cash		2,869,474		2,727,860
2 Net accounts receivable		891		4,935
3 Net notes receivable				
4 Inventories				
5 Federal and state government obligations				
6 Investments in other bonds				
7 Investments in stock				
8 Mortgage loans				
9 Other investments				
10 a Depreciable assets	20,231,712		20,319,013	
b Less accumulated depreciation	( 1,028,537 )	19,203,175	( 1,740,064 )	18,578,949
11 Land		900,000		900,000
12 Other assets <b>STMT 3</b>		3,625		3,625
13 <b>Total assets</b>		22,977,165		22,215,369
<b>Liabilities and net worth</b>				
14 Accounts payable		7,160		
15 Contributions, gifts, or grants payable				
16 Bonds and notes payable		23,578,643		23,375,977
17 Mortgages payable				
18 Other liabilities <b>STMT 4</b>		226,080		235,595
19 Capital stock or principal fund				
20 Paid-in or capital surplus. Attach reconciliation				
21 Retained earnings or income fund		-834,718		-1,396,203
22 <b>Total liabilities and net worth</b>		22,977,165		22,215,369

**Schedule M-1 Reconciliation of income per books with income per return**  
Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000.

1 Net income per books	• -561,485	7 Income recorded on books this year not included in this return. Attach schedule	•
2 Federal income tax	•	8 Deductions in this return not charged against book income this year. Attach schedule	•
3 Excess of capital losses over capital gains	• 74,895	9 Total. Add line 7 and line 8	
4 Income not recorded on books this year. Attach schedule	•	10 Net income per return. Subtract line 9 from line 6	
5 Expenses recorded on books this year not deducted in this return. Attach schedule	•		
6 Total. Add line 1 through line 5	-486,590		-486,590

WOOTEN AVILA LLC

95-4856901

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CA 199                    COMPENSATION OF OFFICERS, DIRECTORS AND TRUSTEES                    STATEMENT 1

---

NAME AND ADDRESS	TITLE AND AVERAGE HRS WORKED/WK	COMPENSATION
MATT BROWN 1846 W. IMPERIAL HWY. LOS ANGELES, CA 90047	CFO 40.00	0.
RAUL CARRANZA 1846 W. IMPERIAL HWY. LOS ANGELES, CA 90047	EXECUTIVE DIRECTOR, PRESID 40.00	0.
J.J. LEWIS 1846 W. IMPERIAL HWY. LOS ANGELES, CA 90047	CHAIR 1.00	0.
JAMES LOBDELL 1846 W. IMPERIAL HWY. LOS ANGELES, CA 90047	SECRETARY 1.00	0.
SPENCER BURROWS 1846 W. IMPERIAL HWY. LOS ANGELES, CA 90047	MEMBER 1.00	0.
AUSTIN DRAGON 1846 W. IMPERIAL HWY. LOS ANGELES, CA 90047	MEMBER 1.00	0.
KELVIN PIAZZA 1846 W. IMPERIAL HWY. LOS ANGELES, CA 90047	MEMBER 1.00	0.
CECILIA SANDOVAL 1846 W. IMPERIAL HWY. LOS ANGELES, CA 90047	MEMBER 1.00	0.
TOTAL TO FORM 199, PART II, LINE 11		<hr/> 0. <hr/>

WOOTEN AVILA LLC

95-4856901

CA 199	OTHER EXPENSES	STATEMENT 2
<u>DESCRIPTION</u>		<u>AMOUNT</u>
OTHER PROFESSIONAL FEES		3,000.
OFFICE EXPENSES		12.
TOTAL TO FORM 199, PART II, LINE 17		<u>3,012.</u>

CA 199	OTHER ASSETS	STATEMENT 3	
<u>DESCRIPTION</u>		<u>BEG. OF YEAR</u>	<u>END OF YEAR</u>
PREPAID EXPENSES AND DEFERRED CHARGES		3,625.	3,625.
TOTAL TO FORM 199, SCHEDULE L, LINE 12		<u>3,625.</u>	<u>3,625.</u>

CA 199	OTHER LIABILITIES	STATEMENT 4	
<u>DESCRIPTION</u>		<u>BEG. OF YEAR</u>	<u>END OF YEAR</u>
INTERCOMPANY PAYABLES		141,967.	148,943.
DEFERRED RENT LIABILITY		56,507.	58,578.
DEFERRED REVENUE		27,606.	28,074.
TOTAL TO FORM 199, SCHEDULE L, LINE 18		<u>226,080.</u>	<u>235,595.</u>

**Certificate Of Completion**

Envelope Id: 34389ABA16A2459C85E3079C7D2BE8C2	Status: Completed
Subject: Tax Return for Wooten Avilia LLC- A140954 - 2021	
Client Name: Wooten Avilia LLC	
Client Number: A140954	
Source Envelope:	
Document Pages: 11	Signatures: 2
Certificate Pages: 5	Initials: 1
AutoNav: Enabled	Envelope Originator:
Envelopeld Stamping: Enabled	CLA Operations
Time Zone: (UTC-06:00) Central Time (US & Canada)	220 S 6th St Ste 300
	Minneapolis, MN 55402-1418
	Erlinda.Tomas@claconnect.com
	IP Address: 144.91.232.178

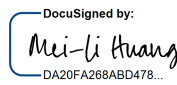
**Record Tracking**

Status: Original	Holder: CLA Operations	Location: DocuSign
5/16/2023 6:40:33 PM	Erlinda.Tomas@claconnect.com	

**Signer Events**

Mei-Li Huang  
Lili.Huang@claconnect.com  
Business Assurance Principal  
CLA  
Security Level: Email, Account Authentication (None)

**Signature**


DocuSigned by:  
  
DA20FA268ABD478...  
Signature Adoption: Pre-selected Style  
Using IP Address: 75.140.22.46  
Signed using mobile

**Timestamp**

Sent: 5/16/2023 6:42:11 PM  
Viewed: 5/16/2023 11:36:20 PM  
Signed: 5/16/2023 11:36:35 PM

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Not Offered via DocuSign

Matt Brown  
mbrown@teachpublicschools.org  
CFO/COO  
Security Level: Email, Account Authentication (None), Access Code

DocuSigned by:  
  
C74C49325FB1478...  
Signature Adoption: Pre-selected Style  
Using IP Address: 98.184.228.61

Sent: 5/16/2023 11:36:36 PM  
Viewed: 5/17/2023 12:10:55 PM  
Signed: 5/17/2023 12:11:03 PM

**Electronic Record and Signature Disclosure:**  
Accepted: 5/17/2023 12:10:55 PM  
ID: e06a925f-1e7d-463f-ad17-95ef9392d65b

In Person Signer Events	Signature	Timestamp
Editor Delivery Events	Status	Timestamp
Agent Delivery Events	Status	Timestamp
Intermediary Delivery Events	Status	Timestamp
Certified Delivery Events	Status	Timestamp
Carbon Copy Events	Status	Timestamp
Witness Events	Signature	Timestamp
Notary Events	Signature	Timestamp
Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	5/16/2023 6:42:11 PM

<b>Envelope Summary Events</b>	<b>Status</b>	<b>Timestamps</b>
Certified Delivered	Security Checked	5/17/2023 12:10:55 PM
Signing Complete	Security Checked	5/17/2023 12:11:03 PM
Completed	Security Checked	5/17/2023 12:11:03 PM

<b>Payment Events</b>	<b>Status</b>	<b>Timestamps</b>
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<b>Electronic Record and Signature Disclosure</b>
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At any time, you may request from us a paper copy of any record provided or made available electronically to you by us. You will have the ability to download and print documents we send to you through the DocuSign system during and immediately after the signing session and, if you elect to create a DocuSign account, you may access the documents for a limited period of time (usually 30 days) after such documents are first sent to you. After such time, if you wish for us to send you paper copies of any such documents from our office to you, you will be charged a \$0.00 per-page fee. You may request delivery of such paper copies from us by following the procedure described below.

### **Withdrawing your consent**

If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

### **Consequences of changing your mind**

If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. Further, you will no longer be able to use the DocuSign system to receive required notices and consents electronically from us or to sign electronically documents from us.

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Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

### **How to contact CliftonLarsonAllen LLP:**

You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:

To contact us by email send messages to: [BusinessTechnology@CLAconnect.com](mailto:BusinessTechnology@CLAconnect.com)

### **To advise CliftonLarsonAllen LLP of your new email address**

To let us know of a change in your email address where we should send notices and disclosures electronically to you, you must send an email message to us at [BusinessTechnology@CLAconnect.com](mailto:BusinessTechnology@CLAconnect.com) and in the body of such request you must state: your previous email address, your new email address. We do not require any other information from you to change your email address.

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To inform us that you no longer wish to receive future notices and disclosures in electronic format you may:



i. decline to sign a document from within your signing session, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may;

ii. send us an email to [BusinessTechnology@CLAconnect.com](mailto:BusinessTechnology@CLAconnect.com) and in the body of such request you must state your email, full name, mailing address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

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To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please confirm that you have read this ERSD, and (i) that you are able to print on paper or electronically save this ERSD for your future reference and access; or (ii) that you are able to email this ERSD to an email address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format as described herein, then select the check-box next to ‘I agree to use electronic records and signatures’ before clicking ‘CONTINUE’ within the DocuSign system.

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- You can access and read this Electronic Record and Signature Disclosure; and
- You can print on paper this Electronic Record and Signature Disclosure, or save or send this Electronic Record and Disclosure to a location where you can print it, for future reference and access; and
- Until or unless you notify CliftonLarsonAllen LLP as described above, you consent to receive exclusively through electronic means all notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you by CliftonLarsonAllen LLP during the course of your relationship with CliftonLarsonAllen LLP.



## Instructions

Included in this DocuSign are the assembled copies of the filings for the organization's records as follows:

1. **Internal Copy:** Includes all letters, instructions, and return pages without any redaction. Please review this file, sign, and date where indicated and submit back to CLA.
2. **Public Inspection Copy:** Redacted to just the information that is required for public inspection. If anyone from the public were to request a copy of the return or if the return were to be posted, the Public Inspection Copy should be used.

Please note:

After the documents have been e-signed and you click 'Finish' - DocuSign will give you the option to log-in - you can log-in at that time and download the executed documents; alternatively, DocuSign will send you another email indicating that the documents have been 'finished' and you can click that link to download and/or print the documents. **Downloading is important as you will not be receiving a paper copy. You have 120 days to download.**

CLA cannot e-file any return until its signed e-file authorization is returned to CLA.

CLA does recommend all returns included in each PDF be signed and dated for your records.

CLA is not making any payments as part of the e-file or submitting any paper returns on your behalf.

Please initial to indicate that you have read and understand the above:

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[CLAconnect.com](https://www.claconnect.com)

CPAs | CONSULTANTS | WEALTH ADVISORS

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Investment advisory services are offered through CliftonLarsonAllen Wealth Advisors, LLC, an SEC-registered investment advisor.





CliftonLarsonAllen LLP  
CLAconnect.com

**TEACH, INC.**  
**FORM 990 INCOME TAX RETURN**  
**FOR YEAR ENDED JUNE 30, 2022**



CliftonLarsonAllen LLP  
CLAconnect.com

May 16, 2023

TEACH, INC.  
10600 S. Western Ave.  
LOS ANGELES, CA 90047

TEACH, INC.:

Enclosed is the organization's 2021 Exempt Organization return.

Specific filing instructions are as follows.

### **FORM 990 RETURN:**

This return has qualified for electronic filing. After you have reviewed the return for completeness and accuracy, please sign, date and return Form 8879-TE to our office. We will transmit the return electronically to the IRS and no further action is required. Please return Form 8879-TE to us as soon as possible, but no later than as soon as possible the filing deadline.

In addition, tax-exempt organizations must make available for public inspection a copy of their annual returns for the preceding three years and exemption application, if applicable. An organization generally must furnish filings to anyone who requests them in person or in writing. An exempt organization may meet this requirement by posting all the documents on its website or at another organizations site as part of a database of similar materials. Specific requirements must be met to meet this exception.

### **CALIFORNIA FORM 199 RETURN:**

The California Form 199 return has qualified for electronic filing. After you have reviewed your return for completeness and accuracy, please sign, date and return Form 8453-EO to our office. We will then transmit your return to the FTB. Do not mail the paper copy of the return to the FTB.

No payment is required.

### **A few final reminders relating to your tax return filings:**

- There are substantial penalties for failure to properly disclose and report foreign financial accounts and foreign activity. Please make sure you have informed us of any foreign financial accounts or foreign activity so that we have the necessary information to complete any required disclosures or filings.
- Be sure to review the returns prior to signing as you have final responsibility for all information included in the returns. Please contact us if you have any questions or concerns.
- We recommend you keep a paper or electronic copy of your tax returns permanently. Supporting documentation should be kept for a minimum of seven years based on IRS guidance.

CLA exists to create opportunities – for our clients, our people, and our communities. We value our relationship with you and thank you for your trust and confidence in allowing us to serve you. If we can assist you in making strategic, informed decisions in areas of tax or beyond, please contact us as questions arise throughout the year.

Sincerely,

CliftonLarsonAllen LLP

Form **8879-TE**

# IRS e-file Signature Authorization for a Tax Exempt Entity

OMB No. 1545-0047

For calendar year 2021, or fiscal year beginning JUL 1, 2021, and ending JUN 30, 2022

# 2021

Department of the Treasury  
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**  
▶ **Go to [www.irs.gov/Form8879TE](http://www.irs.gov/Form8879TE) for the latest information.**

Name of filer **TEACH, INC.** EIN or SSN **95-4856901**

Name and title of officer or person subject to tax **MATT BROWN  
CFO**

### Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not complete more than one line in Part I.**

<b>1a</b> Form 990 check here <input checked="" type="checkbox"/>	<b>b Total revenue</b> , if any (Form 990, Part VIII, column (A), line 12) .....	<b>1b</b> <u>21,986,650.</u>
<b>2a</b> Form 990-EZ check here <input type="checkbox"/>	<b>b Total revenue</b> , if any (Form 990-EZ, line 9) .....	<b>2b</b> _____
<b>3a</b> Form 1120-POL check here <input type="checkbox"/>	<b>b Total tax</b> (Form 1120-POL, line 22) .....	<b>3b</b> _____
<b>4a</b> Form 990-PF check here <input type="checkbox"/>	<b>b Tax based on investment income</b> (Form 990-PF, Part V, line 5) .....	<b>4b</b> _____
<b>5a</b> Form 8868 check here <input type="checkbox"/>	<b>b Balance due</b> (Form 8868, line 3c) .....	<b>5b</b> _____
<b>6a</b> Form 990-T check here <input type="checkbox"/>	<b>b Total tax</b> (Form 990-T, Part III, line 4) .....	<b>6b</b> _____
<b>7a</b> Form 4720 check here <input type="checkbox"/>	<b>b Total tax</b> (Form 4720, Part III, line 1) .....	<b>7b</b> _____
<b>8a</b> Form 5227 check here <input type="checkbox"/>	<b>b FMV of assets at end of tax year</b> (Form 5227, Item D) .....	<b>8b</b> _____
<b>9a</b> Form 5330 check here <input type="checkbox"/>	<b>b Tax due</b> (Form 5330, Part II, line 19) .....	<b>9b</b> _____
<b>10a</b> Form 8038-CP check here <input type="checkbox"/>	<b>b Amount of credit payment requested</b> (Form 8038-CP, Part III, line 22) .....	<b>10b</b> _____

### Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that  I am an officer of the above entity or  I am a person subject to tax with respect to (name of entity) \_\_\_\_\_, (EIN) \_\_\_\_\_ and that I have examined a copy of the 2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

**PIN: check one box only**

I authorize CLIFTONLARSONALLEN LLP to enter my PIN 90044  
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax Matt Brown Date 5/17/2023

### Part III Certification and Authentication

**ERO's EFIN/PIN.** Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

**95405291740**  
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature MEI-LI HUANG Date 05/16/23

**ERO Must Retain This Form - See Instructions**  
**Do Not Submit This Form to the IRS Unless Requested To Do So**

LHA For Privacy act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE** (2021)

Form **990**

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

**2021**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

**A** For the 2021 calendar year, or tax year beginning **JUL 1, 2021** and ending **JUN 30, 2022**


<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>TEACH, INC.</b> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>10600 S. WESTERN AVE.</b> City or town, state or province, country, and ZIP or foreign postal code <b>LOS ANGELES, CA 90047</b>		<b>D</b> Employer identification number  <b>95-4856901</b>
	<b>F</b> Name and address of principal officer: <b>MILDRED CUNNINGHAM</b> <b>SAME AS C ABOVE</b>		<b>E</b> Telephone number <b>323-777-2068</b>
	<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>G</b> Gross receipts \$ <b>21,986,650.</b>
	<b>J</b> Website: <b>WWW.TEACHPUBLICSCHOOLS.ORG</b>		<b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions <b>H(c)</b> Group exemption number <b>▶</b>
	<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other <b>▶</b>		<b>L</b> Year of formation: <b>2001</b> <b>M</b> State of legal domicile: <b>CA</b>

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>TO CREATE, MANAGE, OPERATE, GUIDE, DIRECT AND PROMOTE ONE OR MORE PUBLIC CHARTER SCHOOLS.</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>6</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>6</b>
	<b>5</b> Total number of individuals employed in calendar year 2021 (Part V, line 2a)	<b>5</b>	<b>136</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>7</b>
	<b>7 a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<b>0.</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>17,883,693.</b>	<b>21,966,157.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>0.</b>	<b>0.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>20,772.</b>	<b>17,778.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>0.</b>	<b>2,715.</b>
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>17,904,465.</b>	<b>21,986,650.</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	<b>0.</b>	<b>0.</b>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>0.</b>	<b>0.</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	<b>6,484,535.</b>	<b>8,674,911.</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <b>▶ 0.</b>	<b>0.</b>	<b>0.</b>
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<b>6,683,468.</b>	<b>8,757,023.</b>
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>13,168,003.</b>	<b>17,431,934.</b>
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>4,736,462.</b>	<b>4,554,716.</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26)	<b>46,053,689.</b>	<b>51,573,714.</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>37,048,010.</b>	<b>38,143,589.</b>
		<b>9,005,679.</b>	<b>13,430,125.</b>

**Part II Signature Block**

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

<b>Sign Here</b>	DocuSigned by:  Signature of officer	Date <b>5/17/2023</b>			
	Type or print name and title <b>MATT BROWN, CFO</b>				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>MEI-LI HUANG</b>	Preparer's signature <b>MEI-LI HUANG</b>	Date <b>05/16/23</b>	Check if self-employed <input type="checkbox"/>	PTIN <b>P02383735</b>
	Firm's name <b>▶ CLIFTONLARSONALLEN LLP</b> Firm's address <b>▶ 2210 EAST ROUTE 66 GLENDORA, CA 91740</b>	Firm's EIN <b>▶ 41-0746749</b>		Phone no. (626) 857-7300	

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

Form 990 (2021)

TEACH, INC.

95-4856901

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Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: TO CREATE A HIGH QUALITY, INNOVATIVE TEACHING AND LEARNING ENVIRONMENT THAT FOCUSES ON LITERACY, INTEGRATING STATE-OF-THE-ART TECHNOLOGIES ACROSS THE CORE CURRICULUM TO ACHIEVE ACADEMIC PROFICIENCY FOR ALL STUDENTS.

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 No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

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

4a (Code: ) (Expenses \$ 10,897,771. including grants of \$ ) (Revenue \$ 2,715. ) TO OPERATE PUBLIC CHARTER SCHOOLS PROVIDING EDUCATIONAL OPPORTUNITIES TO THE SURROUNDING COMMUNITIES. DURING THE YEAR ENDED JUNE 30, 2022, THE ORGANIZATION OPERATED 3 CHARTER SCHOOL SERVING APPROXIMATELY 1,148 STUDENTS IN GRADES TK-3RD AND GRADES 5TH- 12TH.

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 10,897,771.

Form 990 (2021)



**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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		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)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	X	
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>		X

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

	Yes	No
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....		X
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....	X	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....	X	
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		X
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		X
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		X
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>26</b> Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....	X	
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....	X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....	X	
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
<b>38</b> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? .....	X	

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

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

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

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

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

		Yes	No
<b>2a</b>	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		136
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	X	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		
<b>4a</b>	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)?		X
<b>b</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).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	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?		X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	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?		X
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>8</b>	<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?		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966?		
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	10a	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders	11a	
<b>b</b>	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.		
<b>b</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	13b	
<b>c</b>	Enter the amount of reserves on hand	13c	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?		X
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		
<b>15</b>	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.		X
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		X
<b>17</b>	<b>Section 501(c)(21) organizations.</b> Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.		

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

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
<b>1b</b>	Enter the number of voting members included on line 1a, above, who are independent		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?		X
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
<b>7b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>8a</b>	The governing body?	X	
<b>8b</b>	Each committee with authority to act on behalf of the governing body?		X
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

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

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		X
<b>10b</b>	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
<b>11b</b>	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
<b>12b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>12c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
<b>13</b>	Did the organization have a written whistleblower policy?	X	
<b>14</b>	Did the organization have a written document retention and destruction policy?	X	
<b>15</b>	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
<b>15a</b>	The organization's CEO, Executive Director, or top management official	X	
<b>15b</b>	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>16b</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website  Another's website  Upon request  Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **MATT BROWN - 323-777-2068**  
**1600 S. WESTERN AVE., LOS ANGELES, CA 90047**

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

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

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

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
  - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
  - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
  - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) RAUL CARRANZA EXECUTIVE DIRECTOR	40.00			X				199,557.	0.	59,278.
(2) MATT BROWN CFO	40.00			X				195,725.	0.	54,048.
(3) J.J. LEWIS CHAIR	1.00	X		X				0.	0.	0.
(4) JAMES LOBDELL SECRETARY	1.00	X		X				0.	0.	0.
(5) SPENCER BURROWS MEMBER	1.00	X						0.	0.	0.
(6) AUSTIN DRAGON MEMBER	1.00	X						0.	0.	0.
(7) KELVIN PIAZZA MEMBER	1.00	X						0.	0.	0.
(8) CECILIA SANDOVAL MEMBER	1.00	X						0.	0.	0.



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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
<b>1b Subtotal</b> .....							395,282.	0.	113,326.	
<b>c Total from continuation sheets to Part VII, Section A</b> .....							0.	0.	0.	
<b>d Total (add lines 1b and 1c)</b> .....							395,282.	0.	113,326.	

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **5**

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

**Part VIII Statement of Revenue**

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	<b>1 a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>					
	<b>c</b> Fundraising events	<b>1c</b>					
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>	21,913,726.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	52,431.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$				
	<b>h Total.</b> Add lines 1a-1f			21,966,157.			
Program Service Revenue	<b>2 a</b>	<b>Business Code</b>					
	<b>b</b>						
	<b>c</b>						
	<b>d</b>						
	<b>e</b>						
	<b>f</b> All other program service revenue						
	<b>g Total.</b> Add lines 2a-2f						
Other Revenue	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		17,778.			17,778.	
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties						
	<b>6 a</b> Gross rents	<b>6a</b>	(i) Real				
			(ii) Personal				
	<b>b</b> Less: rental expenses	<b>6b</b>					
	<b>c</b> Rental income or (loss)	<b>6c</b>					
	<b>d</b> Net rental income or (loss)						
	<b>7 a</b> Gross amount from sales of assets other than inventory	<b>7a</b>	(i) Securities				
			(ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses	<b>7b</b>					
	<b>c</b> Gain or (loss)	<b>7c</b>					
<b>d</b> Net gain or (loss)							
<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	<b>8a</b>						
<b>b</b> Less: direct expenses	<b>8b</b>						
<b>c</b> Net income or (loss) from fundraising events							
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>9a</b>						
<b>b</b> Less: direct expenses	<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities							
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>						
<b>b</b> Less: cost of goods sold	<b>10b</b>						
<b>c</b> Net income or (loss) from sales of inventory							
Miscellaneous Revenue	<b>11 a</b> OTHER FEES AND CONTRACTS	<b>Business Code</b>	611710	2,715.	2,715.		
	<b>b</b>						
	<b>c</b>						
	<b>d</b> All other revenue						
	<b>e Total.</b> Add lines 11a-11d			2,715.			
<b>12 Total revenue.</b> See instructions			21,986,650.	2,715.	0.	17,778.	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...				
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 .....				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .....				
<b>4</b> Benefits paid to or for members .....				
<b>5</b> Compensation of current officers, directors, trustees, and key employees .....	536,742.	472,331.	64,411.	
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
<b>7</b> Other salaries and wages .....	6,495,637.	4,693,346.	1,802,291.	
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) .....	865,626.	662,376.	203,250.	
<b>9</b> Other employee benefits .....	464,897.	325,985.	138,912.	
<b>10</b> Payroll taxes .....	312,009.	226,226.	85,783.	
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management .....	113,193.		113,193.	
<b>b</b> Legal .....	21,242.		21,242.	
<b>c</b> Accounting .....	39,270.		39,270.	
<b>d</b> Lobbying .....				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees .....				
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	3,182,786.	3,102,749.	80,037.	
<b>12</b> Advertising and promotion .....	22,765.		22,765.	
<b>13</b> Office expenses .....	359,287.		359,287.	
<b>14</b> Information technology .....				
<b>15</b> Royalties .....				
<b>16</b> Occupancy .....	616,853.	242,608.	374,245.	
<b>17</b> Travel .....	33,430.		33,430.	
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
<b>19</b> Conferences, conventions, and meetings .....				
<b>20</b> Interest .....	1,790,680.		1,790,680.	
<b>21</b> Payments to affiliates .....				
<b>22</b> Depreciation, depletion, and amortization .....	1,272,987.	116,845.	1,156,142.	
<b>23</b> Insurance .....	172,729.		172,729.	
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
<b>a</b> <u>INSTRUCTIONAL MATERIALS</u> .....	1,075,214.	1,055,305.	19,909.	
<b>b</b> <u>OTHER EXPENSES</u> .....	56,587.		56,587.	
<b>c</b> _____				
<b>d</b> _____				
<b>e</b> All other expenses _____				
<b>25</b> <b>Total functional expenses.</b> Add lines 1 through 24e	17,431,934.	10,897,771.	6,534,163.	0.
<b>26</b> <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here  if following SOP 98-2 (ASC 958-720)



**Part X Balance Sheet**

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

		(A)		(B)	
		Beginning of year		End of year	
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	5,626,930.	<b>1</b>	11,927,498.	
	<b>2</b> Savings and temporary cash investments .....	3,679,350.	<b>2</b>	3,491,712.	
	<b>3</b> Pledges and grants receivable, net .....	4,281,698.	<b>3</b>	3,957,902.	
	<b>4</b> Accounts receivable, net .....	746,090.	<b>4</b>	1,443,385.	
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>		
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>		
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>		
	<b>8</b> Inventories for sale or use .....		<b>8</b>		
	<b>9</b> Prepaid expenses and deferred charges .....	264,686.	<b>9</b>	192,763.	
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 34,774,290.			
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 4,213,836.			
	<b>11</b> Investments - publicly traded securities .....	31,454,935.	<b>10c</b>	30,560,454.	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>11</b>		
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>12</b>		
	<b>14</b> Intangible assets .....		<b>13</b>		
	<b>15</b> Other assets. See Part IV, line 11 .....		<b>14</b>		
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	46,053,689.	<b>15</b>	51,573,714.		
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	715,574.	<b>16</b>	1,978,469.	
	<b>18</b> Grants payable .....		<b>17</b>		
	<b>19</b> Deferred revenue .....	726,595.	<b>18</b>	970,031.	
	<b>20</b> Tax-exempt bond liabilities .....	35,344,197.	<b>19</b>	35,006,637.	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>20</b>		
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>21</b>		
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>22</b>		
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....	261,644.	<b>23</b>	188,452.	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....		<b>24</b>		
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	37,048,010.	<b>25</b>	38,143,589.	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>				
	<b>27</b> Net assets without donor restrictions .....	9,005,679.		13,430,125.	
	<b>28</b> Net assets with donor restrictions .....				
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>				
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>27</b>		
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>28</b>		
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>29</b>		
	<b>32</b> Total net assets or fund balances .....	9,005,679.	<b>30</b>	13,430,125.	
	<b>33</b> Total liabilities and net assets/fund balances .....	46,053,689.	<b>31</b>	51,573,714.	

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	21,986,650.
2	Total expenses (must equal Part IX, column (A), line 25)	2	17,431,934.
3	Revenue less expenses. Subtract line 2 from line 1	3	4,554,716.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	9,005,679.
5	Net unrealized gains (losses) on investments	5	-130,270.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	13,430,125.

**Part XII Financial Statements and Reporting**

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		X
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____	X	
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____	X	

Form 990 (2021)

**SCHEDULE A**  
**(Form 990)**

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

OMB No. 1545-0047

**2021**

Open to Public Inspection

Name of the organization **TEACH, INC.** Employer identification number **95-4856901**

**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

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

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

**Section A. Public Support**

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

**Section B. Total Support**

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

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

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

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> 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 .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

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

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

<b>15</b> Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2020 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2020 Schedule A, Part III, line 17 .....	<b>18</b>	%

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

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

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

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

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



**Part IV Supporting Organizations** (continued)

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

**Section B. Type I Supporting Organizations**

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

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

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

	Yes	No
<b>1</b> Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
<b>2</b> Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>3</b> By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

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

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
<b>2</b> Activities Test. Answer lines 2a and 2b below.		
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
<b>b</b> Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.		
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i>		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		



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

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

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

Schedule A (Form 990) 2021

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

Multiple horizontal lines for supplemental information.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization TEACH, INC. Employer identification number 95-4856901

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 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 donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? (Yes/No), 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? (Yes/No)

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

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year (2a Total number of conservation easements, 2b Total acreage restricted by conservation easements, 2c Number of conservation easements on a certified historic structure included in (a), 2d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register), 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? (Yes/No), 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? (Yes/No), 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

Table with 2 columns: \$. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1, b Assets included in Form 990, Part X.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2021

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

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

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

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

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

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

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

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		4,180,111.		4,180,111.
b Buildings		27,353,483.	3,347,629.	24,005,854.
c Leasehold improvements		925,022.	473,746.	451,276.
d Equipment		771,279.	392,461.	378,818.
e Other		1,544,395.		1,544,395.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				30,560,454.

Schedule D (Form 990) 2021

**TEACH, INC.**

95-4856901 Page **3**

**Part VII Investments - Other Securities.**

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

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

**Part VIII Investments - Program Related.**

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

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

**Part IX Other Assets.**

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

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

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

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

Schedule D (Form 990) 2021

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

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

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

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

**Part XIII Supplemental Information.**

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

**PART X, LINE 2:**

THE ORGANIZATION IS A NONPROFIT ENTITY EXEMPT FROM THE PAYMENT OF INCOME TAXES UNDER INTERNAL REVENUE CODE SECTION 501(C)(3) AND CALIFORNIA REVENUE AND TAXATION CODE SECTION 23701D. ACCORDINGLY, NO PROVISION HAS BEEN MADE FOR INCOME TAXES. MANAGEMENT HAS DETERMINED THAT ALL INCOME TAX POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED UPON POTENTIAL AUDIT OR EXAMINATION; THEREFORE, NO DISCLOSURES OF UNCERTAIN INCOME TAX POSITIONS ARE REQUIRED. THE SCHOOL IS SUBJECT TO INCOME TAX ON NET INCOME THAT IS DERIVED FROM BUSINESS ACTIVITIES THAT ARE UNRELATED TO THE EXEMPT PURPOSES. THE SCHOOL FILES AN EXEMPT SCHOOL RETURN AND APPLICABLE UNRELATED BUSINESS INCOME TAX RETURN IN THE U.S. FEDERAL JURISDICTION AND WITH THE CALIFORNIA FRANCHISE TAX BOARD.

**Part XIII Supplemental Information** *(continued)*

Multiple horizontal lines for supplemental information.

**SCHEDULE E**  
**(Form 990)**

**Schools**

OMB No. 1545-0047

**2021**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

▶ **Attach to Form 990 or Form 990-EZ.**

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

Name of the organization

**TEACH, INC.**

Employer identification number

**95-4856901**

**Part I**

	YES	NO
1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? .....	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3 Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at all times during its taxable year in a manner reasonably expected to be noticed by visitors to the homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II .....	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>THE SCHOOL PUBLICIZES ITS POLICY IN ITS REGISTRATION MATERIALS AND DOCUMENTS USED TO SOLICIT STUDENTS.</b>		
4 Does the organization maintain the following?		
a Records indicating the racial composition of the student body, faculty, and administrative staff? .....	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? .....	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d Copies of all material used by the organization or on its behalf to solicit contributions? .....	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If you answered "No" to any of the above, please explain. If you need more space, use Part II.		
<b>TEACH INC DOES NOT OFFER FINANCIAL ASSISTANCE.</b>		
5 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Admissions policies? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c Employment of faculty or administrative staff? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d Scholarships or other financial assistance? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e Educational policies? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f Use of facilities? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g Athletic programs? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h Other extracurricular activities? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.		
6a Does the organization receive any financial aid or assistance from a governmental agency? .....	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b Has the organization's right to such aid ever been revoked or suspended? .....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If you answered "Yes" on either line 6a or line 6b, explain on Part II.		
7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II .....	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Schedule E (Form 990) 2021



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

**LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:**

TEACH INC. IS A PUBLIC CHARTER SCHOOL PRINCIPALLY FUNDED BY CALIFORNIA AND FEDERAL MONIES RECEIVED THROUGH THE CALIFORNIA DEPARTMENT OF EDUCATION

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

**2021**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

Name of the organization

**TEACH, INC.**

Employer identification number

**95-4856901**

**Part I Questions Regarding Compensation**

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Schedule J (Form 990) 2021

Schedule J (Form 990) 2021

**TEACH, INC.**

**95-4856901**

Page **2**

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) RAUL CARRANZA EXECUTIVE DIRECTOR	(i)	199,557.	0.	0.	7,323.	51,955.	258,835.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MATT BROWN CFO	(i)	195,725.	0.	0.	9,492.	44,556.	249,773.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							



**SCHEDULE K  
(Form 990)**  
Department of the Treasury  
Internal Revenue Service

**Supplemental Information on Tax-Exempt Bonds**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.**  
▶ **Attach to Form 990.** ▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2021**  
**Open to Public Inspection**

Name of the organization **TEACH, INC.** Employer identification number **95-4856901**

<b>Part I Bond Issues</b>											
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
<b>A</b> CALIFORNIA SCHOOL FINANCE AUTHORITY	20-1563466	13058TDZ0	11/02/16	12530000.	FACILITY FINANCING		X		X		X
<b>B</b> CALIFORNIA SCHOOL FINANCE AUTHORITY	20-1563466	13058THM5	12/31/19	22310000.	FACILITY FINANCING		X		X		X
<b>C</b>											
<b>D</b>											

<b>Part II Proceeds</b>										
	A		B		C		D			
<b>1</b> Amount of bonds retired	460,000.		290,000.							
<b>2</b> Amount of bonds legally defeased										
<b>3</b> Total proceeds of issue	12,333,635.		24,119,688.							
<b>4</b> Gross proceeds in reserve funds	817,090.		1,694,376.							
<b>5</b> Capitalized interest from proceeds										
<b>6</b> Proceeds in refunding escrows										
<b>7</b> Issuance costs from proceeds	285,503.		629,101.							
<b>8</b> Credit enhancement from proceeds										
<b>9</b> Working capital expenditures from proceeds										
<b>10</b> Capital expenditures from proceeds	11,066,510.		21,219,014.							
<b>11</b> Other spent proceeds										
<b>12</b> Other unspent proceeds										
<b>13</b> Year of substantial completion	2017		2022							
	Yes	No	Yes	No	Yes	No	Yes	No		
<b>14</b> Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?		X		X						
<b>15</b> Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		X		X						
<b>16</b> Has the final allocation of proceeds been made?		X		X						
<b>17</b> Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X							

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

Schedule K (Form 990) 2021

<b>Part III Private Business Use</b>								
	<b>A</b>		<b>B</b>		<b>C</b>		<b>D</b>	
	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>
<b>1</b> Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds? .....	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>					
<b>2</b> Are there any lease arrangements that may result in private business use of bond-financed property? .....		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				
<b>3a</b> Are there any management or service contracts that may result in private business use of bond-financed property? .....		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				
<b>b</b> If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
<b>c</b> Are there any research agreements that may result in private business use of bond-financed property? .....		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				
<b>d</b> If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? ...								
<b>4</b> Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government .....		%		%		%		%
<b>5</b> Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government .....		%		%		%		%
<b>6</b> Total of lines 4 and 5 .....		%		%		%		%
<b>7</b> Does the bond issue meet the private security or payment test? .....		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				
<b>8a</b> Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				
<b>b</b> If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of .....		%		%		%		%
<b>c</b> If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2? .....								
<b>9</b> Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2? .....	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>					

<b>Part IV Arbitrage</b>								
	<b>A</b>		<b>B</b>		<b>C</b>		<b>D</b>	
	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>
<b>1</b> Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate? .....		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				
<b>2</b> If "No" to line 1, did the following apply?								
<b>a</b> Rebate not due yet? .....		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				
<b>b</b> Exception to rebate? .....		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				
<b>c</b> No rebate due? .....		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed .....								
<b>3</b> Is the bond issue a variable rate issue? .....		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				



**SCHEDULE O  
(Form 990)**Department of the Treasury  
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**2021**Open to Public  
Inspection

Name of the organization

TEACH, INC.

Employer identification number

95-4856901

FORM 990, PART VI, SECTION A, LINE 8B:

THE ORGANIZATION HAS NO COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE BOARD.

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

THE FORM 990 IS PREPARED BY THE ORGANIZATION'S OUTSIDE PUBLIC ACCOUNTING FIRM BASED ON INFORMATION PROVIDED BY MANAGEMENT. ONCE A DRAFT OF THE RETURN IS AVAILABLE, IT IS REVIEWED BY MANAGEMENT WITH ANY CHANGES OR REVISIONS INCORPORATED INTO THE FILING. THE REVISED RETURN IS THEN SUBMITTED TO THE BOARD OF DIRECTORS FOR THEIR REVIEW AND APPROVAL PRIOR TO SUBMITTING TO THE IRS.

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

MONITORING IS PERFORMED REGULARLY BY THE OFFICERS TO IDENTIFY POTENTIAL CONFLICTS OF INTEREST. THE BOARD OR DESIGNATED COMMITTEE REVIEWS ANY CONFLICTS PRESENTED BY INTERESTED PARTIES. THE CHAIRPERSON APPOINTS A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE THE TRANSACTION IN QUESTION AND REPORT FINDINGS TO THE BOARD. ALTERNATIVES TO THE PROPOSED TRANSACTION ARE IDENTIFIED AND COMPARED TO THE PROPOSED TRANSACTION. THE BOARD VOTES ON THE MOST BENEFICIAL OPTION FOR THE ORGANIZATION. IF THE BOARD HAS REASON TO BELIEVE AN INTEREST PERSON HAS FAILED TO DISCLOSE THE POTENTIAL CONFLICT, THE BOARD WILL INVESTIGATE FURTHER AND IF NECESSARY, TAKE APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION.

FORM 990, PART VI, SECTION B, LINE 15:

THE EXECUTIVE DIRECTOR'S PAY IS DETERMINED BASED ON DATA PROVIDED BY

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

Schedule O (Form 990) 2021

132211 11-11-21



Name of the organization <b>TEACH, INC.</b>	Employer identification number <b>95-4856901</b>
--	---

**EXTERNAL CHARTER MANAGEMENT ORGANIZATIONS AND THROUGH COMPARISON STUDIES OF OTHER CHARTER SCHOOLS. THE BOARD MUST VOTE TO APPROVE THE EXECUTIVE DIRECTOR'S COMPENSATION AS A DIRECT ACTION. THE OFFICERS' AND KEY EMPLOYEES' PAY IS DETERMINE BASED ON DATA PROVIDED BY EXTERNAL CHARTER MANAGEMENT ORGANIZATIONS AND THROUGH COMPARISON STUDIES OF OTHER CHARTER SCHOOLS. THE BOARD MUST VOTE TO APPROVE THE OFFICERS' AND KEY EMPLOYEES' COMPENSATION AS A DIRECT ACTION.**

**FORM 990, PART VI, SECTION C, LINE 19:  
THE DOCUMENTS ARE READILY AVAILABLE TO THE PUBLIC UPON REQUEST.**

**FORM 990, PART IX, LINE 11G, OTHER FEES:**

**OTHER FEES FOR SERVICES:**

<b>PROGRAM SERVICE EXPENSES</b>	<b>3,102,749.</b>
<b>MANAGEMENT AND GENERAL EXPENSES</b>	<b>80,037.</b>
<b>FUNDRAISING EXPENSES</b>	<b>0.</b>
<b>TOTAL EXPENSES</b>	<b>3,182,786.</b>
<b>TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A</b>	<b>3,182,786.</b>

**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**

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

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

OMB No. 1545-0047

**2021**

Open to Public Inspection

Name of the organization **TEACH, INC.** Employer identification number **95-4856901**

**Part I Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
CUNNINGHAM AND MORRIS LLC - 95-4856901 10000 S. WESTERN AVE LOS ANGELES, CA 90047	FACILITIES	CALIFORNIA	812,586.	10,786,319.	TEACH INC.
WOOTEN AVILA LLC - 95-4856901 1846 W IMPERIAL HWY LOS ANGELES, CA 90047	FACILITIES	CALIFORNIA	1,235,265.	22,215,369.	TEACH INC.

**Part II Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
TEACH INC. FOUNDATION - 84-2571026 1846 W IMPERIAL HWY LOS ANGELES, CA 90047	SUPPORTING ORGANIZATION	CALIFORNIA	501(C)(3)	LINE 12A, I	TEACH INC.	X	

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

Schedule R (Form 990) 2021

**Part III Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity .....		X
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....		X
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....		X
<b>d</b> Loans or loan guarantees to or for related organization(s) .....		X
<b>e</b> Loans or loan guarantees by related organization(s) .....		X
<b>f</b> Dividends from related organization(s) .....		X
<b>g</b> Sale of assets to related organization(s) .....		X
<b>h</b> Purchase of assets from related organization(s) .....		X
<b>i</b> Exchange of assets with related organization(s) .....		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....		X
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....		X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....		X
<b>o</b> Sharing of paid employees with related organization(s) .....		X
<b>p</b> Reimbursement paid to related organization(s) for expenses .....		X
<b>q</b> Reimbursement paid by related organization(s) for expenses .....		X
<b>r</b> Other transfer of cash or property to related organization(s) .....		X
<b>s</b> Other transfer of cash or property from related organization(s) .....		X

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			



**Part VII Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

Multiple horizontal lines for supplemental information.

TAXABLE YEAR  
**2021**

# California Exempt Organization Annual Information Return

128941 12-29-21  
FORM

**199**

Calendar Year 2021 or fiscal year beginning (mm/dd/yyyy) **07/01/2021**, and ending (mm/dd/yyyy) **06/30/2022**

Corporation/Organization name **TEACH, INC.** California corporation number **2301528**

Additional information. See instructions. FEIN **95-4856901**

Street address (suite or room) **10600 S. WESTERN AVE.** PMB no.

City **LOS ANGELES** State **CA** ZIP code **90047**

Foreign country name Foreign province/state/county Foreign postal code

**A** First return  Yes  No  
**B** Amended return  Yes  No  
**C** IRC Section 4947(a)(1) trust  Yes  No  
**D** Final information return?  
 Dissolved  Surrendered (Withdrawn)  Merged/Reorganized  
 Enter date: (mm/dd/yyyy) \_\_\_\_\_  
**E** Check accounting method: (1)  Cash (2)  Accrual (3)  Other  
**F** Federal return filed? (1)  990T (2)  990PF (3)  Sch H (990) (4)  Other 990 series  
**G** Is this a group filing? See instructions  Yes  No  
**H** Is this organization in a group exemption  Yes  No  
 If "Yes," what is the parent's name? \_\_\_\_\_  
**I** Did the organization have any changes to its guidelines not reported to the FTB? See instructions  Yes  No  
**J** If exempt under R&TC Section 23701d, has the organization engaged in political activities? See instructions.  Yes  No  
**K** Is the organization exempt under R&TC Section 23701g?  Yes  No  
 If "Yes," enter the gross receipts from nonmember sources \$ \_\_\_\_\_  
**L** Is the organization a limited liability company?  Yes  No  
**M** Did the organization file Form 100 or Form 109 to report taxable income?  Yes  No  
**N** Is the organization under audit by the IRS or has the IRS audited in a prior year?  Yes  No  
**O** Is federal Form 1023/1024 pending?  Yes  No  
 Date filed with IRS \_\_\_\_\_

**Part I Complete Part I unless not required to file this form. See General Information B and C.**

<b>Receipts and Revenues</b>	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8	1	20,493	00
	2	Gross dues and assessments from members and affiliates	2		00
	3	Gross contributions, gifts, grants, and similar amounts received	3	21,966,157	00
	4	Total gross receipts for filing requirement test. Add line 1 through line 3. <b>This line must be completed.</b> If the result is less than \$50,000, see General Information B	4	21,986,650	00
	5	Cost of goods sold	5		00
	6	Cost or other basis, and sales expenses of assets sold	6		00
	7	Total costs. Add line 5 and line 6	7		00
	8	Total gross income. Subtract line 7 from line 4	8	21,986,650	00
<b>Expenses</b>	9	Total expenses and disbursements. From Side 2, Part II, line 18	9	17,431,934	00
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8	10	4,554,716	00
<b>Filing Fee</b>	11	Total payments	11		00
	12	Use tax. See General Information K	12		00
	13	Payments balance. If line 11 is more than line 12, subtract line 12 from line 11	13		00
	14	Use tax balance. If line 12 is more than line 11, subtract line 11 from line 12	14		00
	15	Penalties and interest. See General Information J	15		00
	16	<b>Balance due.</b> Add line 12 and line 15. Then subtract line 11 from the result	16		00
<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.				
	Signature of officer	DocuSigned by: <b>Matt Brown</b> <small>C74C103265B3478</small>	Title <b>CFO</b>	Date <b>5/17/2023</b>	Telephone
<b>Paid Preparer's Use Only</b>	Preparer's signature	<b>MEI-LI HUANG</b>	Date <b>05/16/23</b>	Check if self-employed <input type="checkbox"/>	PTIN <b>P02383735</b>
	Firm's name (or yours, if self-employed) and address	<b>CLIFTONLARSONALLEN LLP</b> <b>2210 EAST ROUTE 66</b> <b>GLEN DORA, CA 91740</b>			Firm's FEIN <b>41-0746749</b>
					Telephone <b>(626) 857-7300</b>
May the FTB discuss this return with the preparer shown above? See instructions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					

**TEACH, INC.**

95-4856901

**Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information.**

128951 01-19-22

<b>Receipts from Other Sources</b>	1	Gross sales or receipts from all business activities. See instructions	•	1		00	
	2	Interest	•	2	17,778	00	
	3	Dividends	•	3		00	
	4	Gross rents	•	4		00	
	5	Gross royalties	•	5		00	
	6	Gross amount received from sale of assets (See instructions)	•	6		00	
	7	Other income	•	7	2,715	00	
	8	<b>Total</b> gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1	•	8	20,493	00	
	9	Contributions, gifts, grants, and similar amounts paid	•	9		00	
	10	Disbursements to or for members	•	10		00	
	11	Compensation of officers, directors, and trustees	•	11	536,742	00	
	12	Other salaries and wages	•	12	6,495,637	00	
	<b>Expenses and Disbursements</b>	13	Interest	•	13	1,790,680	00
		14	Taxes	•	14	312,009	00
		15	Rents	•	15	616,853	00
		16	Depreciation and depletion (See instructions)	•	16	1,272,987	00
		17	Other expenses and disbursements	•	17	6,407,026	00
		18	<b>Total</b> expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9	•	18	17,431,934	00

<b>Schedule L Balance Sheet</b>	Beginning of taxable year		End of taxable year	
	(a)	(b)	(c)	(d)
<b>Assets</b>				
1 Cash		9,306,280		• 15,419,210
2 Net accounts receivable		746,090		• 1,443,385
3 Net notes receivable				•
4 Inventories				•
5 Federal and state government obligations				•
6 Investments in other bonds				•
7 Investments in stock				•
8 Mortgage loans				•
9 Other investments				•
10 a Depreciable assets	30,236,818		30,594,179	
b Less accumulated depreciation	( 2,961,994 )	27,274,824	( 4,213,836 )	26,380,343
11 Land		4,180,111		• 4,180,111
12 Other assets <b>STMT 4</b>		4,546,384		• 4,150,665
13 <b>Total assets</b>		46,053,689		51,573,714
<b>Liabilities and net worth</b>				
14 Accounts payable		715,574		• 1,978,469
15 Contributions, gifts, or grants payable				•
16 Bonds and notes payable <b>STMT 5</b>		35,344,197		• 35,006,637
17 Mortgages payable				•
18 Other liabilities <b>STMT 6</b>		988,239		1,158,483
19 Capital stock or principal fund				•
20 Paid-in or capital surplus. Attach reconciliation				•
21 Retained earnings or income fund		9,005,679		• 13,430,125
22 <b>Total liabilities and net worth</b>		46,053,689		51,573,714

<b>Schedule M-1 Reconciliation of income per books with income per return</b>			
Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$50,000.			
1 Net income per books	• 4,424,446	7 Income recorded on books this year not included in this return. Attach schedule	•
2 Federal income tax	•	8 Deductions in this return not charged against book income this year. Attach schedule	•
3 Excess of capital losses over capital gains	• 130,270	9 Total. Add line 7 and line 8	
4 Income not recorded on books this year. Attach schedule	•	10 Net income per return. Subtract line 9 from line 6	
5 Expenses recorded on books this year not deducted in this return. Attach schedule	•		
6 Total. Add line 1 through line 5	4,554,716		4,554,716



TEACH, INC.

95-4856901

CA 199

OTHER INCOME

STATEMENT 1

DESCRIPTION

AMOUNT

OTHER FEES AND CONTRACTS

2,715.

TOTAL TO FORM 199, PART II, LINE 7

2,715.

TEACH, INC.95-4856901

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**CA 199                    COMPENSATION OF OFFICERS, DIRECTORS AND TRUSTEES                    STATEMENT 2**

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<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HRS WORKED/WK</u>	<u>COMPENSATION</u>
RAUL CARRANZA 10600 S. WESTERN AVE. LOS ANGELES, CA 90047	EXECUTIVE DIRECTOR 40.00	274,737.
MATT BROWN 10600 S. WESTERN AVE. LOS ANGELES, CA 90047	CFO 40.00	262,005.
J.J. LEWIS 10600 S. WESTERN AVE. LOS ANGELES, CA 90047	CHAIR 1.00	0.
JAMES LOBDELL 8477 SOUTH NORMANDIE AVE LOS ANGELES, CA 90044	SECRETARY 1.00	0.
SPENCER BURROWS 10600 S. WESTERN AVE. LOS ANGELES, CA 90047	MEMBER 1.00	0.
AUSTIN DRAGON 10600 S. WESTERN AVE. LOS ANGELES, CA 90047	MEMBER 1.00	0.
KELVIN PIAZZA 10600 S. WESTERN AVE. LOS ANGELES, CA 90047	MEMBER 1.00	0.
CECILIA SANDOVAL 10600 S. WESTERN AVE. LOS ANGELES, CA 90047	MEMBER 1.00	0.
TOTAL TO FORM 199, PART II, LINE 11		<u>536,742.</u>

TEACH, INC.95-4856901

CA 199	OTHER EXPENSES	STATEMENT 3
DESCRIPTION		AMOUNT
INSTRUCTIONAL MATERIALS		1,075,214.
OTHER EXPENSES		56,587.
PENSION PLAN CONTRIBUTIONS		865,626.
OTHER EMPLOYEE BENEFITS		464,897.
MANAGEMENT FEES		113,193.
LEGAL FEES		21,242.
ACCOUNTING FEES		39,270.
OTHER PROFESSIONAL FEES		3,182,786.
ADVERTISING AND PROMOTION		22,765.
OFFICE EXPENSES		359,287.
TRAVEL		33,430.
INSURANCE		172,729.
TOTAL TO FORM 199, PART II, LINE 17		6,407,026.

CA 199	OTHER ASSETS	STATEMENT 4
DESCRIPTION	BEG. OF YEAR	END OF YEAR
PLEDGES AND GRANTS RECEIVABLE	4,281,698.	3,957,902.
PREPAID EXPENSES AND DEFERRED CHARGES	264,686.	192,763.
TOTAL TO FORM 199, SCHEDULE L, LINE 12	4,546,384.	4,150,665.

CA 199	BONDS AND NOTES PAYABLE	STATEMENT 5
DESCRIPTION	BEG. OF YEAR	END OF YEAR
TAX-EXEMPT BONDS LIABILITIES	35,344,197.	35,006,637.
TOTAL TO FORM 199, SCHEDULE L, LINE 16	35,344,197.	35,006,637.

CA 199	OTHER LIABILITIES	STATEMENT 6
DESCRIPTION	BEG. OF YEAR	END OF YEAR
DEFERRED REVENUE	726,595.	970,031.
UNSECURED NOTES AND LOANS PAYABLE	261,644.	188,452.
TOTAL TO FORM 199, SCHEDULE L, LINE 18	988,239.	1,158,483.

TEACH, INC.

95-4856901

CA 199

FUND BALANCES

STATEMENT 7

DESCRIPTION

BEG. OF YEAR

END OF YEAR

NET ASSETS WITHOUT DONOR RESTRICTIONS

9,005,679.

13,430,125.

TOTAL TO FORM 199, SCHEDULE L, LINE 21

9,005,679.

13,430,125.

022  
Date Accepted \_\_\_\_\_

**DO NOT MAIL THIS FORM TO THE FTB**

TAXABLE YEAR  
**2021**

**California e-file Return Authorization for Exempt Organizations**

FORM  
**8453-EO**

Exempt Organization name <b>TEACH, INC.</b>	Identifying number <b>95-4856901</b>
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**Part I Electronic Return Information** (whole dollars only)

<b>1</b> Total gross receipts (Form 199, line 4)	<b>1</b>	<b>21,986,650</b>
<b>2</b> Total gross income (Form 199, line 8)	<b>2</b>	<b>21,986,650</b>
<b>3</b> Total expenses and disbursements (Form 199, line 9)	<b>3</b>	<b>17,431,934</b>

**Part II Settle Your Account Electronically for Taxable Year 2021**

<b>4</b> <input type="checkbox"/> Electronic funds withdrawal	<b>4a</b> Amount	<b>4b</b> Withdrawal date (mm/dd/yyyy)
---	------------------	--

**Part III Banking Information** (Have you verified the exempt organization's banking information?)

<b>5</b> Routing number _____	<b>7</b> Type of account: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
<b>6</b> Account number _____	

**Part IV Declaration of Officer**


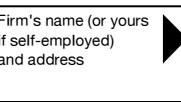
I authorize the exempt organization's account to be settled as designated in Part II. If I check Part II, box 4, I authorize an electronic funds withdrawal for the amount listed on line 4a.

Under penalties of perjury, I declare that I am an officer of the above exempt organization and that the information I provided to my electronic return originator (ERO), transmitter, or intermediate service provider and the amounts in Part I above agree with the amounts on the corresponding lines of the exempt organization's 2021 California electronic return. To the best of my knowledge and belief, the exempt organization's return is true, correct, and complete. If the exempt organization is filing a balance due return, I understand that if the Franchise Tax Board (FTB) does not receive full and timely payment of the exempt organization's fee liability, the exempt organization will remain liable for the fee liability and all applicable interest and penalties. I authorize the exempt organization return and accompanying schedules and statements be transmitted to the FTB by the ERO, transmitter, or intermediate service provider. **If the processing of the exempt organization's return or refund is delayed, I authorize the FTB to disclose to the ERO or intermediate service provider the reason(s) for the delay.**

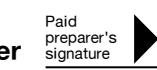
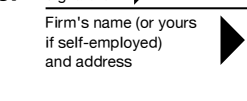
**Sign Here**  5/17/2023  CFO  
Signature of officer Date Title

**Part V Declaration of Electronic Return Originator (ERO) and Paid Preparer.**

I declare that I have reviewed the above exempt organization's return and that the entries on form FTB 8453-EO are complete and correct to the best of my knowledge. (If I am only an intermediate service provider, I understand that I am not responsible for reviewing the exempt organization's return. I declare, however, that form FTB 8453-EO accurately reflects the data on the return.) I have obtained the organization officer's signature on form FTB 8453-EO before transmitting this return to the FTB; I have provided the organization officer with a copy of all forms and information that I will file with the FTB, and I have followed all other requirements described in FTB Pub. 1345, 2021 Handbook for Authorized e-file Providers. I will keep form FTB 8453-EO on file for **four** years from the due date of the return or **four** years from the date the exempt organization return is filed, whichever is later, and I will make a copy available to the FTB upon request. If I am also the paid preparer, under penalties of perjury, I declare that I have examined the above exempt organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

<b>ERO</b> ERO's signature 	Date	Check if also paid preparer <input checked="" type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's PTIN <b>P02383735</b>
<b>Must Sign</b> Firm's name (or yours if self-employed) and address 	Firm's FEIN <b>41-0746749</b>			ZIP code <b>91740</b>

Under penalties of perjury, I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I make this declaration based on all information of which I have knowledge.

<b>Paid Preparer</b> Paid preparer's signature 	Date	Check if self-employed <input type="checkbox"/>	Paid preparer's PTIN
<b>Must Sign</b> Firm's name (or yours if self-employed) and address 	Firm's FEIN		ZIP code

FTB 8453-EO 2021

Form **990**

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

**2021**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

**A** For the **2021** calendar year, or tax year beginning **JUL 1, 2021** and ending **JUN 30, 2022**


<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>TEACH, INC.</b> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>10600 S. WESTERN AVE.</b> City or town, state or province, country, and ZIP or foreign postal code <b>LOS ANGELES, CA 90047</b>		<b>D</b> Employer identification number  <b>95-4856901</b>
	<b>F</b> Name and address of principal officer: <b>MILDRED CUNNINGHAM</b> <b>SAME AS C ABOVE</b>		<b>E</b> Telephone number <b>323-777-2068</b>
	<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>G</b> Gross receipts \$ <b>21,986,650.</b>
	<b>J</b> Website: <b>WWW.TEACHPUBLICSCHOOLS.ORG</b>		<b>H(a)</b> Is this a group return for subordinates? ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions <b>H(c)</b> Group exemption number ▶
	<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: <b>2001</b> <b>M</b> State of legal domicile: <b>CA</b>

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>TO CREATE, MANAGE, OPERATE, GUIDE, DIRECT AND PROMOTE ONE OR MORE PUBLIC CHARTER SCHOOLS.</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>6</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>6</b>
	<b>5</b> Total number of individuals employed in calendar year 2021 (Part V, line 2a)	<b>5</b>	<b>136</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>7</b>
	<b>7 a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<b>0.</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>17,883,693.</b>	<b>21,966,157.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>0.</b>	<b>0.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>20,772.</b>	<b>17,778.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>0.</b>	<b>2,715.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>17,904,465.</b>	<b>21,986,650.</b>
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>0.</b>	<b>0.</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	<b>0.</b>	<b>0.</b>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>6,484,535.</b>	<b>8,674,911.</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	<b>0.</b>	<b>0.</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>0.</b>		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<b>6,683,468.</b>	<b>8,757,023.</b>
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>13,168,003.</b>	<b>17,431,934.</b>	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>4,736,462.</b>	<b>4,554,716.</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26)	<b>46,053,689.</b>	<b>51,573,714.</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>37,048,010.</b>	<b>38,143,589.</b>
		<b>9,005,679.</b>	<b>13,430,125.</b>

**Part II Signature Block**

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

<b>Sign Here</b>	DocuSigned by:  Signature of officer	Date <b>5/17/2023</b>			
	Type or print name and title <b>MATT BROWN, CFO</b>				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>MEI-LI HUANG</b>	Preparer's signature <b>MEI-LI HUANG</b>	Date <b>05/16/23</b>	Check if self-employed <input type="checkbox"/>	PTIN <b>P02383735</b>
	Firm's name ▶ <b>CLIFTONLARSONALLEN LLP</b> Firm's address ▶ <b>2210 EAST ROUTE 66</b> <b>GLENDORA, CA 91740</b>	Firm's EIN ▶ <b>41-0746749</b>	Phone no. (626) 857-7300		

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

Form 990 (2021)

TEACH, INC.

95-4856901

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Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: TO CREATE A HIGH QUALITY, INNOVATIVE TEACHING AND LEARNING ENVIRONMENT THAT FOCUSES ON LITERACY, INTEGRATING STATE-OF-THE-ART TECHNOLOGIES ACROSS THE CORE CURRICULUM TO ACHIEVE ACADEMIC PROFICIENCY FOR ALL STUDENTS.

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 No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code: ) (Expenses \$ 10,897,771. including grants of \$ ) (Revenue \$ 2,715. ) TO OPERATE PUBLIC CHARTER SCHOOLS PROVIDING EDUCATIONAL OPPORTUNITIES TO THE SURROUNDING COMMUNITIES. DURING THE YEAR ENDED JUNE 30, 2022, THE ORGANIZATION OPERATED 3 CHARTER SCHOOL SERVING APPROXIMATELY 1,148 STUDENTS IN GRADES TK-3RD AND GRADES 5TH- 12TH.

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 10,897,771.

Form 990 (2021)

**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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		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)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	X	
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>		X



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

	Yes	No
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....		X
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....	X	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....	X	
<b>24b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		X
<b>24c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		X
<b>24d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		X
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>26</b> Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....	X	
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....	X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....	X	
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
<b>38</b> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? .....	X	

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

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

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

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

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

		Yes	No
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return ..... <b>2a</b> 136		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? ..... <b>2b</b> X	X	
<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year? ..... <b>3a</b>		X
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O ..... <b>3b</b>		
<b>4a</b>	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)? ..... <b>4a</b>		X
<b>b</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).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? ..... <b>5a</b>		X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? ..... <b>5b</b>		X
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? ..... <b>5c</b>		
<b>6a</b>	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? ..... <b>6a</b>		X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? ..... <b>6b</b>		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	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? ..... <b>7a</b>		X
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided? ..... <b>7b</b>		
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? ..... <b>7c</b>		X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year ..... <b>7d</b>		
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ..... <b>7e</b>		X
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ..... <b>7f</b>		X
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? ... <b>7g</b>		
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? <b>7h</b>		
<b>8</b>	<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? ..... <b>8</b>		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966? ..... <b>9a</b>		
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? ..... <b>9b</b>		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12 ..... <b>10a</b>		
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities ..... <b>10b</b>		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders ..... <b>11a</b>		
<b>b</b>	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) ..... <b>11b</b>		
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? <b>12a</b>		
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year ..... <b>12b</b>		
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? ..... <b>13a</b>		
<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
<b>b</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 ..... <b>13b</b>		
<b>c</b>	Enter the amount of reserves on hand ..... <b>13c</b>		
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year? ..... <b>14a</b>		X
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O ..... <b>14b</b>		
<b>15</b>	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? ..... <b>15</b>		X
If "Yes," see the instructions and file Form 4720, Schedule N.			
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? ..... <b>16</b>		X
If "Yes," complete Form 4720, Schedule O.			
<b>17</b>	<b>Section 501(c)(21) organizations.</b> Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? ..... <b>17</b>		
If "Yes," complete Form 6069.			

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

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
<b>1b</b>	Enter the number of voting members included on line 1a, above, who are independent		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?		X
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
<b>7b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>8a</b>	The governing body?	X	
<b>8b</b>	Each committee with authority to act on behalf of the governing body?		X
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

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

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		X
<b>10b</b>	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
<b>11b</b>	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
<b>12b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>12c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
<b>13</b>	Did the organization have a written whistleblower policy?	X	
<b>14</b>	Did the organization have a written document retention and destruction policy?	X	
<b>15</b>	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
<b>15a</b>	The organization's CEO, Executive Director, or top management official	X	
<b>15b</b>	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>16b</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website     Another's website     Upon request     Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **MATT BROWN - 323-777-2068**  
**1600 S. WESTERN AVE., LOS ANGELES, CA 90047**





**Part VIII Statement of Revenue**

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>					
	<b>c</b> Fundraising events	<b>1c</b>					
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>	21,913,726.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	52,431.				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$				
	<b>h Total.</b> Add lines 1a-1f			21,966,157.			
<b>Program Service Revenue</b>	<b>2 a</b>	<b>Business Code</b>					
	<b>b</b>						
	<b>c</b>						
	<b>d</b>						
	<b>e</b>						
	<b>f</b> All other program service revenue						
	<b>g Total.</b> Add lines 2a-2f						
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		17,778.			17,778.	
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties						
	<b>6 a</b> Gross rents	<b>6a</b>	(i) Real				
			(ii) Personal				
	<b>b</b> Less: rental expenses	<b>6b</b>					
	<b>c</b> Rental income or (loss)	<b>6c</b>					
	<b>d</b> Net rental income or (loss)						
	<b>7 a</b> Gross amount from sales of assets other than inventory	<b>7a</b>	(i) Securities				
			(ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses	<b>7b</b>					
	<b>c</b> Gain or (loss)	<b>7c</b>					
<b>d</b> Net gain or (loss)							
<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	<b>8a</b>						
<b>b</b> Less: direct expenses	<b>8b</b>						
<b>c</b> Net income or (loss) from fundraising events							
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>9a</b>						
<b>b</b> Less: direct expenses	<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities							
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>						
<b>b</b> Less: cost of goods sold	<b>10b</b>						
<b>c</b> Net income or (loss) from sales of inventory							
<b>Miscellaneous Revenue</b>	<b>11 a</b> OTHER FEES AND CONTRACTS	<b>Business Code</b>	611710	2,715.	2,715.		
	<b>b</b>						
	<b>c</b>						
	<b>d</b> All other revenue						
	<b>e Total.</b> Add lines 11a-11d			2,715.			
<b>12 Total revenue.</b> See instructions			21,986,650.	2,715.	0.	17,778.	



**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
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 .....				
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 .....	536,742.	472,331.	64,411.	
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
7 Other salaries and wages .....	6,495,637.	4,693,346.	1,802,291.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	865,626.	662,376.	203,250.	
9 Other employee benefits .....	464,897.	325,985.	138,912.	
10 Payroll taxes .....	312,009.	226,226.	85,783.	
11 Fees for services (nonemployees):				
a Management .....	113,193.		113,193.	
b Legal .....	21,242.		21,242.	
c Accounting .....	39,270.		39,270.	
d Lobbying .....				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees .....				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	3,182,786.	3,102,749.	80,037.	
12 Advertising and promotion .....	22,765.		22,765.	
13 Office expenses .....	359,287.		359,287.	
14 Information technology .....				
15 Royalties .....				
16 Occupancy .....	616,853.	242,608.	374,245.	
17 Travel .....	33,430.		33,430.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings .....				
20 Interest .....	1,790,680.		1,790,680.	
21 Payments to affiliates .....				
22 Depreciation, depletion, and amortization .....	1,272,987.	116,845.	1,156,142.	
23 Insurance .....	172,729.		172,729.	
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.)				
a <b>INSTRUCTIONAL MATERIALS</b>	1,075,214.	1,055,305.	19,909.	
b <b>OTHER EXPENSES</b>	56,587.		56,587.	
c _____				
d _____				
e All other expenses _____				
<b>25 Total functional expenses.</b> Add lines 1 through 24e	17,431,934.	10,897,771.	6,534,163.	0.
<b>26 Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here  if following SOP 98-2 (ASC 958-720)

**Part X Balance Sheet**

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

		(A)		(B)	
		Beginning of year		End of year	
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	5,626,930.	<b>1</b>	11,927,498.	
	<b>2</b> Savings and temporary cash investments .....	3,679,350.	<b>2</b>	3,491,712.	
	<b>3</b> Pledges and grants receivable, net .....	4,281,698.	<b>3</b>	3,957,902.	
	<b>4</b> Accounts receivable, net .....	746,090.	<b>4</b>	1,443,385.	
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>		
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>		
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>		
	<b>8</b> Inventories for sale or use .....		<b>8</b>		
	<b>9</b> Prepaid expenses and deferred charges .....	264,686.	<b>9</b>	192,763.	
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 34,774,290.			
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 4,213,836.			
		31,454,935.	<b>10c</b>	30,560,454.	
	<b>11</b> Investments - publicly traded securities .....		<b>11</b>		
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>		
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>		
	<b>14</b> Intangible assets .....		<b>14</b>		
<b>15</b> Other assets. See Part IV, line 11 .....		<b>15</b>			
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	46,053,689.	<b>16</b>	51,573,714.		
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	715,574.	<b>17</b>	1,978,469.	
	<b>18</b> Grants payable .....		<b>18</b>		
	<b>19</b> Deferred revenue .....	726,595.	<b>19</b>	970,031.	
	<b>20</b> Tax-exempt bond liabilities .....	35,344,197.	<b>20</b>	35,006,637.	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>		
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>22</b>		
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>		
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....	261,644.	<b>24</b>	188,452.	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....		<b>25</b>		
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	37,048,010.	<b>26</b>	38,143,589.	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>				
	<b>27</b> Net assets without donor restrictions .....	9,005,679.	<b>27</b>	13,430,125.	
	<b>28</b> Net assets with donor restrictions .....		<b>28</b>		
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>				
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>		
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>		
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>		
	<b>32</b> Total net assets or fund balances .....	9,005,679.	<b>32</b>	13,430,125.	
	<b>33</b> Total liabilities and net assets/fund balances .....	46,053,689.	<b>33</b>	51,573,714.	



**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	21,986,650.
2	Total expenses (must equal Part IX, column (A), line 25)	2	17,431,934.
3	Revenue less expenses. Subtract line 2 from line 1	3	4,554,716.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	9,005,679.
5	Net unrealized gains (losses) on investments	5	-130,270.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	13,430,125.

**Part XII Financial Statements and Reporting**

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		X
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____	X	
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____	X	

Form 990 (2021)



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

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

**Section A. Public Support**

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

**Section B. Total Support**

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

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

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

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> 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 .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

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

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

<b>15</b> Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2020 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2020 Schedule A, Part III, line 17 .....	<b>18</b>	%

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

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

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

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

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



**Part IV Supporting Organizations** (continued)

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

**Section B. Type I Supporting Organizations**

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

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
<b>1</b>		

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

	Yes	No
<b>1</b> Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
<b>2</b> Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>3</b> By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
<b>1</b>		
<b>2</b>		
<b>3</b>		

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

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
<b>2</b> Activities Test. Answer lines 2a and 2b below.		
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
<b>b</b> Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.		
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i>		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
<b>2a</b>		
<b>2b</b>		
<b>3a</b>		
<b>3b</b>		

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

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

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

Schedule A (Form 990) 2021



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

Multiple horizontal lines for supplemental information.

**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

**2021**

**Open to Public Inspection**

**Name of the organization** TEACH, INC. **Employer identification number** 95-4856901

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

	(a) Donor advised funds	(b) Funds and other accounts
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 donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No	

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).  
 Preservation of land for public use (for example, recreation or education)  Preservation of a historically important land area  
 Protection of natural habitat  Preservation of a certified historic structure  
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 .....

(ii) Assets included in Form 990, Part X .....

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 .....

b Assets included in Form 990, Part X .....

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2021

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

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

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

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

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

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

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

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		4,180,111.		4,180,111.
b Buildings		27,353,483.	3,347,629.	24,005,854.
c Leasehold improvements		925,022.	473,746.	451,276.
d Equipment		771,279.	392,461.	378,818.
e Other		1,544,395.		1,544,395.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				30,560,454.

Schedule D (Form 990) 2021

**TEACH, INC.**

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**Part VII Investments - Other Securities.**

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

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

**Part VIII Investments - Program Related.**

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

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

**Part IX Other Assets.**

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

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

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

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

Schedule D (Form 990) 2021

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

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

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

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

**Part XIII Supplemental Information.**

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

**PART X, LINE 2:**

THE ORGANIZATION IS A NONPROFIT ENTITY EXEMPT FROM THE PAYMENT OF INCOME TAXES UNDER INTERNAL REVENUE CODE SECTION 501(C)(3) AND CALIFORNIA REVENUE AND TAXATION CODE SECTION 23701D. ACCORDINGLY, NO PROVISION HAS BEEN MADE FOR INCOME TAXES. MANAGEMENT HAS DETERMINED THAT ALL INCOME TAX POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED UPON POTENTIAL AUDIT OR EXAMINATION; THEREFORE, NO DISCLOSURES OF UNCERTAIN INCOME TAX POSITIONS ARE REQUIRED. THE SCHOOL IS SUBJECT TO INCOME TAX ON NET INCOME THAT IS DERIVED FROM BUSINESS ACTIVITIES THAT ARE UNRELATED TO THE EXEMPT PURPOSES. THE SCHOOL FILES AN EXEMPT SCHOOL RETURN AND APPLICABLE UNRELATED BUSINESS INCOME TAX RETURN IN THE U.S. FEDERAL JURISDICTION AND WITH THE CALIFORNIA FRANCHISE TAX BOARD.



**SCHEDULE E**  
**(Form 990)**

**Schools**

OMB No. 1545-0047

**2021**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

▶ **Attach to Form 990 or Form 990-EZ.**

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

Name of the organization

**TEACH, INC.**

Employer identification number

**95-4856901**

**Part I**

	YES	NO
1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? .....	X	
2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	X	
3 Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at all times during its taxable year in a manner reasonably expected to be noticed by visitors to the homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II .....	X	
<b>THE SCHOOL PUBLICIZES ITS POLICY IN ITS REGISTRATION MATERIALS AND DOCUMENTS USED TO SOLICIT STUDENTS.</b>		
4 Does the organization maintain the following?		
a Records indicating the racial composition of the student body, faculty, and administrative staff? .....	X	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? ...		X
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? .....	X	
d Copies of all material used by the organization or on its behalf to solicit contributions? .....	X	
If you answered "No" to any of the above, please explain. If you need more space, use Part II.		
<b>TEACH INC DOES NOT OFFER FINANCIAL ASSISTANCE.</b>		
5 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges? .....		X
b Admissions policies? .....		X
c Employment of faculty or administrative staff? .....		X
d Scholarships or other financial assistance? .....		X
e Educational policies? .....		X
f Use of facilities? .....		X
g Athletic programs? .....		X
h Other extracurricular activities? .....		X
If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.		
6a Does the organization receive any financial aid or assistance from a governmental agency? .....	X	
b Has the organization's right to such aid ever been revoked or suspended? .....		X
If you answered "Yes" on either line 6a or line 6b, explain on Part II.		
7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II .....	X	

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

Schedule E (Form 990) 2021

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

**LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:**

TEACH INC. IS A PUBLIC CHARTER SCHOOL PRINCIPALLY FUNDED BY CALIFORNIA AND FEDERAL MONIES RECEIVED THROUGH THE CALIFORNIA DEPARTMENT OF EDUCATION



**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

**2021**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

Name of the organization: **TEACH, INC.** Employer identification number: **95-4856901**

**Part I Questions Regarding Compensation**

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

	Yes	No
<b>1b</b>		
<b>2</b>		
<b>4a</b>		<input checked="" type="checkbox"/>
<b>4b</b>		<input checked="" type="checkbox"/>
<b>4c</b>		<input checked="" type="checkbox"/>
<b>5a</b>		<input checked="" type="checkbox"/>
<b>5b</b>		<input checked="" type="checkbox"/>
<b>6a</b>		<input checked="" type="checkbox"/>
<b>6b</b>		<input checked="" type="checkbox"/>
<b>7</b>		<input checked="" type="checkbox"/>
<b>8</b>		<input checked="" type="checkbox"/>
<b>9</b>		

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

Schedule J (Form 990) 2021

Schedule J (Form 990) 2021

**TEACH, INC.**

**95-4856901**

Page **2**

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) RAUL CARRANZA EXECUTIVE DIRECTOR	(i)	199,557.	0.	0.	7,323.	51,955.	258,835.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MATT BROWN CFO	(i)	195,725.	0.	0.	9,492.	44,556.	249,773.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							



**SCHEDULE K  
(Form 990)**  
Department of the Treasury  
Internal Revenue Service

**Supplemental Information on Tax-Exempt Bonds**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.**  
▶ **Attach to Form 990.** ▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2021**  
**Open to Public Inspection**

Name of the organization **TEACH, INC.** Employer identification number **95-4856901**

<b>Part I Bond Issues</b>											
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
<b>A</b> CALIFORNIA SCHOOL FINANCE AUTHORITY	20-1563466	13058TDZ0	11/02/16	12530000.	FACILITY FINANCING		X		X		X
<b>B</b> CALIFORNIA SCHOOL FINANCE AUTHORITY	20-1563466	13058THM5	12/31/19	22310000.	FACILITY FINANCING		X		X		X
<b>C</b>											
<b>D</b>											

<b>Part II Proceeds</b>										
	A		B		C		D			
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
<b>1</b> Amount of bonds retired	460,000.		290,000.							
<b>2</b> Amount of bonds legally defeased										
<b>3</b> Total proceeds of issue	12,333,635.		24,119,688.							
<b>4</b> Gross proceeds in reserve funds	817,090.		1,694,376.							
<b>5</b> Capitalized interest from proceeds										
<b>6</b> Proceeds in refunding escrows										
<b>7</b> Issuance costs from proceeds	285,503.		629,101.							
<b>8</b> Credit enhancement from proceeds										
<b>9</b> Working capital expenditures from proceeds										
<b>10</b> Capital expenditures from proceeds	11,066,510.		21,219,014.							
<b>11</b> Other spent proceeds										
<b>12</b> Other unspent proceeds										
<b>13</b> Year of substantial completion	2017		2022							
<b>14</b> Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?		X		X						
<b>15</b> Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		X		X						
<b>16</b> Has the final allocation of proceeds been made?		X		X						
<b>17</b> Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X							

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

Schedule K (Form 990) 2021

<b>Part III Private Business Use</b>								
	<b>A</b>		<b>B</b>		<b>C</b>		<b>D</b>	
	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>
<b>1</b> Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds? .....	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>					
<b>2</b> Are there any lease arrangements that may result in private business use of bond-financed property? .....		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				
<b>3a</b> Are there any management or service contracts that may result in private business use of bond-financed property? .....		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				
<b>b</b> If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
<b>c</b> Are there any research agreements that may result in private business use of bond-financed property? .....		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				
<b>d</b> If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? ...								
<b>4</b> Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government .....								
<b>5</b> Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government .....								
<b>6</b> Total of lines 4 and 5 .....								
<b>7</b> Does the bond issue meet the private security or payment test? .....		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				
<b>8a</b> Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				
<b>b</b> If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of .....								
<b>c</b> If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2? .....								
<b>9</b> Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2? .....	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>					

<b>Part IV Arbitrage</b>								
	<b>A</b>		<b>B</b>		<b>C</b>		<b>D</b>	
	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>
<b>1</b> Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate? .....		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				
<b>2</b> If "No" to line 1, did the following apply?								
<b>a</b> Rebate not due yet? .....		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				
<b>b</b> Exception to rebate? .....		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				
<b>c</b> No rebate due? .....		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed .....								
<b>3</b> Is the bond issue a variable rate issue? .....		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				



**SCHEDULE O  
(Form 990)**Department of the Treasury  
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**2021**Open to Public  
Inspection

Name of the organization

TEACH, INC.

Employer identification number

95-4856901

FORM 990, PART VI, SECTION A, LINE 8B:

THE ORGANIZATION HAS NO COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE BOARD.

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

THE FORM 990 IS PREPARED BY THE ORGANIZATION'S OUTSIDE PUBLIC ACCOUNTING FIRM BASED ON INFORMATION PROVIDED BY MANAGEMENT. ONCE A DRAFT OF THE RETURN IS AVAILABLE, IT IS REVIEWED BY MANAGEMENT WITH ANY CHANGES OR REVISIONS INCORPORATED INTO THE FILING. THE REVISED RETURN IS THEN SUBMITTED TO THE BOARD OF DIRECTORS FOR THEIR REVIEW AND APPROVAL PRIOR TO SUBMITTING TO THE IRS.

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

MONITORING IS PERFORMED REGULARLY BY THE OFFICERS TO IDENTIFY POTENTIAL CONFLICTS OF INTEREST. THE BOARD OR DESIGNATED COMMITTEE REVIEWS ANY CONFLICTS PRESENTED BY INTERESTED PARTIES. THE CHAIRPERSON APPOINTS A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE THE TRANSACTION IN QUESTION AND REPORT FINDINGS TO THE BOARD. ALTERNATIVES TO THE PROPOSED TRANSACTION ARE IDENTIFIED AND COMPARED TO THE PROPOSED TRANSACTION. THE BOARD VOTES ON THE MOST BENEFICIAL OPTION FOR THE ORGANIZATION. IF THE BOARD HAS REASON TO BELIEVE AN INTEREST PERSON HAS FAILED TO DISCLOSE THE POTENTIAL CONFLICT, THE BOARD WILL INVESTIGATE FURTHER AND IF NECESSARY, TAKE APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION.

FORM 990, PART VI, SECTION B, LINE 15:

THE EXECUTIVE DIRECTOR'S PAY IS DETERMINED BASED ON DATA PROVIDED BY

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

Schedule O (Form 990) 2021

132211 11-11-21

Name of the organization <b>TEACH, INC.</b>	Employer identification number <b>95-4856901</b>
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**EXTERNAL CHARTER MANAGEMENT ORGANIZATIONS AND THROUGH COMPARISON STUDIES OF OTHER CHARTER SCHOOLS. THE BOARD MUST VOTE TO APPROVE THE EXECUTIVE DIRECTOR'S COMPENSATION AS A DIRECT ACTION. THE OFFICERS' AND KEY EMPLOYEES' PAY IS DETERMINE BASED ON DATA PROVIDED BY EXTERNAL CHARTER MANAGEMENT ORGANIZATIONS AND THROUGH COMPARISON STUDIES OF OTHER CHARTER SCHOOLS. THE BOARD MUST VOTE TO APPROVE THE OFFICERS' AND KEY EMPLOYEES' COMPENSATION AS A DIRECT ACTION.**

**FORM 990, PART VI, SECTION C, LINE 19:  
THE DOCUMENTS ARE READILY AVAILABLE TO THE PUBLIC UPON REQUEST.**

**FORM 990, PART IX, LINE 11G, OTHER FEES:**

**OTHER FEES FOR SERVICES:**

<b>PROGRAM SERVICE EXPENSES</b>	<b>3,102,749.</b>
<b>MANAGEMENT AND GENERAL EXPENSES</b>	<b>80,037.</b>
<b>FUNDRAISING EXPENSES</b>	<b>0.</b>
<b>TOTAL EXPENSES</b>	<b>3,182,786.</b>
<b>TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A</b>	<b>3,182,786.</b>



**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

**2021**

**Open to Public Inspection**

Name of the organization **TEACH, INC.** Employer identification number **95-4856901**

**Part I Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
CUNNINGHAM AND MORRIS LLC - 95-4856901 10000 S. WESTERN AVE LOS ANGELES, CA 90047	FACILITIES	CALIFORNIA	812,586.	10,786,319.	TEACH INC.
WOOTEN AVILA LLC - 95-4856901 1846 W IMPERIAL HWY LOS ANGELES, CA 90047	FACILITIES	CALIFORNIA	1,235,265.	22,215,369.	TEACH INC.

**Part II Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
TEACH INC. FOUNDATION - 84-2571026 1846 W IMPERIAL HWY LOS ANGELES, CA 90047	SUPPORTING ORGANIZATION	CALIFORNIA	501(C)(3)	LINE 12A, I	TEACH INC.	X	

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

Schedule R (Form 990) 2021

**Part III Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
<b>1</b> During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
<b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity .....		X
<b>b</b> Gift, grant, or capital contribution to related organization(s) .....		X
<b>c</b> Gift, grant, or capital contribution from related organization(s) .....		X
<b>d</b> Loans or loan guarantees to or for related organization(s) .....		X
<b>e</b> Loans or loan guarantees by related organization(s) .....		X
<b>f</b> Dividends from related organization(s) .....		X
<b>g</b> Sale of assets to related organization(s) .....		X
<b>h</b> Purchase of assets from related organization(s) .....		X
<b>i</b> Exchange of assets with related organization(s) .....		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) .....		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) .....		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) .....		X
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .....		X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .....		X
<b>o</b> Sharing of paid employees with related organization(s) .....		X
<b>p</b> Reimbursement paid to related organization(s) for expenses .....		X
<b>q</b> Reimbursement paid by related organization(s) for expenses .....		X
<b>r</b> Other transfer of cash or property to related organization(s) .....		X
<b>s</b> Other transfer of cash or property from related organization(s) .....		X

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				



**Part VII Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

Multiple horizontal lines for supplemental information.

**Certificate Of Completion**

Envelope Id: 827B3AF1BFF14CDB83508999D80FE76C	Status: Completed
Subject: Tax Return for Teach, Inc A274771- 2021	
Client Name: Teach, Inc	
Client Number: A274771	
Source Envelope:	
Document Pages: 92	Signatures: 5
Certificate Pages: 5	Initials: 1
AutoNav: Enabled	Envelope Originator:
Enveloped Stamping: Enabled	CLA Operations
Time Zone: (UTC-06:00) Central Time (US & Canada)	220 S 6th St Ste 300
	Minneapolis, MN 55402-1418
	Erlinda.Tomas@claconnect.com
	IP Address: 144.91.232.178

**Record Tracking**

Status: Original	Holder: CLA Operations	Location: DocuSign
5/16/2023 5:27:35 PM	Erlinda.Tomas@claconnect.com	

**Signer Events**

Matt Brown  
mbrown@teachpublicschools.org  
CFO/COO  
Security Level: Email, Account Authentication (None), Access Code

**Signature**

DocuSigned by:  
  
C74C49325FB1478...

Signature Adoption: Pre-selected Style  
Using IP Address: 98.184.228.61

**Timestamp**

Sent: 5/16/2023 5:34:20 PM  
Viewed: 5/17/2023 10:32:31 AM  
Signed: 5/17/2023 10:33:16 AM

**Electronic Record and Signature Disclosure:**

Accepted: 5/17/2023 10:32:31 AM  
ID: d90a70b6-9d1f-4977-afaa-796fdc3c9060

**In Person Signer Events****Signature****Timestamp****Editor Delivery Events****Status****Timestamp****Agent Delivery Events****Status****Timestamp****Intermediary Delivery Events****Status****Timestamp****Certified Delivery Events****Status****Timestamp****Carbon Copy Events****Status****Timestamp**

Lili Huang  
Lili.Huang@claconnect.com  
Business Assurance Principal  
CLA

**COPIED**

Sent: 5/16/2023 5:34:20 PM

Security Level: Email, Account Authentication (None)

**Electronic Record and Signature Disclosure:**

Not Offered via DocuSign

**Witness Events****Signature****Timestamp****Notary Events****Signature****Timestamp****Envelope Summary Events****Status****Timestamps**

Envelope Sent	Hashed/Encrypted	5/16/2023 5:34:20 PM
Certified Delivered	Security Checked	5/17/2023 10:32:31 AM

<b>Envelope Summary Events</b>	<b>Status</b>	<b>Timestamps</b>
Signing Complete	Security Checked	5/17/2023 10:33:16 AM
Completed	Security Checked	5/17/2023 10:33:16 AM

<b>Payment Events</b>	<b>Status</b>	<b>Timestamps</b>
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<b>Electronic Record and Signature Disclosure</b>
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## **ELECTRONIC RECORD AND SIGNATURE DISCLOSURE**

From time to time, CliftonLarsonAllen LLP (we, us or Company) may be required by law to provide to you certain written notices or disclosures. Described below are the terms and conditions for providing to you such notices and disclosures electronically through the DocuSign system. Please read the information below carefully and thoroughly, and if you can access this information electronically to your satisfaction and agree to this Electronic Record and Signature Disclosure (ERSD), please confirm your agreement by selecting the check-box next to 'I agree to use electronic records and signatures' before clicking 'CONTINUE' within the DocuSign system.

### **Getting paper copies**

At any time, you may request from us a paper copy of any record provided or made available electronically to you by us. You will have the ability to download and print documents we send to you through the DocuSign system during and immediately after the signing session and, if you elect to create a DocuSign account, you may access the documents for a limited period of time (usually 30 days) after such documents are first sent to you. After such time, if you wish for us to send you paper copies of any such documents from our office to you, you will be charged a \$0.00 per-page fee. You may request delivery of such paper copies from us by following the procedure described below.

### **Withdrawing your consent**

If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

### **Consequences of changing your mind**

If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. Further, you will no longer be able to use the DocuSign system to receive required notices and consents electronically from us or to sign electronically documents from us.

### **All notices and disclosures will be sent to you electronically**



Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

### **How to contact CliftonLarsonAllen LLP:**

You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:

To contact us by email send messages to: [BusinessTechnology@CLAconnect.com](mailto:BusinessTechnology@CLAconnect.com)

### **To advise CliftonLarsonAllen LLP of your new email address**

To let us know of a change in your email address where we should send notices and disclosures electronically to you, you must send an email message to us at [BusinessTechnology@CLAconnect.com](mailto:BusinessTechnology@CLAconnect.com) and in the body of such request you must state: your previous email address, your new email address. We do not require any other information from you to change your email address.

If you created a DocuSign account, you may update it with your new email address through your account preferences.

### **To request paper copies from CliftonLarsonAllen LLP**

To request delivery from us of paper copies of the notices and disclosures previously provided by us to you electronically, you must send us an email to [BusinessTechnology@CLAconnect.com](mailto:BusinessTechnology@CLAconnect.com) and in the body of such request you must state your email address, full name, mailing address, and telephone number. We will bill you for any fees at that time, if any.

### **To withdraw your consent with CliftonLarsonAllen LLP**

To inform us that you no longer wish to receive future notices and disclosures in electronic format you may:

i. decline to sign a document from within your signing session, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may;

ii. send us an email to [BusinessTechnology@CLAconnect.com](mailto:BusinessTechnology@CLAconnect.com) and in the body of such request you must state your email, full name, mailing address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

### **Required hardware and software**

The minimum system requirements for using the DocuSign system may change over time. The current system requirements are found here: <https://support.docusign.com/guides/signer-guide-signing-system-requirements>.

### **Acknowledging your access and consent to receive and sign documents electronically**

To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please confirm that you have read this ERSD, and (i) that you are able to print on paper or electronically save this ERSD for your future reference and access; or (ii) that you are able to email this ERSD to an email address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format as described herein, then select the check-box next to ‘I agree to use electronic records and signatures’ before clicking ‘CONTINUE’ within the DocuSign system.

By selecting the check-box next to ‘I agree to use electronic records and signatures’, you confirm that:

- You can access and read this Electronic Record and Signature Disclosure; and
- You can print on paper this Electronic Record and Signature Disclosure, or save or send this Electronic Record and Disclosure to a location where you can print it, for future reference and access; and
- Until or unless you notify CliftonLarsonAllen LLP as described above, you consent to receive exclusively through electronic means all notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you by CliftonLarsonAllen LLP during the course of your relationship with CliftonLarsonAllen LLP.

## Coversheet

### Consider and Vote on the Summer Contract with After School All Stars Los Angeles for TEACH Prep Elementary School

**Section:** III. Items Scheduled for Information and Potential Action  
**Item:** D. Consider and Vote on the Summer Contract with After School All Stars Los Angeles for TEACH Prep Elementary School  
**Purpose:** Vote  
**Submitted by:**  
**Related Material:** ASAS-LA Summer 2023 TPES ELOP Agreement Budget\_05-24-23.pdf

**TEACH PREPARATORY  
AFTER SCHOOL SUMMER PROGRAM MANAGEMENT  
SERVICES AGREEMENT  
Summer Program June 2022-2023**

This Agreement, entered into this 24th day of May 2023 is made by and between AFTER-SCHOOL ALL-STARS, LOS ANGELES (ASAS, LA) herein called CONSULTANT and TEACH Preparatory (TEACH Prep) hereinafter called the TEACH Prep/School.

**WITNESSETH:**

WHEREAS, the Consultant agrees to render the following services herein stated in accordance with directions stipulated by the The Chief Executive Officer or designee:

**I. CONSULTANT SERVICES**

The School requires the services of After School Consultant and Coordinator. The Consultant agrees to provide the following services:

- a.) Provide staffing and management of summer program 4 days in June
- b.) Provide materials and equipment for all above program days.
- c.) The Consultant undertakes to follow and abide by the funding terms and conditions of ELOP grant.

**II. TERMS OF AGREEMENT**

The terms of Service Agreement shall be:

- a) For the period effective: June 26<sup>th</sup> -30<sup>th</sup>, 2023, during summer.
- b) Terms to be Fee for Service.

**III. PAYMENT FOR SERVICES**

- a) Amount of \$19,359.00 for services performed in accordance with agreement.
- b) In consideration of the Contractor's performance of the services described and in accordance with the terms of the Contract and the amount agreed upon in (a) above, TEACH Prep agrees to compensate Contractor in full, amount of \$19,359.00 upon receipt and approval of this agreement.

**IV. RESPONSIBILITY FOR PROFESSIONAL SERVICES**

TEACH Prep will, rely upon the professional ability of the Consultant as a material inducement to enter into this agreement. Consultant agrees to use all reasonable care and diligence to perform these services under the agreement in a manner acceptable to TEACH Prep. It is understood that the acceptance of the services or advice by the School shall not operate as waiver or release of the Consultant.

**V. TERMINATION**

The School (TEACH Prep) may, by written notice to CONTRACTOR, terminate this Contract in whole or in part at any time, for convenience. Upon receipt of such notice, CONTRACTOR shall:

- A. Immediately discontinue all services affected (unless the notices direct otherwise); and
- B. Deliver to TEACH Prep all information and material as may have been involved in the provision of services whether provided by or generated by CONTRACTOR in the performance of this Contract, whether completed or in process. Termination of this Contract shall be as of the date of receipt by CONTRACTOR of such notice

If the termination is for the convenience of TEACH Prep, Consultant shall submit a final invoice within 60 days of termination and TEACH Prep shall pay Consultant the sums earned for the services actually performed prior to the effective date of termination and other costs reasonably incurred by CONTRACTOR to implement the termination in accordance with the provision of this Contract.

This agreement may be terminated at any time for any unspecified reason at the sole discretion of the TEACH Prep. TEACH Prep will only pay for services previously provided as of the date of termination.

#### **VI. THE SCHOOL'S COOPERATION**

TEACH Prep shall cooperate with the Consultant by furnishing all necessary School records related to and connected to the services to be performed to the Consultant. TEACH Prep personnel shall also be available to consult with the Consultant as necessary to perform required work.

#### **VII. CONFIDENTIALITY OF INFORMATION**

It is mutually agreed that the Consultant shall regard all information received during the performance of services pursuant to this agreement as confidential and shall not disclose such information to any other person without prior consent of the School.

#### **VIII. CONSULTANT NOT AN EMPLOYEE OF THE SCHOOL**

Consultant shall have no authority to contract on behalf of the School. It is expressly understood and agreed by both parties hereto that the Consultant, while engaged in carrying out and complying with any terms and conditions of this contract, is an independent contractor and not an officer, agent or employee of aforesaid School.

#### **IX. HOLD HARMLESS AGREEMENT**

The Consultant agrees to indemnify and hold harmless the School, its officers, agents and employees from each and any claim, or demand made, and every liability, loss, damage or expense, or any nature whatsoever, which may be incurred by reason of:

- a.) Liability for damages (1) death or bodily injury to persons; (2) injury to property; (3) design defects; or (4) any loss, damage or expense arising under either (1), (2) or (3) above, by Consultant upon or in connection with the work called for in this agreement except for liability or damages referred to above which result from sole negligence or willful misconduct of the School, its officers, employees, agents or independent contractor who are directly employed by the School, and;

- b.) Any injury to or death of persons or damage to property, sustained by any person, firm or corporation, including the School, caused by any act, neglect, default, or omission of Consultant or any person, firm, or corporation directly or indirectly by Consultant in connection with the work covered by this agreement, whether said injury or damage occurs either on or off school property.
- c.) The Consultant, at his/her own expense, cost and risk, shall defend any and all actions, suits or other proceedings that may be brought or instituted against the School, its officers, agents or employees on any such claim, demand or liability and shall pay or satisfy any judgment that may be rendered against the School, its officers, agents or employees in any action, suit or other proceedings as a result herein.

## **X. INSURANCE**

CONTRACTOR shall at his, her or its sole cost and expense, maintain in full force and effect, during the term of this Agreement, the following insurance coverage from a California licensed insurer with an A minus (A-), VII or better rating from A.M. Best, sufficient to cover any claims, damages, liabilities, costs and expenses (including counsel fees arising out of or in connection with CONTRACTOR'S fulfillment of any of its obligations under this Agreement or either party's use of the Work or any component or part thereof:

- A. Commercial Form General Liability Insurance, including both bodily injury and property damage, with limits as follows:
- \$1,000,000 per occurrence
  - \$100,000 fire damage
  - \$5,000 medical expenses
  - \$1,000,000 personal and adv. Injury
  - \$3,000,000 general aggregate (or if CONTRACTOR provides services solely over the Internet or some other means that does not require face to face contact between CONTRACTOR'S employees, agents, or subcontractors and DISTRICT students, CONTRACTOR shall have at least \$1,000,000 per occurrence and general aggregate for all damages arising from each accident or occurrence)
  - \$3,000,000 products/completed operations aggregate
- B. Business Auto Liability Insurance for owned scheduled, non-owned or hired automobiles with a combined single limit of no less than \$1,000,000 per occurrence. If CONTRACTOR provides transportation services to students, CONTRACTOR shall ensure that CONTRACTOR keeps in effect a liability insurance policy providing at least \$5,000,000 per occurrence and \$5,000,000 in aggregate coverage
- C. Worker's Compensation and Employer's Liability Insurance in a form and amount covering CONTRACTOR'S full liability under the California Worker's Compensation Insurance and Safety Act and in accordance with applicable state and federal laws.

Part A - Statutory Limits

Part B - \$1,000,000/\$1,000,000/\$1,000,000 Employer's Liability

- C. Errors and Omissions (Professional Liability) coverage, when applicable, with the following limits: \$1,000,000 per occurrence/\$1,000,000 aggregate.
- D. The Contractor shall name the School-Soleil Academy as additionally insured on all these insurance policies. Copies of which will be submitted to the School.

**XI. ASSIGNMENT AND SUBLETTING**

Consultant shall not assign, sublet or transfer his/her interest in this agreement, nor shall this agreement be assignable or transferable by operation of law or otherwise, without the prior written consent of the School.

**XII. AGREEMENT MODIFICATIONS**

This agreement may not be modified, revised or amended in any fashion without the express written consent of the School.

**IN WITNESS WHEREOF**, the parties to this agreement have hereunto caused the same to be executed the day and year written below.

**TEACH Preparatory  
8505 S. Western Ave  
Los Angeles, CA. 90047**

BY \_\_\_\_\_

**AFTER-SCHOOL ALL-STARS, LOS ANGELES (ASAS, LA)  
6501 Fountain Ave  
Los Angeles, CA 90028**

BY:   
Signature of Authorized

Hector LaFarga Jr.  
Printed Name

91-2162719  
Employer I. D. / Social Security Number

May 24, 2023  
Date

**TEACH PREPARATORY  
AFTER SCHOOL SUMMER PROGRAM MANAGEMENT  
SERVICES AGREEMENT  
Summer Program July 2023-2024**

This Agreement, entered into this 24th day of May 2023 is made by and between AFTER-SCHOOL ALL-STARS, LOS ANGELES (ASAS, LA) herein called CONSULTANT and TEACH Preparatory (TEACH Prep) hereinafter called the TEACH Prep/School.

**WITNESSETH:**

WHEREAS, the Consultant agrees to render the following services herein stated in accordance with directions stipulated by the The Chief Executive Officer or designee:

**I. CONSULTANT SERVICES**

The School requires the services of After School Consultant and Coordinator. The Consultant agrees to provide the following services:

- a.) Provide staffing and management of summer program 10 days in July 2023
- b.) Provide materials and equipment for all above program days.
- c.) The Consultant undertakes to follow and abide by the funding terms and conditions of ELOP grant.

**II. TERMS OF AGREEMENT**

The terms of Service Agreement shall be:

- a) For the period effective: July 5<sup>th</sup> -20<sup>th</sup>, 2023, during summer.
- b) No program on Friday's
- c) Terms to be Fee for Service.

**III. PAYMENT FOR SERVICES**

- a) Amount of \$85,835.00 for services performed in accordance with agreement.
- b) In consideration of the Contractor's performance of the services described and in accordance with the terms of the Contract and the amount agreed upon in (a) above, TEACH Prep agrees to compensate Contractor in full, amount of \$85,835.00 NET 30 upon receipt and approval of this agreement.

**IV. RESPONSIBILITY FOR PROFESSIONAL SERVICES**

TEACH Prep will, rely upon the professional ability of the Consultant as a material inducement to enter into this agreement. Consultant agrees to use all reasonable care and diligence to perform these services under the agreement in a manner acceptable to TEACH Prep. It is understood that the acceptance of the services or advice by the School shall not operate as waiver or release of the Consultant.

**V. TERMINATION**



The School (TEACH Prep) may, by written notice to CONTRACTOR, terminate this Contract in whole or in part at any time, for convenience. Upon receipt of such notice, CONTRACTOR shall:

- A. Immediately discontinue all services affected (unless the notices direct otherwise); and
- B. Deliver to TEACH Prep all information and material as may have been involved in the provision of services whether provided by or generated by CONTRACTOR in the performance of this Contract, whether completed or in process. Termination of this Contract shall be as of the date of receipt by CONTRACTOR of such notice

If the termination is for the convenience of TEACH Prep, Consultant shall submit a final invoice within 60 days of termination and TEACH Prep shall pay Consultant the sums earned for the services actually performed prior to the effective date of termination and other costs reasonably incurred by CONTRACTOR to implement the termination in accordance with the provision of this Contract.

This agreement may be terminated at any time for any unspecified reason at the sole discretion of the TEACH Prep. TEACH Prep will only pay for services previously provided as of the date of termination.

#### **VI. THE SCHOOL'S COOPERATION**

TEACH Prep shall cooperate with the Consultant by furnishing all necessary School records related to and connected to the services to be performed to the Consultant. TEACH Prep personnel shall also be available to consult with the Consultant as necessary to perform required work.

#### **VII. CONFIDENTIALITY OF INFORMATION**

It is mutually agreed that the Consultant shall regard all information received during the performance of services pursuant to this agreement as confidential and shall not disclose such information to any other person without prior consent of the School.

#### **VIII. CONSULTANT NOT AN EMPLOYEE OF THE SCHOOL**

Consultant shall have no authority to contract on behalf of the School. It is expressly understood and agreed by both parties hereto that the Consultant, while engaged in carrying out and complying with any terms and conditions of this contract, is an independent contractor and not an officer, agent or employee of aforesaid School.

#### **IX. HOLD HARMLESS AGREEMENT**

The Consultant agrees to indemnify and hold harmless the School, its officers, agents and employees from each and any claim, or demand made, and every liability, loss, damage or expense, or any nature whatsoever, which may be incurred by reason of:

- a.) Liability for damages (1) death or bodily injury to persons; (2) injury to property; (3) design defects; or (4) any loss, damage or expense arising under either (1), (2) or (3) above, by Consultant upon or in connection with the work called for in this agreement except for liability or damages

- referred to above which result from sole negligence or willful misconduct of the School, its officers, employees, agents or independent contractor who are directly employed by the School, and;
- b.) Any injury to or death of persons or damage to property, sustained by any person, firm or corporation, including the School, caused by any act, neglect, default, or omission of Consultant or any person, firm, or corporation directly or indirectly by Consultant in connection with the work covered by this agreement, whether said injury or damage occurs either on or off school property.
  - c.) The Consultant, at his/her own expense, cost and risk, shall defend any and all actions, suits or other proceedings that may be brought or instituted against the School, its officers, agents or employees on any such claim, demand or liability and shall pay or satisfy any judgment that may be rendered against the School, its officers, agents or employees in any action, suit or other proceedings as a result herein.

## **X. INSURANCE**

CONTRACTOR shall at his, her or its sole cost and expense, maintain in full force and effect, during the term of this Agreement, the following insurance coverage from a California licensed insurer with an A minus (A-), VII or better rating from A.M. Best, sufficient to cover any claims, damages, liabilities, costs and expenses (including counsel fees arising out of or in connection with CONTRACTOR'S fulfillment of any of its obligations under this Agreement or either party's use of the Work or any component or part thereof:

- A. Commercial Form General Liability Insurance, including both bodily injury and property damage, with limits as follows:
  - \$1,000,000 per occurrence
  - \$100,000 fire damage
  - \$5,000 medical expenses
  - \$1,000,000 personal and adv. Injury
  - \$3,000,000 general aggregate (or if CONTRACTOR provides services solely over the Internet or some other means that does not require face to face contact between CONTRACTOR'S employees, agents, or subcontractors and DISTRICT students, CONTRACTOR shall have at least \$1,000,000 per occurrence and general aggregate for all damages arising from each accident or occurrence)
  - \$3,000,000 products/completed operations aggregate
- B. Business Auto Liability Insurance for owned scheduled, non-owned or hired automobiles with a combined single limit of no less than \$1,000,000 per occurrence. If CONTRACTOR provides transportation services to students, CONTRACTOR shall ensure that CONTRACTOR keeps in effect a liability insurance policy providing at least \$5,000,000 per occurrence and \$5,000,000 in aggregate coverage
- C. Worker's Compensation and Employer's Liability Insurance in a form and amount covering CONTRACTOR'S full liability under the California Worker's Compensation Insurance and Safety Act and in accordance with applicable state and federal laws.

Part A - Statutory Limits

Part B - \$1,000,000/\$1,000,000/\$1,000,000 Employer's Liability

- C. Errors and Omissions (Professional Liability) coverage, when applicable, with the following limits: \$1,000,000 per occurrence/\$1,000,000 aggregate.

D. The Contractor shall name the School-Soleil Academy as additionally insured on all these insurance policies. Copies of which will be submitted to the School.

**XI. ASSIGNMENT AND SUBLETTING**

Consultant shall not assign, sublet or transfer his/her interest in this agreement, nor shall this agreement be assignable or transferable by operation of law or otherwise, without the prior written consent of the School.

**XII. AGREEMENT MODIFICATIONS**

This agreement may not be modified, revised or amended in any fashion without the express written consent of the School.

**IN WITNESS WHEREOF**, the parties to this agreement have hereunto caused the same to be executed the day and year written below.

**TEACH Preparatory  
8505 S. Western Ave  
Los Angeles, CA. 90047**

BY \_\_\_\_\_

**AFTER-SCHOOL ALL-STARS, LOS ANGELES (ASAS, LA)  
6501 Fountain Ave  
Los Angeles, CA 90028**

BY:  \_\_\_\_\_  
Signature of Authorized

Hector LaFarga Jr.  
Printed Name

91-2162719  
Employer I. D. / Social Security Number

May 24, 2023  
Date

**ELOP Proposal  
TEACH Prep  
Summer 2023**

<b>Units of Service</b>	<b>800</b>
# of Students	<b>80</b>
# of PL's	<b>5</b>
Days of operation	<b>10</b>

<u>PERSONNEL</u>	Qty	Rate	# hours	#days	Amount
Program Coordinator	1	\$28.75	8	10	<b>\$2,300</b>
Program Coordinator OT	1	\$43.13	2	10	<b>\$863</b>
Operation & Grant Mgr	1	\$36.80	2	10	<b>\$736</b>
Program Support Specialist	1	\$36.80	2	10	<b>\$736</b>
Data Assistant	1	\$27.60	2	10	<b>\$552</b>
Program Leader	3	\$24.15	8	10	<b>\$5,796</b>
Program Leader OT	3	\$36.23	2	10	<b>\$2,174</b>
Program Leader TK-K 1:10	2	\$24.15	8	10	<b>\$3,864</b>
Program Leader TK-K OT	2	\$36.23	2	10	<b>\$1,449</b>
Program Leader (Campus Aid)	2	\$24.15	8	10	<b>\$3,864</b>
Program Leader (Campus Aid)	2	\$36.22	2	10	<b>\$1,449</b>
Program Leader - trainings	5	\$24.15	4	1	<b>\$483</b>
Certificated Teacher	6	\$35.00	5	10	<b>\$10,500</b>
<b>TOTAL</b>					<b>\$34,765</b>

<u>EMPLOYEE BENEFITS</u>		Amount
	16%	\$5,562
Health Benefits	13.4%	\$745
FICA	41.0%	\$2,281
SUI	19.4%	\$1,079
Workers Comp	25.1%	\$1,396
Background checks	1.1%	\$61
<b>TOTAL</b>	<b>100.00%</b>	<b>\$5,562</b>

<u>NON-PERSONNEL</u>				Amount
Program Supplies	80	\$65		\$5,200
Program Equipment	2	\$2,500		\$5,000
Bus/Van Rentals	8	\$690		\$5,520
Travel	4	\$800		\$3,200
SC Cell Phone	0	\$75	12	\$0
Database	0	\$400		\$0
Specialized Classes	3	\$234	2	\$5,616
Consultants/Curriculum	1	\$9,775		\$9,775
<b>TOTAL</b>				<b>\$34,311</b>

**Grand Total** **\$74,639**

Admin	\$11,196
<b>TOTAL</b>	<b>\$85,835</b>

**ELOP Proposal  
TEACH Prep  
Summer 2023**

<b>Units of Service</b>	<b>320</b>
# of Students	<b>80</b>
# of PL's	<b>5</b>
Days of operation	<b>4</b>

<u>PERSONNEL</u>	Qty	Rate	# hours	#days	Amount
Program Coordinator	1	\$28.75	8	5	<b>\$1,150</b>
Program Coordinator OT	1	\$43.13	2	5	<b>\$431</b>
Operation & Grant Mgr	1	\$36.80	2	4	<b>\$294</b>
Program Support Specialist	1	\$36.80	2	4	<b>\$294</b>
Data Assistant	1	\$27.60	2	4	<b>\$221</b>
Program Leader	3	\$24.15	8	4	<b>\$2,318</b>
Program Leader OT	3	\$36.23	2	4	<b>\$870</b>
Program Leader TK-K 1:10	2	\$24.15	8	4	<b>\$1,546</b>
Program Leader TK-K OT	2	\$36.23	2	4	<b>\$580</b>
Program Leader (Campus Aid)	2	\$24.15	8	4	<b>\$1,546</b>
Program Leader (Campus Aid)	2	\$36.22	2	4	<b>\$580</b>
Program Leader - trainings	5	\$24.15	4	1	<b>\$483</b>
Certificated Teacher	6	\$35.00	5	4	<b>\$4,200</b>
<b>TOTAL</b>					<b>\$14,512</b>

<u>EMPLOYEE BENEFITS</u>		Amount
	16%	\$2,322
Health Benefits	13.4%	\$311
FICA	41.0%	\$952
SUI	19.4%	\$450
Workers Comp	25.1%	\$583
Background checks	1.1%	\$26
<b>TOTAL</b>	<b>100.00%</b>	<b>\$2,322</b>

<u>NON-PERSONNEL</u>			Amount
Program Supplies	0	\$65	\$0
Program Equipment	0	\$2,500	\$0
Bus/Van Rentals	0	\$690	\$0
Travel	0	\$800	\$0
SC Cell Phone	0	\$75	12
Database	0	\$400	\$0
Specialized Classes	0	\$234	2 4
Consultants/Curriculum	0	\$9,775	\$0
<b>TOTAL</b>			<b>\$0</b>

**Grand Total** **\$16,834**

Admin	\$2,525
<b>TOTAL</b>	<b>\$19,359</b>

# Coversheet

## Consider and Vote on The CompTherapy Services Agreement

**Section:** III. Items Scheduled for Information and Potential Action  
**Item:** E. Consider and Vote on The CompTherapy Services Agreement  
**Purpose:** Vote  
**Submitted by:**  
**Related Material:** CompTherapy\_TEACH Public Schools\_2023-2024.pdf



**COMPREHENSIVE THERAPY ASSOCIATES, INC.**

**Comp Therapy**

**SERVICES AND CONSULTING AGREEMENT**

This Services and Consulting Agreement (this “Agreement”) is entered into effect as of July 1<sup>st</sup>, 2023, by and between Comprehensive Therapy Associates, Inc. (“Comp Therapy”) located at 1017 N. Lake St. Burbank, CA 91502 TEACH Public Schools (“Client”): TEACH Academy of Technologies located at 10045 S. Western Ave., Los Angeles, CA 90047 and TEACH TECH Charter High School located at 10616 S Western Ave, Los Angeles, CA, and TEACH Prep Elementary located at 8505 S. Western Ave., Los Angeles, CA 90047 (“service locations”).

**RECITALS**

Comp Therapy is a registered Non-Public Agency (NPA Code: 1A-19-532) with the California Department of Education.

WHEREAS, Client is a California nonprofit public benefit corporation that offers educational programs to students identified at its public or private schools (“Service Location”); and

WHEREAS, Comp Therapy wishes to provide certain services with respect to education and/or other social services to Client at the Service Location (the “Services”);

NOW THEREFORE, in consideration of the premises and covenants herein contained, and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the parties hereto agree as follows:

**AGREEMENT**

In consideration of the promises and covenants contained herein, the parties agree as follows:

**1. COMMENCEMENT DATE AND TERM**

This Agreement shall commence at 12:01 a.m. on July 1<sup>st</sup>, 2023 (the “Commencement Date”) and shall continue until 11:59 p.m. on June 30<sup>th</sup>, 2024 (the “Term”).

**2. RESPONSIBILITIES OF COMP THERAPY**

**A. COMPLIANCE WITH LAWS**

- a. During this Agreement, Comp Therapy shall comply with all applicable federal and state statutes, laws, ordinances, and regulations (including, but not limited to, applicable and active health orders) relating to its business in general and the provision of special education services.

- b. Comp Therapy shall ensure that all Comp Therapy Personnel are qualified to provide services to students under the Individuals with Disabilities Education Act (IDEA). All instructors and therapists ("Comp Therapy Personnel") provided by Comp Therapy under this Agreement will meet State of California requirements for providing the Services; such as holding an applicable California credential, certification or license and TB test clearance appropriate for providing the requested service. Upon the client's written request, Comp Therapy shall provide a list of all Comp Therapy Personnel that currently serve or will serve students enrolled in the Program. Such list will identify the credentials and/or licenses held by each Comp Therapy Personnel. Comp Therapy shall notify Client within a commercially reasonable timeframe of any change concerning Comp Therapy Personnel who provide Services directly to students under this Agreement. An officer of Comp Therapy shall certify to Client that Comp Therapy Personnel providing instruction or therapy services hereunder are trained to and accept full responsibility to act as mandated child abuse reporters pursuant to California State Law.
- c. Comp Therapy shall conduct all required background and qualification checks, including but not limited to Live Scan fingerprinting of personnel through the Department of Justice ("DOJ") database as required by the applicable law and, upon receipt of DOJ clearance, certify to Client that no Comp Therapy Personnel working with students of Client have been convicted of a violent or serious felony (as defined by applicable law) or are the subject of a criminal action pending upon charges of commission of a violent or serious felony (as defined by applicable law). Comp Therapy shall fill out the form "Vendor Certification of Criminal Background Clearance, Tuberculosis (TB) Clearance, and Credential Verification" for any Comp Therapy Personnel working with or around students. The certification shall be submitted to Client before any Comp Therapy Personnel is allowed onto a school site. Upon request by Client, Comp Therapy shall submit the most recent certification to Client with five (5) business days of the request. Comp Therapy is required to notify Client in the event of any changes to the Comp Therapy Personnel on a school site and, as necessary, fill out new or updated "Vendor Certification of Criminal Background Clearance, Tuberculosis (TB) Clearance, and Credential Verification" forms. Comp Therapy will request and receive subsequent arrest notifications for the Comp Therapy Personnel from the DOJ to ensure ongoing safety of students.
- d. Comp Therapy shall pay, withhold, and transmit payroll taxes; provide unemployment, workers' compensation, and all other required insurances; and handle unemployment and workers' compensation claims involving Comp Therapy Personnel.

## B. INSURANCE



- a. Insurance Obligations of Comp Therapy. Comp Therapy shall procure and maintain the following insurance while this Agreement is in effect:
- i. General and Professional Liability. General and professional liability insurance covering all activities of Comp Therapy Personnel at Client's facilities in performance of Comp Therapy obligations under this Agreement with coverage of not less than- One Million Dollars (\$1,000,000) for any incident ,Two Million Dollars (\$2,000,000) annual aggregate per incident, and Three Million Dollars (\$3,000,000) excess liability policy for a maximum of Five Million Dollars (\$5,000,000) per aggregate limit Comp Therapy agrees to provide Client with a Certificate of Insurance naming Client as an additional insured on such general and professional liability insurance policies. Policies will be furnished to Client for review upon request.
  - ii. Worker's Compensation. Worker's disability compensation insurance covering each Comp Therapy employee providing Services to Client hereunder; insurance shall comply with all applicable legal requirements.

### 3. RESPONSIBILITIES OF CLIENT

#### A. COMPLIANCE WITH LAWS

- a. Comply with all applicable federal, state, and local laws, ordinances and regulations relating to this Agreement and to Comp Therapy Personnel, as well as all laws and regulations relating to Special Education.

#### B. INSURANCE

- b. Insurance Obligations of Client. Client shall procure and maintain the following insurance while this Agreement is in effect:
- i. General and Professional Liability. General and professional liability insurance covering all activities of Client and Client Personnel at Client's facilities in performance of Client's obligations under this Agreement with coverage of not less than One Million Dollars (\$1,000,000) for any incident, and Two Million Dollars (\$2,000,000) annual aggregate per incident and Three Million (\$3,000,000) excess liability policy for a maximum of Five Million Dollars (\$5,000,000) per aggregate limit. Client agrees to provide Comp Therapy with a Certificate of Insurance naming Comp Therapy as an additional insured on such general liability and professional insurance policies.

- ii. Worker's Compensation. Worker's disability compensation insurance covering the activities of each Client employee providing services to students in the Program; insurance shall comply with all applicable legal requirements.

#### C. ADDITIONAL RESPONSIBILITIES OF CLIENT

- a. Client shall provide Comp Therapy Personnel with a safe and secure work site, any and all appropriate information, equipment, furnishings and space for Comp Therapy Personnel to conduct their work as requested at no additional cost to Comp Therapy.
- b. Client shall provide Comp Therapy personnel with all necessary student information, including documents in Client's possession, so that Comp Therapy is able to properly carry out services and duties listed under this Agreement. Such information and documents may include but are not limited to, individual needs of students in the Program, evaluations, reports, observations, and details regarding the student's health history.
- c. Client shall notify Comp Therapy at least 10 business days in advance of any new Services requested by the Client that were not originally listed on Exhibit A. Comp Therapy shall have up to 5 business days after such notice to notify the Client whether it has the ability to carry out the new requests, whether the new requested services are outside of its agreed Services to be provided as detailed on Exhibit A, or if the requested service(s) would change any existing fee structure.

#### 4. COMPENSATION AND METHOD OF PAYMENT

##### Payment Terms, Bill Rates, and Fees

- A. Client will pay Comp Therapy for Comp Therapy's services at the rate(s) stated in Exhibit A, and will also pay any additional costs or fees set forth in this Agreement for services authorized in writing by Client. Client will not be liable for any costs or expenses (e.g., travel, lodging, per diem) associated with any services not expressly authorized. Each invoice shall include only charges for service described in this Agreement. Invoices shall be submitted to Client's Accounts Payable Department. All communication regarding payment status shall be made to Client's Accounts Payable Department and Comp Therapy.
  - a. Comp Therapy will provide invoices to Client by the 15<sup>th</sup> of each month for services provided the preceding month.
  - b. Fees are due and payable to Comp Therapy within thirty (30) calendar days of receipt of the invoice. In the event an invoice is not timely paid, Client agrees to pay a service charge on any outstanding amount at the rate of maximum allowed by law or 1% per month, whichever is higher. Late payment may also result in immediate

suspension of Comp Therapy's services under this agreement at Comp Therapy's sole discretion.

- c. If a portion of any invoice is disputed, Client agrees to pay the undisputed portion and Comp Therapy and Client shall use their best reasonably good faith efforts to resolve such dispute within the thirty (30) calendar day period following notice of the dispute. Client will provide to Comp Therapy all student and other record materials relevant to the disputed charges. If such dispute cannot be resolved within such thirty (30) day period, either Comp Therapy or Client may terminate this Agreement, with at least a thirty (30) business day written notice and either party, regardless of whether the Agreement is then terminated, shall have the right to submit the dispute to arbitration in accordance with Paragraph 10 below.

Comp Therapy will provide Client with following documents with monthly invoice:

- i. Copies of Service Logs from Comp Therapy Personnel who provided services at designated Service Location

## 5. NO HIRING AGREEMENT

- A. Client acknowledges that Comp Therapy's employees are a unique and valuable resource of Comp Therapy, who have been trained by Comp Therapy, and that but for this Agreement and Comp Therapy's services rendered to the Client, the Client would not have access to Comp Therapy's employees and knowledge of their true performance and capabilities. In addition, Client acknowledges that Comp Therapy employees may have certain legal obligations arising from contract or otherwise to Comp Therapy that may restrict Comp Therapy employees from working for competitors or unfairly working in direct competition with Comp Therapy. As such, Client agrees to a 365-day "No Hire" period for any of Comp Therapy's employees. If the Client uses the services of a Comp Therapy Personnel as its direct employee, independent contractor, or subcontractor during or within 365 days after any assignment of Comp Therapy Personnel to Client through Comp Therapy, Client must immediately notify Comp Therapy and pay Comp Therapy a placement fee in the amount of \$7,500. Comp Therapy reserves the right to modify, waive, or reduce the placement fee, with at least thirty (30) days' prior written notice to Client.

## 6. CONFIDENTIAL INFORMATION

- A. Comp Therapy and Client agree to keep confidential and not to disclose to any third parties any information provided by Comp Therapy or otherwise learned by Client during the course of this Agreement without the prior written consent of Comp Therapy. This provision shall survive the expiration and termination of this Agreement. Comp Therapy and Client warrant that, to the best of their knowledge, all their operations are compliant with all federal and state laws, rules, and regulations pertaining to the privacy and/or security of personal data.

Client further agrees not to share any "confidential data" with any other vendor without first disclosing to Comp Therapy in writing all pertinent data fields and records to be provided, and receiving written authorization from Comp Therapy permitting the Client to provide the data to a third party.

## 7. INDEMNIFICATION AND LIMITATION OF LIABILITY

- A. Comp Therapy shall indemnify, defend, and hold harmless Client and Client's parents, subsidiaries, affiliated entities, directors, owners, agents, representatives, attorneys, insurers and employees, from and against all losses, liabilities, expenses, and claims for damages (including court costs and reasonable attorney's fees) which may be asserted or claimed against Client as a result of Comp Therapy's negligence or willful and unlawful conduct, including without limitation any violation or breach of this Agreement.
- B. Client shall indemnify, defend, and hold harmless Comp Therapy and Comp Therapy's parents, subsidiaries, affiliated entities, directors, owners, agents, representatives, attorney, insurers and employees, from and against all losses, liabilities, expenses, and claims for damages (including court costs and reasonable attorney's fees) which may be asserted or claimed against Comp Therapy as a result of Client's negligence or willful and unlawful conduct, including without limitation any violation or breach of this Agreement in accordance with California law.
- C. The maximum amount of damages for which Comp Therapy shall be liable to Client for any claims, losses, liabilities, expenses or damages arising out of or in connection with this Agreement or Comp Therapy's performance hereunder shall not exceed the total fees paid or payable by Client to Comp Therapy under this Agreement, as stipulated by California law.

## 8. TERM OF AGREEMENT

- A. This Agreement shall begin on the date first written above and shall expire on the date stated in this Agreement or until terminated by either party. Either party may terminate this Agreement, without cause, upon at least sixty (60) business days prior written notice.
- B. Either party reserves the right to immediately terminate this Agreement in the event:
  - a. Client or Comp Therapy breaches any material form, condition or duty under this Agreement, including but not limited to, in the case of Client, the failure to timely pay any amounts due to Comp Therapy, provided that Comp Therapy gives written notice of such breach and Client does not pay Comp Therapy the amount (plus any interest due thereon within five (5) business days of such notice;
  - b. If required by law or regulation; or

- c. If Client, or Comp Therapy becomes insolvent or commits any act of bankruptcy, or a petition for involuntary bankruptcy is filed against either party, or either party makes general assignment for the benefit of creditors under the bankruptcy or insolvency laws.
- C. Client reserves the right to immediately terminate this Agreement in the event of: (a) the bankruptcy or insolvency of Comp Therapy; (b) sale of business of Comp Therapy; or (c) material breach of any term or condition of this Agreement.
- D. Upon termination, Comp Therapy shall have no further obligation to provide Client with Comp Therapy Personnel. The provisions regarding Confidential Information and Cooperation shall continue in effect subsequent to and regardless of termination of this Agreement.

## 9. INDEPENDENT CONTRACTORS

- A. The parties hereto acknowledge and agree that the relationship created between Comp Therapy and Client as a result of this Agreement is strictly that of independent contractors. Nothing contained herein shall be deemed to be any partnership, joint venture, principal-agent, fiduciary-beneficiary, or other relationship. Comp Therapy shall be responsible for all compensation, salaries, taxes, withholdings, contributions, benefits (if any), and worker's disability compensation insurance with respect to all Comp Therapy Personnel employed or contracted by such party and shall indemnify, defend, and hold harmless the other party and its officer, directors, agents, contractors, representatives and employees, from and against any and all liability, loss, damages, claims, causes of action, and expenses associated therewith (including without limitation attorney's fees) caused or asserted to have been caused, directly or indirectly, by or as a result of same. The provisions of this Section shall survive the expiration or termination for any reason of this Agreement. Comp Therapy shall complete and submit a Form W-9 to Client prior to rendering services in accordance with California Law.

## 10. MISCELLANEOUS

- A. The parties intend that the benefits of this Agreement shall inure only to Comp Therapy and Client and not to any third person or party.
- B. No waiver, amendment, or modification of this Agreement shall be effective unless the waiver, amendment, or modification is in writing and signed and dated by the parties.
- C. If any term, provision, covenant or condition of this Agreement shall be held by a court of competent jurisdiction to be invalid, void or unenforceable, in whole or in part, such decision shall not affect the validity of any remaining portion, and the remaining portion shall stand in full force and effect, and shall in no way be affected, impaired or invalidated. Any provisions thus affected shall be modified to the extent necessary to bring the provision within the applicable requirements of the law.

- D. This Agreement, including attached exhibit(s), constitutes the entire Agreement between the parties regarding its subject matter, and supersedes all prior agreements and understandings between the parties, whether oral or written, relating to its subject matter.
- E. The provisions of this Agreement shall benefit and bind the parties and their respective heirs, representatives, successors, and assigns.
- F. A party's delay or failure to enforce any of the stated provisions of this Agreement on one or more occasions will not be a waiver of that or any other occasion(s) or of the party's right thereafter to enforce each and every provision of this Agreement.
- G. A party shall have no right or power to and shall not purport to transfer or assign this Agreement without prior written consent from the other party.
- H. **Governing Law:** This Agreement shall be governed by the laws of the State of California. It may be executed in several counterparts and constitutes the entire agreement for the service described. If any provision in this contract is held by any court to be invalid, void, or unenforceable, the remaining provisions shall continue in full force. Any legal action arising from, involving or relating to this Agreement shall be brought in a court of competent jurisdiction located in Los Angeles, California. Both parties agree and hereby release their rights to a trial by jury.
- I. **Attorney's Fees:** If any legal action or any arbitration or other proceedings are brought for the interpretation or enforcement of this Agreement, or any rights of the parties with regard to this Agreement, and/or any related agreement, or because of an alleged dispute, breach, or default, the successful or prevailing party shall be entitled to recover its reasonable attorney's fees and expenses, and any costs associated with any enforcement proceeding.
- J. **Notices:** Any notice, request, demand, consent, approval or other communication required or permitted under this Agreement must be in writing and will be deemed to have gone into effect (a) on actual delivery, if delivery is by hand, or (b) on receipt if delivery is by facsimile, or (c) five (5) days after deposit in the U.S. mail, postage prepaid, certified or registered mail, return requested. Each such notice shall be sent to respective parties at the address indicated below.

## 11. CONFLICTS OF INTEREST

- A. Comp Therapy warrants that no part of the total amounts paid by Client shall be paid directly or indirectly to an employee or official of Client as wages, compensation, or gifts in exchange for acting as an officer, agent, employee, subcontractor, or consultant to Comp Therapy in connection with any work contemplated or performed relative to this Agreement. Comp Therapy acknowledges, understands, and agrees that this Agreement

shall be null and void as determined by Client if Comp Therapy is an entity in which a controlling interest is held by an individual who is, or within the past six months has been, an employee of Client.

## 12. NONDISCRIMINATION

- A. Comp Therapy hereby agrees, warrants, and assures that no person shall be excluded from participation in, be denied benefits of, or be otherwise subjected to discrimination in the performance of this Agreement or in the employment practices of Comp Therapy on the grounds of that individual's race; color; gender (including gender identity and gender expression); sex (including pregnancy, childbirth, breastfeeding, and related medical conditions); religious creed (including religious dress and grooming practices); marital/registered domestic partner status; age (forty (40) and over); national origin or ancestry (including native language spoken); physical or mental disability (including HIV and AIDS); medical condition (including cancer and genetic characteristics); taking a leave of absence authorized by law; genetic information; sexual orientation; military and veteran status; or any other consideration made unlawful by federal, state, or local laws.

## 13. RECORDS

- A. Comp Therapy shall maintain documentation for all charges under this Agreement. The books, records, and documents of Comp Therapy, insofar as they relate to work performed or money received under this Agreement, shall be maintained for a period of seven (7) full years or longer as required by law from the date of the final payment and shall be subject to audit at any reasonable time and upon reasonable notice by Client or their duly appointed representatives. The financial statements shall be prepared in accordance with generally accepted accounting principles and applicable California law.

## 14. PRESS RELEASES

- A. The parties hereto acknowledge and agree to not use the name of or make reference to Client or Comp Therapy for any purpose in any releases for public or private dissemination, advertising or other materials, without the prior written consent of Client and Comp Therapy.

## 15. FERPA/IDEA

- A. This Agreement is entered into by Comp Therapy and Client in accordance with the provisions of the Family Educational Rights and Privacy Act, 20 U.S.C. Section 1231(g), et seq., (FERPA) and the Individuals with Disabilities Education Act, 20 U.S.C. Section 1400, et seq., (IDEA). Comp Therapy hereby acknowledges that all documents which include personally identifiable information contained in or derived from a student's education records are deemed confidential pursuant to FERPA and IDEA. Comp Therapy agrees not to re-disclose any such personally identifiable information without prior written consent as required by law, or unless re-disclosure is otherwise authorized by law. Comp Therapy agrees that nothing in this Agreement may be construed to allow either Comp Therapy or Client to maintain, use, disclose, or share the personally identifiable information in a manner not allowed under Federal or State law or regulation, including the California Consumer Privacy Act (CCPA).

- B. Comp Therapy agrees to comply with all applicable laws that require notification of individuals in the event of an unauthorized release of personally identifiable information or other event requiring notification, In the event of a breach of any of Comp Therapy's security obligations, or any other event requiring notification under applicable law, Comp Therapy agrees to:
  - a. Immediately notify Client of such event with 24 hours of discovery; and
  - b. Cooperate with Client to inform all such individuals in accordance with applicable laws; and
  - c. Indemnify, hold harmless, and defend Client and its Board Members, administrators, employees, agents, attorneys, volunteers, subcontractors, and related entities and persons, from and against any claims, damages, fees, or other harm related to such a data breach.
- C. Within thirty (30) days after termination of this Agreement, Comp Therapy will return all personally identifiable information that is in written, electronic, or other tangible form, computer memory, or any hard copy records to Client as well as purge any copies of the personally identifiable information. Comp Therapy agrees to require all employees, contractors, or agents of any kind working on the project to comply with this provision.

## 16. Force Majeure

- A. The obligations of the parties to this Agreement are subject to prevention or delay caused by events that are outside of their reasonable control, including, but not limited to, natural disasters, acts of terrorism, riots, wars, epidemics, or any other similar cause, provided that the parties have taken all reasonable steps to avoid or mitigate the effects of any such event.



Any party may change its address for purposes of this Section by giving the other party written notice as provide in this Section.

The parties, intending to be legally bound, duly execute this Agreement as of the date stated above.

**CLIENT**

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Email Invoices to: \_\_\_\_\_ Email Address: \_\_\_\_\_

**Comp Therapy**

Printed Name: Niki Daduryan, MS, CCC-SLP Title: Director

Signature: *Niki Daduryan* Date: 05/24/2023

**Exhibit A**

**ASSESSMENT, SERVICE AND CONSULTATION FEE**

Assessment / Service / Consultation Type	Hourly Rate
Program Administrator/Consultation	\$ 220
Adapted Physical Education (APE)	\$ 145
Assistive Technology (AT)	\$ 145
Augmentative Alternative Communication (AAC)	\$ 145
Behavior Intervention Implementation (BII) [CPI and ABA Trained]	\$ 52
Behavior Intervention Development (BID)	\$ 124
Functional Behavior Assessment (FBA) Completed by Board Certified Behavioral Analyst (BCBA)	\$ 124
Case Manager / Academic Assessment	\$ 113
Marriage and Family Therapist (MFT)	\$ 124
Pupil Personnel Counselor (PPS)	\$ 106
Deaf and Hard of Hearing (DHH)	\$ 157
Health Services	
Certified Nursing Assistant (CNA)	\$ 48
Licensed Vocational Nurse (LVN)	\$ 58
School Nurse/Registered Nurse (RN)	\$ 113
Health Assessment	\$ 375 flat rate
Vision, Hearing, and Scoliosis Screening	\$ 9 per student
Occupational Therapist (OT)	\$ 124
Certified Occupational Therapist Assistant (COTA)	\$ 94
Psycho-Educational Assessment	\$ 124
Psycho-Educational Assessment – Bilingual	\$ 146
Specialized Academic Instructor (SAI)	\$ 81
Specialized Academic Instructor Aide (SAIA)	\$ 52
Speech-Language Pathologist (SLP)	\$ 124
Speech-Language Pathologist Assistant (SLPA)	\$ 94
Interpreter Services	
Translation Services – Written Reports/IEPs	\$ 113
Independent Education Evaluation - IEE	\$ 195

**In compliance with California law and code, Comp Therapy and Client must ensure that all its non-exempt employees are provided with the required number of breaks as prescribed by law when services are provided at Client work site.**

## ASSESSMENTS

**For Scheduled Assessments:** To avoid a 3-hour service fee, Client must notify the assessor or Comp Therapy at least one business day in advance, if there will be a change in school/student schedule or if the student is absent. Once assessor is in-route or on site, and unable to assess student, Client will be charged a 3-hour service fee.

**Off Site Hours:** Off-site hours will be billed in 15-minute increments. Assessment Reports, IEP Development, Consultations/Collaboration, or Interviews may be completed off-site.

**RUSH Rate:** If Client requests an assessment to be completed in less than 40 calendar days or less of deadline. Client will be charged RUSH RATE of \$155 per hour. Health Assessment RUSH Rate will be charged at \$450 per assessment.

## SERVICES

**Program Administrator Fee:** There is an annual one-time Program Set-up fee of \$450 for each school site. This includes the initial meeting and coordination with school personnel for assessments needs and special education services and coordination throughout the school year.

**Minimum Service Charge:** There is a 3-hour on-site minimum for all service providers, except BII/SAIA services have a 6-hour on-site minimum.

**Schedule Change:** If Client does not provide Comp Therapy with at least one business days' notice of a student absence or change in the school/student schedule, Client will be charged an amount equal to the scheduled service.

**BII/SAIA Student Service:** If a student is absent or the schedule is changed without notifying BII/SAIA, the Client will be charged a 6-hour service fee. BII/SAIA must be notified of any changes in the student's schedule prior to them being in-route or at the school site. The Client reserves the right to retain the BII/SAIA on site to carry out other duties within their scope of practice during the student's absence.

**Cancellation of Meetings:** If a meeting is canceled or postponed, Client must inform provider at least one day in advance. If Client fails to do so, they will be charged a 1-hour service fee.

**Off Site Hours:** Off-site hours will be billed in 15-minute increments which may include: IEP Development, Documentation/Prep, and Consultations.

**Request for Providers:** Clients can reserve service providers or assessors in advance; however, Comp Therapy does not guarantee a specific service provider or assessor may be available. When assigning providers, Comp Therapy always evaluates the needs of each Client.

**IMPORTANT:** All provider inquiries and change in providers must first be communicated with Comp Therapy Director and not directly with the provider.



## Billing Descriptions for Related Service Providers

Description	Action Item	Average Billing	Maximum Billing
<b>Direct Services</b>	Provide direct services to students	Start to End Time	Start to End Time
<b>Documentation</b>	Session Notes	5 mins per student	10 mins per student
<b>Prep Time/ Treatment Planning</b>	Prep Time (per school)	30 mins per day	1 hour per day
<b>IEP Development</b>	Preparation for IEP meeting per student - Record/data review - Reporting on previous goals - Parent/teacher consult - Updating present levels of performance - Creating new goals - Updating services - Updating IEP information before/after IEP meeting to reflect IEP team discussion	1 hour	2 hours
<b>IEP Meeting</b>	IEP Meeting	Start to End Time	Start to End Time
<b>Caseload Service</b>	Review PLP/goals, add one new student to current caseload, update schedule	15	30
	Set-up new caseload of more than one student. Review PLP/goals, create schedule/groups	Start to End Time	Start to End Time
	Service Delivery Report (weekly, monthly)	15	30
	Progress reports (due during Report Card period; 3-4 times per year)	5 mins per student	10 mins per student
<b>Collaboration</b>	Teacher/Parent Consultation	Start to End Time	Start to End Time
	Collaboration with school site lead / sped team (email, phone, text, in-person, teleconference)	Start to End Time	Start to End Time

## Coversheet

### Consider and Vote on the Purchase of Instructional Materials from McGraw-Hill

**Section:** III. Items Scheduled for Information and Potential Action  
**Item:** F. Consider and Vote on the Purchase of Instructional Materials from McGraw-Hill  
**Purpose:** Vote  
**Submitted by:**  
**Related Material:**  
McGraw-Hill 3 Year Quote - TEACH TECH CHARTER HIGH SCH 05.22.23.pdf  
McGraw-Hill 3 Year Quote - TEACH PREP MSC EHM ELEM 05.22.23.pdf  
McGraw-Hill 3 Year Quote - TEACH ACAD OF TECHNOLOGIES MS 05.22.23.pdf



Because learning changes everything.®

**QUOTE PREPARED FOR:**

TEACH TECH CHARTER HIGH SCH  
 10000 S WESTERN AVE  
 LOS ANGELES, CA 90047-4254  
 ACCOUNT NUMBER: 7668261

**SUBSCRIPTION/DIGITAL CONTACT:**

**CONTACT:**

**SALES REP INFORMATION:**

Gerren Bennett  
 gerren.bennett@mheducation.com

Section Summary	Value of All Materials	Free Materials	Product Subtotal
<a href="#">CA Study Sync Silver Package B: 3-Year Bound</a>	\$0.00	\$0.00	\$0.00
<a href="#">Grade 9</a>	\$14,834.44	(\$1,247.68)	\$13,586.76
<a href="#">Grade 10</a>	\$14,834.44	(\$1,247.68)	\$13,586.76
<a href="#">Grade 11</a>	\$14,834.44	(\$1,247.68)	\$13,586.76
<a href="#">Grade 12</a>	\$11,540.68	(\$1,247.68)	\$10,293.00
<a href="#">CA IMPACT Grade 10 - World History, Culture, &amp; Geography: The Modern World</a>	\$21,129.32	(\$1,731.92)	\$19,397.40
<a href="#">CA IMPACT Grade 11 - United States History &amp; Geography: Continuity &amp; Change</a>	\$21,129.32	(\$1,731.92)	\$19,397.40
<a href="#">CA IMPACT Grade 12 - Principles of Economics</a>	\$18,024.36	(\$1,833.36)	\$16,191.00
<a href="#">CA IMPACT Grade 12 - Principles of American Democracy</a>	\$18,024.36	(\$1,833.36)	\$16,191.00
<a href="#">CA Inspire Biology</a>	\$16,354.52	(\$1,447.76)	\$14,906.76
<a href="#">CA Inspire Chemistry</a>	\$16,354.52	(\$1,447.76)	\$14,906.76
<a href="#">Cunningham, Principles of Environmental Science, 2023, 1e</a>	\$14,472.24	(\$968.64)	\$13,503.60
<a href="#">Professional Development</a>	\$10,500.00	\$0.00	\$10,500.00
<b>PRODUCT TOTAL *</b>	\$192,032.64	(\$15,985.44)	\$176,047.20
<b>ESTIMATED S&amp;H**</b>			\$4,518.97
<b>ESTIMATED TAX**</b>			\$15,726.98
<b>GRAND TOTAL *</b>			<b>\$196,293.15</b>

\* Price firm for 45 days from quote date. Price quote must be attached to school purchase order to receive the quoted price and free materials.

\*\*Shipping and handling charges shown are only estimates. Actual shipping and handling charges will be applied at time of order. Taxes shown are only estimates. If applicable, actual tax charges will be applied at time of order.

Comments:

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**SEND ORDER TO:**

McGraw Hill LLC | PO Box 182605 | Columbus, OH 43218-2605  
 Email: orders\_mhe@mheducation.com | Phone: 1-800-780-0246 | Fax: 1-866-513-8081

QUOTE DATE: 05/22/2023

ACCOUNT NAME: TEACH TECH CHARTER HIGH SCH

EXPIRATION DATE: 07/06/2023

QUOTE NUMBER: JMCCO-05222023122759-001

ACCOUNT #: 7668261

PAGE #: 1



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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
<b>CA Study Sync Silver Package B: 3-Year Bound</b>					

**CA Study Sync Silver Package B: 3-Year Bound Subtotal: \$0.00 \$0.00**

**Grade 9**

Student Resources

STUDYSYNC G9 CALIFORNIA 3/3 STDNT W/DESIGNATED ELD & RW 3 YEAR BUNDLE	978-0-07-905736-5	132	\$102.93	\$0.00	\$13,586.76
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**Student Resources Subtotal: \$0.00 \$13,586.76**

Teacher Resources

STUDYSYNC GRADE 9 CALIFORNIA, ELD TEACHER RESOURCE COMPANION	978-1-94-276494-6	4	\$99.19	\$396.76	*Free Materials
STUDYSYNC CALIFORNIA TEACHER EDITION UNIT 1 GRADE 9	978-1-94-328660-7	4	\$23.19	\$92.76	*Free Materials
STUDYSYNC CALIFORNIA TEACHER EDITION UNIT 2 GRADE 9	978-1-94-328661-4	4	\$23.19	\$92.76	*Free Materials
STUDYSYNC CALIFORNIA TEACHER EDITION UNIT 3 GRADE 9	978-1-94-328662-1	4	\$23.19	\$92.76	*Free Materials
STUDYSYNC CALIFORNIA TEACHER EDITION UNIT 4 GRADE 9	978-1-94-328663-8	4	\$23.19	\$92.76	*Free Materials
STUDYSYNC CALIFORNIA ONLINE TEACHER WITH DESIGNATED ELD 3 YEAR SUBSCRIPTION	978-0-02-137937-8	4	\$119.97	\$479.88	*Free Materials

**Teacher Resources Subtotal: \$1,247.68 \$0.00**

**Grade 9 Subtotal: \$1,247.68 \$13,586.76**

**Grade 10**

Student Resources

STUDYSYNC G10 CALIFORNIA 3/3 STDNT W/DESIGNATED ELD & RW 3 YEAR BUNDLE	978-0-07-905737-2	132	\$102.93	\$0.00	\$13,586.76
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**Student Resources Subtotal: \$0.00 \$13,586.76**

Teacher Resources

STUDYSYNC GRADE 10 CALIFORNIA, ELD TEACHER RESOURCE COMPANION	978-1-94-276495-3	4	\$99.19	\$396.76	*Free Materials
STUDYSYNC CALIFORNIA TEACHER EDITION UNIT 1 GRADE 10	978-1-94-328664-5	4	\$23.19	\$92.76	*Free Materials
STUDYSYNC CALIFORNIA TEACHER EDITION UNIT 2 GRADE 10	978-1-94-328665-2	4	\$23.19	\$92.76	*Free Materials
STUDYSYNC CALIFORNIA TEACHER EDITION UNIT 3 GRADE 10	978-1-94-328666-9	4	\$23.19	\$92.76	*Free Materials
STUDYSYNC CALIFORNIA TEACHER EDITION UNIT 4 GRADE 10	978-1-94-328667-6	4	\$23.19	\$92.76	*Free Materials
STUDYSYNC CALIFORNIA ONLINE TEACHER WITH DESIGNATED ELD 3 YEAR SUBSCRIPTION	978-0-02-137937-8	4	\$119.97	\$479.88	*Free Materials

**Teacher Resources Subtotal: \$1,247.68 \$0.00**

**Grade 10 Subtotal: \$1,247.68 \$13,586.76**

**Grade 11**

Student Resources

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Email: orders\_mhe@mheducation.com | Phone: 1-800-780-0246 | Fax: 1-866-513-8081

QUOTE DATE: 05/22/2023

ACCOUNT NAME: TEACH TECH CHARTER HIGH SCH

EXPIRATION DATE: 07/06/2023

QUOTE NUMBER: JMCCO-05222023122759-001

ACCOUNT #: 7668261

PAGE #: 2



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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
STUDYSYNC G11 CALIFORNIA 3/3 STDNT W/DESIGNATED ELD & RW 3 YEAR BUNDLE	978-0-07-905741-9	132	\$102.93	\$0.00	\$13,586.76

**Student Resources Subtotal: \$0.00 \$13,586.76**

<b>Teacher Resources</b>					
STUDYSYNC GRADE 11 CALIFORNIA, ELD TEACHER RESOURCE COMPANION	978-1-94-276496-0	4	\$99.19	\$396.76	*Free Materials
STUDYSYNC CALIFORNIA TEACHER EDITION UNIT 1 GRADE 11	978-1-94-328668-3	4	\$23.19	\$92.76	*Free Materials
STUDYSYNC CALIFORNIA TEACHER EDITION UNIT 2 GRADE 11	978-1-94-328669-0	4	\$23.19	\$92.76	*Free Materials
STUDYSYNC CALIFORNIA TEACHER EDITION UNIT 3 GRADE 11	978-1-94-328670-6	4	\$23.19	\$92.76	*Free Materials
STUDYSYNC CALIFORNIA TEACHER EDITION UNIT 4 GRADE 11	978-1-94-328671-3	4	\$23.19	\$92.76	*Free Materials
STUDYSYNC CALIFORNIA ONLINE TEACHER WITH DESIGNATED ELD 3 YEAR SUBSCRIPTION	978-0-02-137937-8	4	\$119.97	\$479.88	*Free Materials

**Teacher Resources Subtotal: \$1,247.68 \$0.00**

**Grade 11 Subtotal: \$1,247.68 \$13,586.76**

<b>Grade 12 Student Resources</b>					
STUDYSYNC G12 CALIFORNIA 3/3 STDNT W/DESIGNATED ELD & RW 3 YEAR BUNDLE	978-0-07-905742-6	100	\$102.93	\$0.00	\$10,293.00

**Student Resources Subtotal: \$0.00 \$10,293.00**

<b>Teacher Resources</b>					
STUDYSYNC GRADE 12 CALIFORNIA, ELD TEACHER RESOURCE COMPANION	978-1-94-276497-7	4	\$99.19	\$396.76	*Free Materials
STUDYSYNC CALIFORNIA TEACHER EDITION UNIT 1 GRADE 12	978-1-94-328672-0	4	\$23.19	\$92.76	*Free Materials
STUDYSYNC CALIFORNIA TEACHER EDITION UNIT 2 GRADE 12	978-1-94-328673-7	4	\$23.19	\$92.76	*Free Materials
STUDYSYNC CALIFORNIA TEACHER EDITION UNIT 3 GRADE 12	978-1-94-328674-4	4	\$23.19	\$92.76	*Free Materials
STUDYSYNC CALIFORNIA TEACHER EDITION UNIT 4 GRADE 12	978-1-94-328675-1	4	\$23.19	\$92.76	*Free Materials
STUDYSYNC CALIFORNIA ONLINE TEACHER WITH DESIGNATED ELD 3 YEAR SUBSCRIPTION	978-0-02-137937-8	4	\$119.97	\$479.88	*Free Materials

**Teacher Resources Subtotal: \$1,247.68 \$0.00**

**Grade 12 Subtotal: \$1,247.68 \$10,293.00**

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**SEND ORDER TO:**

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 Email: orders\_mhe@mheducation.com | Phone: 1-800-780-0246 | Fax: 1-866-513-8081

QUOTE DATE: 05/22/2023      ACCOUNT NAME: TEACH TECH CHARTER HIGH SCH      EXPIRATION DATE: 07/06/2023  
 QUOTE NUMBER: JMCCO-05222023122759-001      ACCOUNT #: 7668261      PAGE #: 3



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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
<b>CA IMPACT Grade 10 - World History, Culture, &amp; Geography: The Modern World</b>					
<b>Student Resources</b>					
IMPACT CA G10 CMP DGT&PRNT STDNT 4YRBDL W/SS BLASTS WRLDHIST CULTR&GEOG MDRNWRLD	978-0-07-687965-6	132	\$146.95	\$0.00	\$19,397.40

**Student Resources Subtotal: \$0.00 \$19,397.40**

<b>Teacher Resources</b>					
IMPACT CALIFORNIA G10 TEACHER EDITION WORLD HISTORY CULTURE & GEOGRAPHY	978-0-07-675578-3	4	\$153.79	\$615.16	*Free Materials



IMPACT CALIFORNIA G10 CHPTR TSTS & LESSN QUIZZ WRLD HIST CULTRE&GEOGTHE MDRNRWRLD	978-0-07-906373-1	4	\$28.60	\$114.40	*Free Materials
IMPACT CA G10 OTE 4 YR SUBSC WORLD HISTORY CULTURE & GEOGRAPHY THE MODERN WORLD	978-0-07-695548-0	4	\$231.00	\$924.00	*Free Materials
SOCIAL STUDIES STUDYSYNC CALIFORNIA BLASTS ADD-ON TEACHER 4 YR SUB (CONNECT2)	978-0-07-691165-3	4	\$19.59	\$78.36	*Free Materials

Teacher Resources Subtotal: \$1,731.92 \$0.00

CA IMPACT Grade 10 - World History, Culture, & Geography: The Modern World Subtotal: \$1,731.92 \$19,397.40

**CA IMPACT Grade 11 - United States History & Geography: Continuity & Change**

Student Resources

IMPACT CA G11 CMPLT DGTL&PRNT SE 4YR BNDL W/STUDYSYNC BLASTS US HIST GEOG CC	978-0-07-688141-3	132	\$146.95	\$0.00	\$19,397.40
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Student Resources Subtotal: \$0.00 \$19,397.40

Teacher Resources

IMPACT CALIFORNIA G11 TEACHER EDITION UNITED STATES HISTORY & GEOGRAPHY	978-0-07-675583-7	4	\$153.79	\$615.16	*Free Materials
IMPACT CALIFORNIA G11 CHAPTER TESTS AND LESSON QUIZZES US HISTORY & GEOGRAPHY	978-0-07-906379-3	4	\$28.60	\$114.40	*Free Materials
IMPACT CA G11 OTE 4YR SUBSC UNITED STATES HISTORY & GEOGRAPHY CONTINUITY & CHANGE	978-0-07-695557-2	4	\$231.00	\$924.00	*Free Materials
SOCIAL STUDIES STUDYSYNC CALIFORNIA BLASTS ADD-ON TEACHER 4 YR SUB (CONNECT2)	978-0-07-691165-3	4	\$19.59	\$78.36	*Free Materials

Teacher Resources Subtotal: \$1,731.92 \$0.00

CA IMPACT Grade 11 - United States History & Geography: Continuity & Change Subtotal: \$1,731.92 \$19,397.40

**CA IMPACT Grade 12 - Principles of Economics**

Student Resources

IMPACT CA G12 CMPLT DGTL & PRNT STDNT 4YR BNDL W/STUDYSYNC BLASTS PRIN OF ECON	978-0-07-688177-2	100	\$161.91	\$0.00	\$16,191.00
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Student Resources Subtotal: \$0.00 \$16,191.00

Teacher Resources

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QUOTE DATE: 05/22/2023 ACCOUNT NAME: TEACH TECH CHARTER HIGH SCH EXPIRATION DATE: 07/06/2023  
 QUOTE NUMBER: JMCCO-05222023122759-001 ACCOUNT #: 7668261 PAGE #: 4



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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
IMPACT CALIFORNIA G12 TEACHER EDITION PRINCIPLES OF ECONOMICS	978-0-07-675557-8	4	\$153.79	\$615.16	*Free Materials
IMPACT CALIFORNIA G12 CHAPTER TESTS AND LESSON QUIZZES PRINCIPLES OF ECONOMICS	978-0-07-906380-9	4	\$53.96	\$215.84	*Free Materials
IMPACT CA G12 ONLINE TEACHER EDITION 4 YEAR SUBSCRIPTION PRINCIPLES OF ECONOMICS	978-0-07-695596-1	4	\$231.00	\$924.00	*Free Materials
SOCIAL STUDIES STUDYSYNC CALIFORNIA BLASTS ADD-ON TEACHER 4 YR SUB (CONNECT2)	978-0-07-691165-3	4	\$19.59	\$78.36	*Free Materials

Teacher Resources Subtotal: \$1,833.36 \$0.00

CA IMPACT Grade 12 - Principles of Economics Subtotal: \$1,833.36 \$16,191.00

**CA IMPACT Grade 12 - Principles of American Democracy**

Student Resources

IMPACT CA G12 CMPLT DGTL & PRNT SE 4YR BND W/STUDYSYNC BLASTS	978-0-07-688141-3	132	\$146.95	\$0.00	\$19,397.40
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PRIN OF AMER DEMOCRACY	978-0-07-666190-1	100	\$101.91	\$0.00	\$10,191.00
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**Student Resources Subtotal: \$0.00 \$16,191.00**

<b>Teacher Resources</b>					
IMPACT CALIFORNIA G12 TEACHER EDITION PRINCIPLES OF AMERICAN DEMOCRACY	978-0-07-675560-8	4	\$153.79	\$615.16	*Free Materials
IMPACT CALIFORNIA G12 ONLINETE 4YR SUBSCRIPTION PRINCIPLES OF AMERICAN DEMOCRACY	978-0-07-695579-4	4	\$231.00	\$924.00	*Free Materials
SOCIAL STUDIES STUDYSYNC CALIFORNIA BLASTS ADD-ON TEACHER 4 YR SUB (CONNECT2)	978-0-07-691165-3	4	\$19.59	\$78.36	*Free Materials
IMPACT CALIFORNIA G12 CHPTR TSTS & LESSON QUIZZES PRINCPLS OF AMERICAN DEMOCRACY	978-0-07-906383-0	4	\$53.96	\$215.84	*Free Materials

**Teacher Resources Subtotal: \$1,833.36 \$0.00**

**CA IMPACT Grade 12 - Principles of American Democracy Subtotal: \$1,833.36 \$16,191.00**

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QUOTE DATE: 05/22/2023      ACCOUNT NAME: TEACH TECH CHARTER HIGH SCH      EXPIRATION DATE: 07/06/2023  
 QUOTE NUMBER: JMCCO-05222023122759-001      ACCOUNT #: 7668261      PAGE #: 5



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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
<b>CA Inspire Biology</b>					
<b>Student Resources</b>					
INSPIRE BIOLOGY CALIFORNIA COMPLETE STUDENT 3 YEAR BUNDLE	978-0-07-696692-9	132	\$112.93	\$0.00	\$14,906.76

**Student Resources Subtotal: \$0.00 \$14,906.76**

<b>Teacher Resources</b>					
CALIFORNIA BIOLOGY TEACHER WALKAROUND EDITION	978-0-07-683066-4	4	\$202.23	\$808.92	*Free Materials
INSPIRE BIOLOGY CALIFORNIA ETEACHER EDITION 3 YEAR SUBSCRIPTION	978-0-07-696681-3	4	\$126.00	\$504.00	*Free Materials
INSPIRE CA HIGH SCHOOL PROGRAM GUIDE A TEACHERS TOUR (PDLSE)	978-0-07-687517-7	4	\$11.24	\$44.96	*Free Materials
INSPIRE SCIENCE CA G9-12 CAST INSPIRING CAST SUCCESS GUIDE	978-0-07-683067-1	4	\$22.47	\$89.88	*Free Materials

**Teacher Resources Subtotal: \$1,447.76 \$0.00**

**CA Inspire Biology Subtotal: \$1,447.76 \$14,906.76**

<b>CA Inspire Chemistry</b>					
<b>Student Resources</b>					
INSPIRE CHEMISTRY CALIFORNIA COMPLETE STUDENT 3 YEAR BUNDLE	978-0-07-696711-7	132	\$112.93	\$0.00	\$14,906.76

**Student Resources Subtotal: \$0.00 \$14,906.76**

<b>Teacher Resources</b>					
CALIFORNIA CHEMISTRY TEACHER WALKAROUND EDITION	978-0-07-683072-5	4	\$202.23	\$808.92	*Free Materials
INSPIRE CHEMISTRY CALIFORNIA ETEACHER EDITION 3 YEAR SUBSCRIPTION	978-0-07-696702-5	4	\$126.00	\$504.00	*Free Materials
INSPIRE CA HIGH SCHOOL PROGRAM GUIDE A TEACHERS TOUR (PDLSD)	978-0-07-687517-7	4	\$11.24	\$44.96	*Free Materials
INSPIRE SCIENCE CA G9-12 CAST INSPIRING CAST SUCCESS GUIDE	978-0-07-683067-1	4	\$22.47	\$89.88	*Free Materials

**Teacher Resources Subtotal: \$1,447.76 \$0.00**  
**CA Inspire Chemistry Subtotal: \$1,447.76 \$14,906.76**

<b>Cunningham, Principles of Environmental Science, 2023, 1e</b>					
CUNNINGHAM PRINCIPLES OF ENVIRONMENTAL SCIENCE 2023 1E PREMIUM STDNT BUNDLE 3YR SUB	978-1-26-574054-2	132	\$102.30	\$0.00	\$13,503.60
CUNNINGHAM PRINCIPLES OF ENVIRONMENTAL SCIENCE 2023 1E TEACHER MANUAL	978-0-07-700651-8	4	\$43.23	\$172.92	*Free Materials
CUNNINGHAM PRINCIPLES OF ENVIRONMENTAL SCIENCE 2023 1E 3YR TEACHER SUBSCRIPTION	978-1-26-573827-3	4	\$198.93	\$795.72	*Free Materials

**Cunningham, Principles of Environmental Science, 2023, 1e Subtotal: \$968.64 \$13,503.60**

**Professional Development**

**PLEASE INCLUDE THIS PROPOSAL WITH YOUR PURCHASE ORDER**

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QUOTE DATE: 05/22/2023      ACCOUNT NAME: TEACH TECH CHARTER HIGH SCH      EXPIRATION DATE: 07/06/2023  
 QUOTE NUMBER: JMCCO-05222023122759-001      ACCOUNT #: 7668261      PAGE #: 6



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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
PROFESSIONAL DEVELOPMENT ONSITE TRAINING K-5	978-1-26-452859-2	3	\$3,500.00	\$0.00	\$10,500.00

Complimentary Back to School Sessions are also available.

**Professional Development Subtotal: \$0.00 \$10,500.00**

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 Email: orders\_mhe@mheducation.com | Phone: 1-800-780-0246 | Fax: 1-866-513-8081

QUOTE DATE: 05/22/2023 ACCOUNT NAME: TEACH TECH CHARTER HIGH SCH EXPIRATION DATE: 07/06/2023  
 QUOTE NUMBER: JMCCO-05222023122759-001 ACCOUNT #: 7668261 PAGE #: 7



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**QUOTE PREPARED FOR:**

TEACH TECH CHARTER HIGH SCH  
 10000 S WESTERN AVE  
 LOS ANGELES, CA 90047-4254  
 ACCOUNT NUMBER: 7668261

**CONTACT:**

VALUE OF ALL MATERIALS	\$192,032.64
FREE MATERIALS	(\$15,985.44)
<b>PRODUCT TOTAL*</b>	<b>\$176,047.20</b>
ESTIMATED SHIPPING & HANDLING**	\$4,518.97
ESTIMATED TAX**	\$15,726.98
<b>GRAND TOTAL</b>	<b>\$196,293.15</b>

**SUBSCRIPTION/DIGITAL CONTACT:**

Comments:

\* Price firm for 45 days from quote date. Price quote must be attached to school purchase order to receive the quoted price and free materials.

\*\*Shipping and handling charges shown are only estimates. Actual shipping and handling charges will be applied at time of order. Taxes shown are only estimates. If applicable, actual tax charges will be applied at time of order.

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[Terms Of Service](#)

[Provisions required by Subscriber State law](#)

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accept credit card orders via email, fax, or mail/package delivery. Credit card orders may be placed over the phone by calling the number listed above or via our websites by visiting [www.mheducation.com](http://www.mheducation.com) (or [www.mhecoast2coast.com](http://www.mhecoast2coast.com)).

School Purchase Order Number: \_\_\_\_\_

\_\_\_\_\_  
Name of School Official (Please Print)

\_\_\_\_\_  
Signature of School Official

**PLEASE INCLUDE THIS PROPOSAL WITH YOUR PURCHASE ORDER**

**SEND ORDER TO:** McGraw Hill LLC | PO Box 182605 | Columbus, OH 43218-2605  
Email: [orders\\_mhe@mheducation.com](mailto:orders_mhe@mheducation.com) | Phone: 1-800-780-0246 | Fax: 1-866-513-8081

QUOTE DATE:	05/22/2023	ACCOUNT NAME: TEACH TECH CHARTER HIGH SCH	EXPIRATION DATE:	07/06/2023
QUOTE NUMBER:	JMCCO-05222023122759-001	ACCOUNT #: 7668261	PAGE #:	8



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**QUOTE PREPARED FOR:**

TEACH PREP MSC EHM ELEM  
8505 S WESTERN AVE  
Los Angeles, CA 90047-3053  
ACCOUNT NUMBER: 12989339

**SUBSCRIPTION/DIGITAL CONTACT:**

**SALES REP INFORMATION:**

Gerren Bennett  
gerren.bennett@mheducation.com

**CONTACT:**

Section Summary	Value of All Materials	Free Materials	Product Subtotal
<a href="#">WORLD OF WONDERS_3-YEAR</a>	\$7,973.12	\$0.00	\$7,973.12
<a href="#">California Wonders</a>	\$0.00	\$0.00	\$0.00
<a href="#">Grade K</a>	\$32,520.60	(\$17,106.74)	\$15,413.86
<a href="#">Grade 1</a>	\$38,991.52	(\$16,166.54)	\$22,824.98
<a href="#">Grade 2</a>	\$33,824.92	(\$15,024.04)	\$18,800.88
<a href="#">Grade 3</a>	\$31,818.66	(\$13,310.18)	\$18,508.48
<a href="#">Grade 4</a>	\$31,940.10	(\$13,545.86)	\$18,394.24
<a href="#">REVEAL MATH @ 2022 - GRADE K</a>	\$5,623.86	(\$1,172.76)	\$4,451.10
<a href="#">REVEAL MATH @ 2022 - GRADE 1</a>	\$7,059.96	(\$1,172.76)	\$5,887.20
<a href="#">REVEAL MATH @ 2022 - GRADE 2</a>	\$7,059.96	(\$1,172.76)	\$5,887.20
<a href="#">REVEAL MATH @ 2022 - GRADE 3</a>	\$7,059.96	(\$1,172.76)	\$5,887.20
<a href="#">REVEAL MATH @ 2022 - GRADE 4</a>	\$7,059.96	(\$1,172.76)	\$5,887.20
<a href="#">CA Impact TK_3-Year</a>	\$3,031.56	(\$759.00)	\$2,272.56
<a href="#">CA IMPACT Grade K: Learning and Working Now and Long Ago</a>	\$5,322.86	(\$2,566.86)	\$2,756.00
<a href="#">CA IMPACT Grade 1: A Child's Place in Time and Space</a>	\$5,820.32	(\$1,292.88)	\$4,527.44
<a href="#">CA IMPACT Grade 2: People Who Make a Difference</a>	\$5,820.32	(\$1,292.88)	\$4,527.44
<a href="#">CA IMPACT Grade 3: Continuity and Change</a>	\$6,226.88	(\$1,302.32)	\$4,924.56
<a href="#">CA IMPACT Grade 4: A Changing State</a>	\$6,226.88	(\$1,302.32)	\$4,924.56
<a href="#">CA Inspire Science - TK</a>	\$1,185.32	\$0.00	\$1,185.32
<a href="#">CA Inspire Science Grade K</a>	\$10,825.32	(\$2,669.00)	\$8,156.32
<a href="#">CA Inspire Science Grade 1</a>	\$10,441.08	(\$2,669.00)	\$7,772.08
<a href="#">CA Inspire Science Grade 2</a>	\$10,763.62	(\$2,702.06)	\$8,061.56
<a href="#">CA Inspire Science Grade 3</a>	\$11,614.78	(\$2,836.50)	\$8,778.28
<a href="#">CA Inspire Science Grade 4</a>	\$15,589.22	(\$2,836.50)	\$12,752.72
<a href="#">Professional Development</a>	\$7,000.00	\$0.00	\$7,000.00

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QUOTE DATE: 05/22/2023  
QUOTE NUMBER: JMCCO-05222023115153-001

ACCOUNT NAME: TEACH PREP MSC EHM ELEM  
ACCOUNT #: 12989339

EXPIRATION DATE: 07/06/2023  
PAGE #: 1



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<b>PRODUCT TOTAL*</b>	\$310,800.78	(\$103,246.48)	\$207,554.30
<b>ESTIMATED S&amp;H**</b>			\$8,887.51
<b>ESTIMATED TAX**</b>			\$19,130.85
<b>GRAND TOTAL*</b>			\$235,572.66

\* Price firm for 45 days from quote date. Price quote must be attached to school purchase order to receive the quoted price and free materials.

\*\*Shipping and handling charges shown are only estimates. Actual shipping and handling charges will be applied at time of order. Taxes shown are only estimates. If applicable, actual tax charges will be applied at time of order.

Comments:

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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
<b>WORLD OF WONDERS, 3-YEAR</b>					
WORLD OF WONDERS KIT 3 YEAR SUBSCRIPTION BUNDLE	978-0-07-904621-5	2	\$3,502.75	\$0.00	\$7,005.50
<b>*THE FOLLOWING ITEMS ARE INCLUDED IN THE WORLD OF WONDERS CLASSROOM KIT (20 student, 1 teacher)</b>					
*READING LITTLE WONDERS MY WORD BOOK GRADE PRE-K (Student consumable; 20 included)	978-0-07-666157-2	0	\$8.89	\$0.00	\$0.00
*WORLD OF WONDERS STUDENT WORKSPACE 3 YEAR SUBSCRIPTION (Student digital; 20 included)	978-0-07-904623-9	0	\$46.98	\$0.00	\$0.00
*WORLD OF WONDERS TEACHER EDITION PACKAGE GRADE PREK (10 volumes)	978-0-07-679213-9	0	\$1,138.30	\$0.00	\$0.00
*WORLD OF WONDERS TEACHER WORKSPACE 3 YEAR SUBSCRIPTION	978-0-07-904625-3	0	\$573.63	\$0.00	\$0.00
*WORLD OF WONDERS WELCOME HANDBOOK	978-0-07-678351-9	0	\$39.77	\$0.00	\$0.00
*GRADE K BIG BOOK OF NURSERY RHYMES	978-0-02-190169-2	0	\$126.09	\$0.00	\$0.00
*KINDERBOUND ASSESSMENT FLIP BOOK GRADE PREK-K	978-0-02-116116-4	0	\$136.78	\$0.00	\$0.00
*WORLD OF WONDERS SOCIAL EMOTIONAL FLIP CHART	978-0-07-678770-8	0	\$160.40	\$0.00	\$0.00
*WORLD OF WONDERS LITERACY AND LANGUAGE FLIP CHART	978-0-07-678766-1	0	\$164.61	\$0.00	\$0.00
*READING LITTLE WONDERS READ ALOUD ANTHOLOGY GRADE PREK	978-0-07-666150-3	0	\$61.99	\$0.00	\$0.00
*READING LITTLE WONDERS RETELLING CARD PACK GRADE PRE-K	978-0-07-666545-7	0	\$192.50	\$0.00	\$0.00
*WORLD OF WONDERS CONCEPT PICTURE CARDS	978-0-07-678768-5	0	\$147.44	\$0.00	\$0.00
*READING LITTLE WONDERS ORAL LANGUAGE CARD SET GRADE PRE-K	978-0-07-666544-0	0	\$230.77	\$0.00	\$0.00
*READING LITTLE WONDERS LARGE LETTER CARDS GRADE K-2	978-0-07-666408-5	0	\$108.40	\$0.00	\$0.00
*READING LITTLE WONDERS PHOTO CARDS GRADE PRE-K	978-0-07-666080-3	0	\$112.09	\$0.00	\$0.00
*READING LITTLE WONDERS LARGE ALPHABET CARDS GRADE K-2	978-0-07-666406-1	0	\$148.17	\$0.00	\$0.00
*WORLD OF WONDERS TRADE BOOK LIBRARY PACKAGE GRADE PREK (42 trade books)	978-0-07-679207-8	0	\$613.50	\$0.00	\$0.00
*WORLD OF WONDERS BIG BOOK PACKAGE GRADE PREK (8 big books)	978-0-07-679208-5	0	\$362.67	\$0.00	\$0.00
*WORLD OF WONDERS DECODABLE READERS PACKAGE (6 sets of 36 books)	978-0-07-679209-2	0	\$858.71	\$0.00	\$0.00
*WORLD OF WONDERS PATTERN BOOKS PACKAGE GRADE PREK (12 sets of 10 books)	978-0-07-679212-2	0	\$429.37	\$0.00	\$0.00
*WORLD OF WONDERS SOCIAL EMOTIONAL MINI BIG BOOK PACKAGE GRADE PREK (8 books)	978-0-07-679214-6	0	\$147.47	\$0.00	\$0.00
<b>*THE FOLLOWING ITEMS ARE INCLUDED IN THE WORLD OF WONDERS CLASSROOM KIT (20 student, 1 teacher) Subtotal:</b>				<b>\$0.00</b>	<b>\$0.00</b>
<b>ADDITIONAL MATERIALS</b>					
WORLD OF WONDERS PRE-K MANIPULATIVE KIT	978-0-02-197680-5	2	\$483.81	\$0.00	\$967.62
<b>ADDITIONAL MATERIALS Subtotal:</b>				<b>\$0.00</b>	<b>\$967.62</b>

WORLD OF WONDERS, 3-YEAR Subtotal: \$0.00 \$7,973.12

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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
<b>California Wonders</b>					
<b>Grade K</b>					
<b>Student Resources</b>					
READING WONDERS CALIFORNIA STUDENT EDITION 3 YEAR SUBSCRIPTION BUNDLE GRADE K	978-0-07-897128-0	50	\$100.12	\$0.00	\$5,006.00
READING WONDERS CALIFORNIA CLOSE READING COMPANION 3 YEAR PRINT BUNDLE GRADE K	978-0-07-897165-5	50	\$28.15	\$0.00	\$1,407.50
READING WONDERS CALIFORNIA YOUR TURN PRACTICE BOOK 3 YEAR PRINT BUNDLE GRADE K	978-0-07-897163-1	50	\$31.23	\$1,561.50	*Free Materials
<b>Student Resources Subtotal:</b>				<b>\$1,561.50</b>	<b>\$6,413.50</b>
<b>Teacher Resources</b>					
READING WONDERS CALIFORNIA TEACHER EDITION PACKAGE GRADE K	978-0-02-142754-3	2	\$649.51	\$1,299.02	*Free Materials
READING WONDERS TEACHER WORKSPACE 3 YEAR SUBSCRIPTION GRADE K	978-0-07-676913-1	2	\$545.22	\$1,090.44	*Free Materials
READING WONDERS LEVELED READER LIBRARY PACKAGE APPROACHING GRADE K	978-0-02-119334-9	2	\$1,069.67	\$0.00	\$2,139.34
READING WONDERS LEVELED READER PACKAGE ON-LEVEL GRADE K	978-0-02-119490-2	2	\$1,069.67	\$0.00	\$2,139.34
READING WONDERS LEVELED READER LIBRARY PACKAGE BEYOND GRADE K	978-0-02-119337-0	2	\$1,069.67	\$0.00	\$2,139.34
READING WONDERS LEVELED READER LIBRARY PACKAGE ELL GRADE K	978-0-02-119464-3	2	\$1,069.67	\$0.00	\$2,139.34
READING WONDERS READING WRITING WORKSHOP BIG BOOK PACKAGE GRADE K	978-0-02-139262-9	2	\$550.35	\$1,100.70	*Free Materials
READING WONDERS BIG BOOKS PACKAGE GRADE K	978-0-02-119336-3	2	\$1,782.32	\$3,564.64	*Free Materials
READING WONDERS DECODABLE READERS PACKAGE 1 OF 11 BOOKS GRADE K	978-0-07-668125-9	2	\$122.27	\$244.54	*Free Materials
READING WONDERS SOUND SPELLING LARGE CARDS GRADES K-6	978-0-07-676809-7	2	\$144.35	\$288.70	*Free Materials



READING WONDERS INTERACTIVE READ ALOUD CARDS GRADE K	978-0-02-119369-1	2	\$166.89	\$333.78	*Free Materials
READING WONDERS VISUAL VOCABULARY CARDS GRADE K	978-0-02-119368-4	2	\$79.13	\$158.26	*Free Materials
READING WONDERS CALIFORNIA SBAC UNIT ASSESSMENT GRADE K	978-0-02-133973-0	2	\$124.10	\$248.20	*Free Materials
READING WONDERS CALIFORNIA SBAC BENCHMARK ASSESSMENT GRADE K	978-0-02-133086-7	2	\$74.92	\$149.84	*Free Materials

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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
READING WONDERS PLACEMENT AND DIAGNOSTIC ASSESSMENT GRADE K-6	978-0-07-677954-3	2	\$91.26	\$182.52	*Free Materials

**Teacher Resources Subtotal: \$8,660.64 \$8,557.36**

<b>Grade K ELD</b>					
READING WONDERS ENGLISH LEARNERS CALIFORNIA MY LANGUAGE BOOK GRADE K	978-0-02-131134-7	50	\$8.86	\$0.00	\$443.00
READING WONDERS ENGLISH LEARNERS STUDENT WORKSPACE 3 YR SUBSC 6 SEATS GRADE K	978-0-07-904562-1	10	\$536.46	\$5,364.60	*Free Materials
READING WONDERS ENGLISH LEARNERS CALIFORNIA TEACHER EDITION GRADE K	978-0-02-131451-5	2	\$199.31	\$398.62	*Free Materials
READING WONDERS ENGLISH LEARNERS TEACHER WORKSPACE 3 YEAR SUBSCRIPTION GRADE K	978-0-07-904526-3	2	\$121.50	\$243.00	*Free Materials
READING WONDERS ENGLISH LEARNERS LANGUAGE DEVELOPMENT PRACTICE BLM GRADE K-1	978-0-02-131423-2	2	\$107.47	\$214.94	*Free Materials
READING WONDERS ENGLISH LEARNERS LANGUAGE DEVELOPMENT CARDS GRADE K-1	978-0-02-130359-5	2	\$203.96	\$407.92	*Free Materials
READING WONDERS ENGLISH LEARNERS ASSESSMENT GRADE K	978-0-02-131137-8	2	\$124.10	\$248.20	*Free Materials
READING WONDERS FOR ENGLISH LEARNERS LANGUAGE TRANSFER HANDBOOK	978-0-02-139110-3	2	\$3.66	\$7.32	*Free Materials

**Grade K ELD Subtotal: \$6,884.60 \$443.00**  
**Grade K Subtotal: \$17,106.74 \$15,413.86**

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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
<b>Grade 1</b>					

<b>Student Resources</b>					
READING WONDERS CALIFORNIA STUDENT EDITION 3 YEAR SUBSCRIPTION BUNDLE GRADE 1	978-0-07-897129-7	68	\$170.39	\$0.00	\$11,586.52
READING WONDERS CALIFORNIA CLOSE READING COMPANION 3 YEAR PRINT BUNDLE GRADE 1	978-0-07-897168-6	68	\$28.15	\$0.00	\$1,914.20
READING WONDERS CALIFORNIA YOUR TURN PRACTICE BOOK 3 YEAR PRINT BUNDLE GRADE 1	978-0-07-897164-8	68	\$30.91	\$2,101.88	*Free Materials
<b>Student Resources Subtotal:</b>				<b>\$2,101.88</b>	<b>\$13,500.72</b>

<b>Teacher Resources</b>					
READING WONDERS CALIFORNIA TEACHER EDITION PACKAGE GRADE 1	978-0-02-142755-0	2	\$649.51	\$1,299.02	*Free Materials
READING WONDERS TEACHER WORKSPACE 3 YEAR SUBSCRIPTION GRADE 1	978-0-07-676915-5	2	\$545.22	\$1,090.44	*Free Materials
READING WONDERS LEVELED READER PACKAGE APPROACHING GRADE 1	978-0-02-119561-9	2	\$1,069.67	\$0.00	\$2,139.34
READING WONDERS LEVELED READER PACKAGE ON-LEVEL GRADE 1	978-0-02-119577-0	2	\$1,069.67	\$0.00	\$2,139.34
READING WONDERS LEVELED READER PACKAGE BEYOND GRADE 1	978-0-02-119662-3	2	\$1,069.67	\$0.00	\$2,139.34
READING WONDERS LEVELED READER PACKAGE ELL GRADE 1	978-0-02-119522-0	2	\$1,069.67	\$0.00	\$2,139.34
READING WONDERS LEVELED READER LESSON CARDS GRADE 1	978-0-02-129205-9	2	\$82.21	\$0.00	\$164.42
CORE READING READING WRITING WORKSHOP BIG BOOK PACKAGE GRADE 1	978-0-02-127499-4	2	\$300.20	\$600.40	*Free Materials
READING WONDERS LITERATURE BIG BOOKS PACKAGE GRADE 1	978-0-02-119524-4	2	\$955.30	\$1,910.60	*Free Materials
READING WONDERS DECODABLE READERS PACKAGE 1 OF 6 BOOKS GRADE 1	978-0-07-668126-6	2	\$78.16	\$156.32	*Free Materials
READING WONDERS INTERACTIVE READ ALOUD CARDS GRADE 1	978-0-02-119539-8	2	\$143.68	\$287.36	*Free Materials
READING WONDERS SOUND SPELLING LARGE CARDS GRADES K-6	978-0-07-676809-7	2	\$144.35	\$288.70	*Free Materials
READING WONDERS VISUAL VOCABULARY CARDS GRADE 1	978-0-02-119537-4	2	\$79.13	\$158.26	*Free Materials
READING WONDERS CALIFORNIA SBAC UNIT ASSESSMENT GRADE 1	978-0-02-136195-3	2	\$124.10	\$248.20	*Free Materials

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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
READING WONDERS CALIFORNIA WEEKLY ASSESSMENT GRADE 1	978-0-02-130204-8	2	\$63.04	\$126.08	*Free Materials
READING WONDERS CALIFORNIA SBAC BENCHMARK ASSESSMENT GRADE 1	978-0-02-130876-7	2	\$74.92	\$149.84	*Free Materials
READING WONDERS PLACEMENT AND DIAGNOSTIC ASSESSMENT GRADE K-6	978-0-07-677954-3	2	\$91.26	\$182.52	*Free Materials
<b>Teacher Resources Subtotal:</b>				<b>\$6,497.74</b>	<b>\$8,721.78</b>

<b>Grade 1 ELD</b>					
READING WONDERS ENGLISH LEARNERS CALIFORNIA MY LANGUAGE BOOK GRADE 1	978-0-02-130413-4	68	\$8.86	\$0.00	\$602.48
READING WONDERS ENGLISH LEARNERS STUDENT WORKSPACE 3 YR SUBSC 6 SEATS GRADE 1	978-0-07-904565-2	10	\$536.46	\$5,364.60	*Free Materials
READING WONDERS ENGLISH LEARNERS CALIFORNIA TEACHER EDITION GRADE 1	978-0-02-130364-9	2	\$210.70	\$421.40	*Free Materials
READING WONDERS ENGLISH LEARNERS TEACHER WORKSPACE 3 YEAR SUBSCRIPTION GRADE 1	978-0-07-904529-4	2	\$121.50	\$243.00	*Free Materials
READING WONDERS ENGLISH LEARNERS LANGUAGE DEVELOPMENT PRACTICE BLM GRADE K-1	978-0-02-131423-2	2	\$107.47	\$214.94	*Free Materials
READING WONDERS ENGLISH LEARNERS LANGUAGE DEVELOPMENT CARDS GRADE K-1	978-0-02-130359-5	2	\$203.96	\$407.92	*Free Materials
READING WONDERS ENGLISH LEARNERS ASSESSMENT GRADE 1	978-0-02-130999-3	2	\$124.10	\$248.20	*Free Materials
READING WONDERS ENGLISH LEARNERS RETELLING CARDS GRADE 1	978-0-02-132772-0	2	\$300.62	\$601.24	*Free Materials
READING WONDERS ENGLISH LEARNERS VISUAL VOCABULARY CARDS GRADE 1	978-0-02-139903-1	2	\$29.15	\$58.30	*Free Materials
READING WONDERS FOR ENGLISH LEARNERS LANGUAGE TRANSFER	978-0-02-130410-2	2	\$36.60	\$73.20	*Free Materials

HANDBOOK	978-0-02-139110-3	2	\$3.00	\$7.02	Free Materials
<b>Grade 1 ELD Subtotal:</b>				<b>\$7,566.92</b>	<b>\$602.48</b>
<b>Grade 1 Subtotal:</b>				<b>\$16,166.54</b>	<b>\$22,824.98</b>

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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
<b>Grade 2</b>					
<b>Student Resources</b>					
READING WONDERS CALIFORNIA STUDENT EDITION 3 YEAR SUBSCRIPTION BUNDLE GRADE 2	978-0-07-897132-7	68	\$87.50	\$0.00	\$5,950.00
READING WONDERS CALIFORNIA CLOSE READING COMPANION 3 YEAR PRINT BUNDLE GRADE 2	978-0-07-897169-3	68	\$28.15	\$0.00	\$1,914.20
READING WONDERS CALIFORNIA YOUR TURN PRACTICE BOOK 3 YEAR PRINT BUNDLE GRADE 2	978-0-07-897151-8	68	\$31.23	\$2,123.64	*Free Materials
<b>Student Resources Subtotal:</b>				<b>\$2,123.64</b>	<b>\$7,864.20</b>

<b>Teacher Resources</b>					
READING WONDERS CALIFORNIA TEACHER EDITION PACKAGE GRADE 2	978-0-02-142758-1	2	\$649.51	\$1,299.02	*Free Materials
READING WONDERS TEACHER WORKSPACE 3 YEAR SUBSCRIPTION GRADE 2	978-0-07-676916-2	2	\$545.22	\$1,090.44	*Free Materials
READING WONDERS LEVELED READER LIBRARY PACKAGE APPROACHING GRADE 2	978-0-02-118672-3	2	\$1,069.67	\$0.00	\$2,139.34
READING WONDERS LEVELED READER LIBRARY PACKAGE ON-LEVEL GRADE 2	978-0-02-119051-5	2	\$1,069.67	\$0.00	\$2,139.34
READING WONDERS LEVELED READER LIBRARY PACKAGE BEYOND GRADE 2	978-0-02-119052-2	2	\$1,069.67	\$0.00	\$2,139.34
READING WONDERS LEVELED READER LIBRARY PACKAGE ELL GRADE 2	978-0-02-118698-3	2	\$1,069.67	\$0.00	\$2,139.34
READING WONDERS - LEVELED READER LESSON CARDS GRADE 2	978-0-02-129206-6	2	\$82.21	\$164.42	*Free Materials
READING WONDERS DECODABLE READER PACKAGE 6 OF 6 GRADE 2	978-0-07-666171-8	2	\$448.85	\$897.70	*Free Materials
READING WONDERS INTERACTIVE READ ALOUD CARDS GRADE 2	978-0-02-118777-5	2	\$143.68	\$287.36	*Free Materials
READING WONDERS SOUND SPELLING LARGE CARDS GRADES K-6	978-0-07-676809-7	2	\$144.35	\$288.70	*Free Materials
READING WONDERS VISUAL VOCABULARY CARDS GRADE 2	978-0-02-118925-0	2	\$79.13	\$158.26	*Free Materials
READING WONDERS CALIFORNIA WEEKLY ASSESSMENT GRADE 2	978-0-02-130232-1	2	\$63.04	\$126.08	*Free Materials
READING WONDERS CALIFORNIA SBAC BENCHMARK ASSESSMENT GRADE 2	978-0-02-131571-0	2	\$158.99	\$317.98	*Free Materials

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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
READING WONDERS CALIFORNIA SBAC UNIT ASSESSMENT GRADE 2	978-0-02-130453-0	2	\$101.28	\$202.56	*Free Materials
READING WONDERS PLACEMENT AND DIAGNOSTIC ASSESSMENT GRADE K-6	978-0-07-677954-3	2	\$91.26	\$182.52	*Free Materials

**Teacher Resources Subtotal: \$5,015.04 \$8,557.36**

<b>Grade 2 ELD</b>					
READING WONDERS ENGLISH LEARNERS CA INTERMED/ADV INTERACTIVE WORKTEXT GRADE 2	978-0-02-130346-5	68	\$13.03	\$0.00	\$886.04
READING WONDERS ENGLISH LEARNERS STUDENT WORKSPACE 3 YR SUBSC 6 SEATS GRADE 2	978-0-07-904568-3	10	\$536.46	\$5,364.60	*Free Materials
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 1 GRADE 2	978-0-02-131546-8	68	\$3.66	\$0.00	\$248.88
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 2 GRADE 2	978-0-02-130519-3	68	\$3.66	\$0.00	\$248.88
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 3 GRADE 2	978-0-02-132518-4	68	\$3.66	\$0.00	\$248.88
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 4 GRADE 2	978-0-02-130919-1	68	\$3.66	\$0.00	\$248.88
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 5 GRADE 2	978-0-02-130737-1	68	\$3.66	\$0.00	\$248.88
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 6 GRADE 2	978-0-02-132564-1	68	\$3.66	\$0.00	\$248.88
READING WONDERS ENGLISH LEARNERS CALIFORNIA TEACHER EDITION GRADE 2	978-0-02-131163-7	2	\$195.33	\$390.66	*Free Materials
READING WONDERS ENGLISH LEARNERS TEACHER WORKSPACE 3 YEAR SUBSCRIPTION GRADE 2	978-0-07-904532-4	2	\$121.50	\$243.00	*Free Materials
READING WONDERS ENGLISH LEARNERS ASSESSMENT GRADE 2	978-0-02-131619-9	2	\$101.28	\$202.56	*Free Materials
READING WONDERS ENGLISH LEARNERS ORAL LANGUAGE CARDS GRADE 2	978-0-02-131746-2	2	\$75.18	\$150.36	*Free Materials
READING WONDERS FOR ENGLISH LEARNERS VISUAL VOCABULARY CARDS GRADE 2	978-0-02-138087-9	2	\$34.12	\$68.24	*Free Materials
READING WONDERS ENGLISH LEARNERS LANGUAGE DEVELOPMENT PRACTICE BLM GRADE 2-3	978-0-02-131268-9	2	\$172.70	\$345.40	*Free Materials
READING WONDERS ENGLISH LEARNERS LANGUAGE DEVELOPMENT CARDS GRADE 2-3	978-0-02-133136-9	2	\$556.61	\$1,113.22	*Free Materials
READING WONDERS FOR ENGLISH LEARNERS LANGUAGE TRANSFER HANDBOOK	978-0-02-139110-3	2	\$3.66	\$7.32	*Free Materials

**Grade 2 ELD Subtotal: \$7,885.36 \$2,379.32**

**Grade 2 Subtotal: \$15,024.04 \$18,800.88**

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QUOTE DATE: 05/22/2023 ACCOUNT NAME: TEACH PREP MSC EHM ELEM EXPIRATION DATE: 07/06/2023  
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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
<b>Grade 3</b>					
<b>Student Resources</b>					
READING WONDERS CALIFORNIA STUDENT EDITION 3 YEAR SUBSCRIPTION BUNDLE GRADE 3	978-0-07-897133-4	68	\$87.50	\$0.00	\$5,950.00
READING WONDERS CALIFORNIA CLOSE READING COMPANION 3 YEAR PRINT BUNDLE GRADE 3	978-0-07-897170-9	68	\$28.15	\$0.00	\$1,914.20
READING WONDERS CALIFORNIA YOUR TURN PRACTICE BOOK 3 YEAR PRINT BUNDLE GRADE 3	978-0-07-897152-5	68	\$31.23	\$2,123.64	*Free Materials

**Student Resources Subtotal: \$2,123.64 \$7,864.20**

<b>Teacher Resources</b>					
READING WONDERS CALIFORNIA TEACHER EDITION PACKAGE GRADE 3	978-0-02-142759-8	2	\$649.51	\$1,299.02	*Free Materials
READING WONDERS TEACHER WORKSPACE 3 YEAR SUBSCRIPTION GRADE 3	978-0-07-676918-6	2	\$545.22	\$1,090.44	*Free Materials
READING WONDERS LEVELED READER LIBRARY PACKAGE APPROACHING GRADE 3	978-0-02-119195-6	2	\$1,069.67	\$0.00	\$2,139.34
READING WONDERS LEVELED READER LIBRARY PACKAGE ON-LEVEL GRADE 3	978-0-02-118623-5	2	\$1,069.67	\$0.00	\$2,139.34
READING WONDERS LEVELED READER LIBRARY PACKAGE BEYOND GRADE 3	978-0-02-118624-2	2	\$1,069.67	\$0.00	\$2,139.34
READING WONDERS LEVELED READER LIBRARY PACKAGE ELL GRADE 3	978-0-02-118580-1	2	\$1,069.67	\$0.00	\$2,139.34
READING WONDERS - LEVELED READER LESSON CARDS GRADE 3	978-0-02-129207-3	2	\$82.21	\$164.42	*Free Materials

READING WONDERS VISUAL VOCABULARY CARDS GRADE 3	978-0-02-118782-9	2	\$79.13	\$158.26	*Free Materials
READING WONDERS CALIFORNIA WEEKLY ASSESSMENT GRADE 3	978-0-02-131943-5	2	\$63.04	\$126.08	*Free Materials
READING WONDERS CALIFORNIA SBAC UNIT ASSESSMENT GRADE 3	978-0-02-132009-7	2	\$101.28	\$202.56	*Free Materials
READING WONDERS CALIFORNIA SBAC BENCHMARK ASSESSMENT GRADE 3	978-0-02-131320-4	2	\$103.27	\$206.54	*Free Materials
READING WONDERS PLACEMENT AND DIAGNOSTIC ASSESSMENT GRADE K-6	978-0-07-677954-3	2	\$91.26	\$182.52	*Free Materials
<b>Teacher Resources Subtotal:</b>				<b>\$3,429.84</b>	<b>\$8,557.36</b>

**Grade 3 FLD**

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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
READING WONDERS ENGLISH LEARNERS CA EXPAND/BRIDGE COMPANION WORKTEXT GRADE 3	978-0-02-131548-2	68	\$11.43	\$0.00	\$777.24
READING WONDERS ENGLISH LEARNERS STUDENT WORKSPACE 3 YR SUBSC 6 SEATS GRADE 3	978-0-07-904570-6	10	\$536.46	\$5,364.60	*Free Materials
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 1 GRADE 3	978-0-02-130588-9	68	\$3.21	\$0.00	\$218.28
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 2 GRADE 3	978-0-02-131707-3	68	\$3.21	\$0.00	\$218.28
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 3 GRADE 3	978-0-02-131687-8	68	\$3.21	\$0.00	\$218.28
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 4 GRADE 3	978-0-02-131212-2	68	\$3.21	\$0.00	\$218.28
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 5 GRADE 3	978-0-02-132649-5	68	\$3.21	\$0.00	\$218.28
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 6 GRADE 3	978-0-02-131355-6	68	\$3.21	\$0.00	\$218.28
READING WONDERS ENGLISH LEARNERS CALIFORNIA TEACHER EDITION GRADE 3	978-0-02-131553-6	2	\$195.87	\$391.74	*Free Materials
READING WONDERS ENGLISH LEARNERS TEACHER WORKSPACE 3 YEAR SUBSCRIPTION GRADE 3	978-0-07-904534-8	2	\$121.50	\$243.00	*Free Materials
READING WONDERS ENGLISH LEARNERS ASSESSMENT GRADE 3	978-0-02-131115-6	2	\$101.28	\$202.56	*Free Materials
READING WONDERS ENGLISH LEARNERS ORAL LANGUAGE CARDS GRADE 3	978-0-02-130300-7	2	\$11.46	\$22.92	*Free Materials
READING WONDERS ENGLISH LEARNERS VISUAL VOCABULARY CARDS GRADE 3	978-0-02-132855-0	2	\$32.97	\$65.94	*Free Materials
READING WONDERS ENGLISH LEARNERS LANGUAGE DEVELOPMENT PRACTICE BLM GRADE 2-3	978-0-02-131268-9	2	\$172.70	\$345.40	*Free Materials
READING WONDERS ENGLISH LEARNERS LANGUAGE DEVELOPMENT CARDS GRADE 2-3	978-0-02-133136-9	2	\$556.61	\$1,113.22	*Free Materials
READING WONDERS FOR ENGLISH LEARNERS LANGUAGE TRANSFER HANDBOOK	978-0-02-139110-3	2	\$3.66	\$7.32	*Free Materials
<b>Grade 3 ELD Subtotal:</b>				<b>\$7,756.70</b>	<b>\$2,086.92</b>
<b>Grade 3 Subtotal:</b>				<b>\$13,310.18</b>	<b>\$18,508.48</b>

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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
<b>Grade 4</b>					
<b>Student Resources</b>					
READING WONDERS CALIFORNIA STUDENT EDITION 3 YEAR SUBSCRIPTION BUNDLE GRADE 4	978-0-07-897134-1	68	\$87.50	\$0.00	\$5,950.00
READING WONDERS CALIFORNIA CLOSE READING COMPANION 3 YEAR PRINT BUNDLE GRADE 4	978-0-07-897173-0	68	\$28.15	\$0.00	\$1,914.20
READING WONDERS CALIFORNIA YOUR TURN PRACTICE BOOK 3 YEAR PRINT BUNDLE GRADE 4	978-0-07-897155-6	68	\$31.23	\$2,123.64	*Free Materials
<b>Student Resources Subtotal:</b>				<b>\$2,123.64</b>	<b>\$7,864.20</b>
<b>Teacher Resources</b>					
READING WONDERS CALIFORNIA TEACHER EDITION PACKAGE GRADE 4	978-0-02-145436-5	2	\$649.51	\$1,299.02	*Free Materials
READING WONDERS TEACHER WORKSPACE 3 YEAR SUBSCRIPTION GRADE 4	978-0-07-676920-9	2	\$545.22	\$1,090.44	*Free Materials
READING WONDERS LEVELED READER LIBRARY PACKAGE APPROACHING GRADE 4	978-0-02-118747-8	2	\$1,069.67	\$0.00	\$2,139.34
READING WONDERS LEVELED READER LIBRARY PACKAGE ON-LEVEL GRADE 4	978-0-02-119218-2	2	\$1,069.67	\$0.00	\$2,139.34
READING WONDERS LEVELED READER LIBRARY PACKAGE BEYOND GRADE 4	978-0-02-118600-6	2	\$1,069.67	\$0.00	\$2,139.34
READING WONDERS LEVELED READER LIBRARY PACKAGE ELL GRADE 4	978-0-02-118601-3	2	\$1,069.67	\$0.00	\$2,139.34
READING WONDERS - LEVELED READER LESSON CARDS GRADE 4	978-0-02-129208-0	2	\$82.21	\$164.42	*Free Materials
READING WONDERS VISUAL VOCABULARY CARDS GRADE 4	978-0-02-118697-6	2	\$79.13	\$158.26	*Free Materials
READING WONDERS CALIFORNIA WEEKLY ASSESSMENT GRADE 4	978-0-02-132429-3	2	\$63.04	\$126.08	*Free Materials
READING WONDERS CALIFORNIA SBAC UNIT ASSESSMENT GRADE 4	978-0-02-132478-1	2	\$101.28	\$202.56	*Free Materials
READING WONDERS CALIFORNIA SBAC BENCHMARK ASSESSMENT GRADE 4	978-0-02-132464-4	2	\$158.99	\$317.98	*Free Materials
READING WONDERS PLACEMENT AND DIAGNOSTIC ASSESSMENT GRADE K-6	978-0-07-677954-3	2	\$91.26	\$182.52	*Free Materials
<b>Teacher Resources Subtotal:</b>				<b>\$3,541.28</b>	<b>\$8,557.36</b>
<b>Grade 4 FLD</b>					

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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
READING WONDERS ENGLISH LEARNERS CA EXPAND/BRIDGE COMPANION WORKTEXT GRADE 4	978-0-02-132055-4	68	\$11.07	\$0.00	\$752.76
READING WONDERS ENGLISH LEARNERS STUDENT WORKSPACE 3 YR SUBSC 6 SEATS GRADE 4	978-0-07-904573-7	10	\$536.46	\$5,364.60	*Free Materials
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 1 GRADE 4	978-0-02-130256-7	68	\$2.99	\$0.00	\$203.32
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 2 GRADE 4	978-0-02-131934-3	68	\$2.99	\$0.00	\$203.32
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 3 GRADE 4	978-0-02-131434-8	68	\$2.99	\$0.00	\$203.32
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 4 GRADE 4	978-0-02-130987-0	68	\$2.99	\$0.00	\$203.32
READING WONDERS ENGLISH LEARNERS CA EMERGING INTERACTIVE WORKTEXT UNIT 5 GRADE 4	978-0-02-133036-2	68	\$2.99	\$0.00	\$203.32
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 6 GRADE 4	978-0-02-130892-7	68	\$2.99	\$0.00	\$203.32
READING WONDERS ENGLISH LEARNERS CALIFORNIA TEACHER EDITION GRADE 4	978-0-02-132905-2	2	\$198.09	\$396.18	*Free Materials
READING WONDERS ENGLISH LEARNERS TEACHER WORKSPACE 3 YEAR SUBSCRIPTION GRADE 4	978-0-07-904537-9	2	\$121.50	\$243.00	*Free Materials

READING WONDERS ENGLISH LEARNERS ASSESSMENT GRADE 4	978-0-02-132813-0	2	\$101.28	\$202.56	*Free Materials
READING WONDERS ENGLISH LEARNERS ORAL LANGUAGE CARDS GRADE 4	978-0-02-130568-1	2	\$75.18	\$150.36	*Free Materials
READING WONDERS ENGLISH LEARNERS VISUAL VOCABULARY CARDS GRADE 4	978-0-02-131421-8	2	\$29.15	\$58.30	*Free Materials
READING WONDERS ENGLISH LEARNERS LANGUAGE DEVELOPMENT PRACTICE BLM GRADE 4-6	978-0-02-131511-6	2	\$172.70	\$345.40	*Free Materials
READING WONDERS ENGLISH LEARNERS LANGUAGE DEVELOPMENT CARDS GRADE 4-6	978-0-02-130679-4	2	\$556.61	\$1,113.22	*Free Materials
READING WONDERS FOR ENGLISH LEARNERS LANGUAGE TRANSFER HANDBOOK	978-0-02-139110-3	2	\$3.66	\$7.32	*Free Materials
<b>Grade 4 ELD Subtotal:</b>				<b>\$7,880.94</b>	<b>\$1,972.68</b>
<b>Grade 4 Subtotal:</b>				<b>\$13,545.86</b>	<b>\$18,394.24</b>

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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
<b>REVEAL MATH © 2022 - GRADE K</b>					
REVEAL MATH STUDENT 3 YEAR SUBSCRIPTION BUNDLE GRADE K Includes: Write-in Student Editions (Yrs 2-3 ship Annually) + Student Practice Book (Yrs 2-3 ship Annually) + 3 Yr Student Digital License	978-1-26-438796-0	50	\$70.71	\$0.00	\$3,535.50
<b>TEACHER MATERIALS</b>					
REVEAL MATH TEACHER RESOURCE PACKAGE 3 YEAR SUBSCRIPTION BUNDLE GRADE K Includes: Teacher Editions + Teacher Digital License + Assessment Resource Book and Differentiation Resource Book	978-1-26-438946-9	2	\$425.73	\$851.46	*Free Materials
REVEAL MATH IMPLEMENTATION GUIDE GRADE K-5	978-0-07-694684-6	0	\$53.49	\$0.00	*Free Materials
REVEAL MATH MANIPULATIVE KIT GRADE K	978-1-26-441729-2	2	\$457.80	\$0.00	\$915.60
REVEAL MATH WORKSTATION KIT GRADE K Includes: Workstation Teacher Guide, Game Station Resource Book, Application Station Cards, Manips: Transparent Spinners, People Pawns, Number Cubes 1-6	978-1-26-590921-5	2	\$160.65	\$321.30	*Free Materials
<b>TEACHER MATERIALS Subtotal:</b>				<b>\$1,172.76</b>	<b>\$915.60</b>
<b>REVEAL MATH © 2022 - GRADE K Subtotal:</b>				<b>\$1,172.76</b>	<b>\$4,451.10</b>

<b>REVEAL MATH © 2022 - GRADE 1</b>					
REVEAL MATH STUDENT 3 YEAR SUBSCRIPTION BUNDLE GRADE 1 Includes: Write-in Student Editions (Yrs 2-3 ship Annually) + Student Practice Book (Yrs 2-3 ship Annually) + 3 Yr Student Digital License	978-1-26-437473-1	68	\$70.71	\$0.00	\$4,808.28
<b>TEACHER MATERIALS</b>					
REVEAL MATH TEACHER RESOURCE PACKAGE 3 YEAR SUBSCRIPTION BUNDLE GRADE 1 Includes: Teacher Editions + Teacher Digital License + Assessment Resource Book and Differentiation Resource Book	978-1-26-438951-3	2	\$425.73	\$851.46	*Free Materials
REVEAL MATH IMPLEMENTATION GUIDE GRADE K-5	978-0-07-694684-6	0	\$53.49	\$0.00	*Free Materials
REVEAL MATH MANIPULATIVE KIT GRADE 1-2	978-1-26-441731-5	2	\$539.46	\$0.00	\$1,078.92
REVEAL MATH WORKSTATION KIT GRADE 1 Includes: Workstation Teacher Guide, Game Station Resource Book, Application Station Cards, Manips: Transparent Spinners, People Pawns, Number Cubes 1-6	978-1-26-590925-3	2	\$160.65	\$321.30	*Free Materials
<b>TEACHER MATERIALS Subtotal:</b>				<b>\$1,172.76</b>	<b>\$1,078.92</b>
<b>REVEAL MATH © 2022 - GRADE 1 Subtotal:</b>				<b>\$1,172.76</b>	<b>\$5,887.20</b>
<b>REVEAL MATH © 2022 - GRADE 2</b>					

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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
REVEAL MATH STUDENT 3 YEAR SUBSCRIPTION BUNDLE GRADE 2 Includes: Write-in Student Editions (Yrs 2-3 ship Annually) + Student Practice Book (Yrs 2-3 ship Annually) + 3 Yr Student Digital License	978-1-26-437476-2	68	\$70.71	\$0.00	\$4,808.28
<b>TEACHER MATERIALS</b>					
REVEAL MATH TEACHER RESOURCE PACKAGE 3 YEAR SUBSCRIPTION BUNDLE GRADE 2 Includes: Teacher Editions + Teacher Digital License + Assessment Resource Book and Differentiation Resource Book	978-1-26-438952-0	2	\$425.73	\$851.46	*Free Materials
REVEAL MATH IMPLEMENTATION GUIDE GRADE K-5	978-0-07-694684-6	0	\$53.49	\$0.00	*Free Materials
REVEAL MATH MANIPULATIVE KIT GRADE 1-2	978-1-26-441731-5	2	\$539.46	\$0.00	\$1,078.92
REVEAL MATH WORKSTATION KIT GRADE 2 Includes: Workstation Teacher Guide, Game Station Resource Book, Application Station Cards, Manips: Transparent Spinners, People Pawns, Number Cubes 1-6	978-1-26-591011-2	2	\$160.65	\$321.30	*Free Materials
<b>TEACHER MATERIALS Subtotal:</b>				<b>\$1,172.76</b>	<b>\$1,078.92</b>
<b>REVEAL MATH © 2022 - GRADE 2 Subtotal:</b>				<b>\$1,172.76</b>	<b>\$5,887.20</b>

<b>REVEAL MATH © 2022 - GRADE 3</b>					
REVEAL MATH STUDENT 3 YEAR SUBSCRIPTION BUNDLE GRADE 3 Includes: Write-in Student Editions (Yrs 2-3 ship Annually) + Student Practice Book (Yrs 2-3 ship Annually) + 3 Yr Student Digital License	978-1-26-437490-8	68	\$70.71	\$0.00	\$4,808.28
<b>TEACHER MATERIALS</b>					
REVEAL MATH TEACHER RESOURCE PACKAGE 3 YEAR SUBSCRIPTION BUNDLE GRADE 3 Includes: Teacher Editions + Teacher Digital License + Assessment Resource Book and Differentiation Resource Book	978-1-26-438955-1	2	\$425.73	\$851.46	*Free Materials
REVEAL MATH IMPLEMENTATION GUIDE GRADE K-5	978-0-07-694684-6	0	\$53.49	\$0.00	*Free Materials
REVEAL MATH MANIPULATIVE KIT GRADE 3-5	978-1-26-441738-4	2	\$539.46	\$0.00	\$1,078.92
REVEAL MATH WORKSTATION KIT GRADE 3 Includes: Workstation Teacher Guide, Game Station Resource Book, Application Station Cards, Manips: Transparent Spinners, People Pawns, Number Cubes 1-6	978-1-26-591044-0	2	\$160.65	\$321.30	*Free Materials
<b>TEACHER MATERIALS Subtotal:</b>				<b>\$1,172.76</b>	<b>\$1,078.92</b>
<b>REVEAL MATH © 2022 - GRADE 3 Subtotal:</b>				<b>\$1,172.76</b>	<b>\$5,887.20</b>

<b>REVEAL MATH © 2022 - GRADE 4</b>					
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REVEAL MATH STUDENT 3 YEAR SUBSCRIPTION BUNDLE GRADE 4 Includes: Write-in Student Editions (Yrs 2-3 ship Annually) + Student Practice Book (Yrs 2-3 ship Annually) + 3 Yr Student Digital License	978-1-26-437493-9	68	\$70.71	\$0.00	\$4,808.28
<b>TEACHER MATERIALS</b>					
REVEAL MATH TEACHER RESOURCE PACKAGE 3 YEAR SUBSCRIPTION BUNDLE GRADE 4 Includes: Teacher Editions + Teacher Digital License + Assessment Resource Book and Differentiation Resource Book	978-1-26-438956-8	2	\$425.73	\$851.46	*Free Materials
REVEAL MATH IMPLEMENTATION GUIDE GRADE K-5	978-0-07-694684-6	0	\$53.49	\$0.00	*Free Materials
REVEAL MATH MANIPULATIVE KIT GRADE 3-5	978-1-26-441738-4	2	\$539.46	\$0.00	\$1,078.92
REVEAL MATH WORKSTATION KIT GRADE 4 Includes: Workstation Teacher Guide, Game Station Resource Book, Application Station Cards, Manips: Transparent Spinners, People Pawns, Number Cubes 1-6	978-1-26-591105-8	2	\$160.65	\$321.30	*Free Materials



TEACHER MATERIALS Subtotal: \$1,172.76 \$1,078.92  
 REVEAL MATH © 2022 - GRADE 4 Subtotal: \$1,172.76 \$5,887.20

CA Impact TK, 3-Year					
IMPACT CALIFORNIA IMPACT EXPLORER PRINT/DIGITAL STUDENT 3 YR SUB BUNDLE GRADE TK	978-1-26-433255-7	68	\$33.42	\$0.00	\$2,272.56
IMPACT SOCIAL STUDIES CALIFORNIA ONLINE TEACHER CENTER 3 YR SUBSC GRADE TK	978-1-26-432893-2	2	\$305.91	\$611.82	*Free Materials
IMPACT SOCIAL STUDIES LEARN & WORK EXPLORER MAGAZINE TEACHING GUIDE GRADE K	978-0-07-693100-2	2	\$73.59	\$147.18	*Free Materials
CA Impact TK, 3-Year Subtotal:				\$759.00	\$2,272.56

CA IMPACT Grade K: Learning and Working Now and Long Ago					
Student Resources					
IMPACT CALIFORNIA LEARN & WORK STUDENT 3 YEAR SUBSCRIPTION BUNDLE GRADE K	978-0-07-688948-8	50	\$55.12	\$0.00	\$2,756.00
Student Resources Subtotal:				\$0.00	\$2,756.00

Teacher Resources					
IMPACT CALIFORNIA LEARNING AND WORKING TEACHER EDITION GRADE K	978-0-07-899364-0	2	\$176.10	\$352.20	*Free Materials
IMPACT CALIFORNIA LEARN & WORK TEACHER CENTER 3 YEAR SUBSCRIPTION GRADE K	978-0-07-692242-0	2	\$329.10	\$658.20	*Free Materials
IMPACT CALIFORNIA LEARNING WORKING LANGUAGE LEARNERS TEACHING GUIDE GRADE K	978-0-07-899389-3	2	\$102.69	\$205.38	*Free Materials

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 QUOTE NUMBER: JMCCO-05222023115153-001 ACCOUNT #: 12989339 PAGE #: 18



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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
IMPACT CALIFORNIA LEARNING AND WORKING CHAPTERS 1-5 BIG BOOK SET GRADE K	978-0-07-693674-8	2	\$351.56	\$703.12	*Free Materials
IMPACT CALIFORNIA WEEKLY EXPLORER MAGAZINE BIG BOOK GRADE K	978-0-07-692555-1	2	\$285.43	\$570.86	*Free Materials
IMPACT CALIFORNIA WONDERS SNAP-IN INSERTS GRADE K	978-0-07-692491-2	2	\$38.55	\$77.10	*Free Materials
IMPACT CALIFORNIA BENCHMARK CONNECTIONS BOOKLET GRADE K	978-0-07-692561-2	0	\$14.32	\$0.00	*Free Materials
Teacher Resources Subtotal:				\$2,566.86	\$0.00

CA IMPACT Grade K: Learning and Working Now and Long Ago Subtotal: \$2,566.86 \$2,756.00

CA IMPACT Grade 1: A Child's Place in Time and Space					
Student Resources					
IMPACT CALIFORNIA CHILD PLACE STUDENT BUNDLE/COMBO BOOK 3 YR SUB BUNDLE GRADE 1	978-0-07-693691-5	68	\$66.58	\$0.00	\$4,527.44
Student Resources Subtotal:				\$0.00	\$4,527.44

Teacher Resources					
IMPACT CALIFORNIA A CHILD S PLACE TEACHER EDITION GRADE 1	978-0-07-899363-3	2	\$176.10	\$352.20	*Free Materials
IMPACT CALIFORNIA CHILD'S PLACE TEACHER CENTER 3 YEAR SUBSCRIPTION GRADE 1	978-0-07-692149-2	2	\$329.10	\$658.20	*Free Materials
IMPACT CALIFORNIA CHILD S PLACE LANGUAGE LEARNERS TEACHING GUIDE GRADE 1	978-0-07-899388-6	2	\$102.69	\$205.38	*Free Materials
IMPACT CALIFORNIA WONDERS CONNECTIONS INSERTS GRADE 1	978-0-07-692492-9	2	\$38.55	\$77.10	*Free Materials
IMPACT CALIFORNIA BENCHMARK CONNECTIONS BOOKLET GRADE 1	978-0-07-692538-4	0	\$14.32	\$0.00	*Free Materials
Teacher Resources Subtotal:				\$1,292.88	\$0.00

CA IMPACT Grade 1: A Child's Place in Time and Space Subtotal: \$1,292.88 \$4,527.44

CA IMPACT Grade 2: People Who Make a Difference					
Student Resources					
IMPACT CALIFORNIA PEOPLE DIFFERENCE SE BUNDLE/COMBO BOOK 3 YR SUB BUNDLE GRADE 2	978-0-07-693644-1	68	\$66.58	\$0.00	\$4,527.44
Student Resources Subtotal:				\$0.00	\$4,527.44

Teacher Resources					
IMPACT CALIFORNIA PEOPLE WHO MAKE A DIFFERENCE TEACHER EDITION GRADE 2	978-0-07-899362-6	2	\$176.10	\$352.20	*Free Materials
IMPACT CALIFORNIA PEOPLE MAKE DIFFERENCE TEACHER CENTER 3 YR SUBSC GRADE 2	978-0-07-692316-8	2	\$329.10	\$658.20	*Free Materials

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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
IMPACT CALIFORNIA PEOPLE DIFFERENCE LANGUAGE LEARNERS TEACHING GUIDE GRADE 2	978-0-07-899385-5	2	\$102.69	\$205.38	*Free Materials
IMPACT CALIFORNIA WONDERS CONNECTIONS INSERTS GRADE 2	978-0-07-692493-6	2	\$38.55	\$77.10	*Free Materials
IMPACT CALIFORNIA BENCHMARK CONNECTIONS BOOKLET GRADE 2	978-0-07-692541-4	0	\$14.32	\$0.00	*Free Materials

Teacher Resources Subtotal: \$1,292.88 \$0.00

CA IMPACT Grade 2: People Who Make a Difference Subtotal: \$1,292.88 \$4,527.44

CA IMPACT Grade 3: Continuity and Change					
Student Resources					
IMPACT CALIFORNIA CONTINUITY STUDENT BUNDLE W/COMBO BOOK 3 YR SUB BUNDLE GRADE 3	978-0-07-693617-5	68	\$72.42	\$0.00	\$4,924.56

Student Resources Subtotal: \$0.00 \$4,924.56

Teacher Resources					
IMPACT CALIFORNIA CONTINUITY AND CHANGE TEACHER EDITION GRADE 3	978-0-07-899361-9	2	\$180.82	\$361.64	*Free Materials
IMPACT CALIFORNIA CONTINUITY & CHANGE TEACHER CENTER 3 YEAR SUBSCRIPTION GRADE 3	978-0-07-692041-9	2	\$329.10	\$658.20	*Free Materials
IMPACT CALIFORNIA CONTINUITY LANGUAGE LEARNERS TEACHING GUIDE GRADE 3	978-0-07-899384-8	2	\$102.69	\$205.38	*Free Materials
IMPACT CALIFORNIA WONDERS CONNECTIONS INSERTS GRADE 3	978-0-07-692494-3	2	\$38.55	\$77.10	*Free Materials
IMPACT CALIFORNIA BENCHMARK CONNECTIONS BOOKLET GRADE 3	978-0-07-692542-1	0	\$14.32	\$0.00	*Free Materials

Teacher Resources Subtotal: \$1,302.32 \$0.00

CA IMPACT Grade 3: Continuity and Change Subtotal: \$1,302.32 \$4,924.56

CA IMPACT Grade 4: A Changing State					
Student Resources					
IMPACT CALIFORNIA CHANGING STATE STUDENT BUNDLE/COMBO BK 3 YR SUB BUNDLE GRADE 4	978-0-07-693655-7	68	\$72.42	\$0.00	\$4,924.56

Student Resources Subtotal: \$0.00 \$4,924.56

Teacher Resources					
IMPACT CALIFORNIA A CHANGING STATE TEACHER EDITION GRADE 4	978-0-07-677121-9	2	\$180.82	\$361.64	*Free Materials
IMPACT CALIFORNIA CHANGING STATE TEACHER CENTER 3 YEAR SUBSCRIPTION GRADE 4	978-0-07-692180-5	2	\$329.10	\$658.20	*Free Materials
IMPACT CALIFORNIA CHANGING STATE LANGUAGE LEARNERS TEACHING GUIDE GRADE 4	978-0-07-899383-1	2	\$102.69	\$205.38	*Free Materials

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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
IMPACT CALIFORNIA WONDERS CONNECTIONS INSERTS GRADE 4	978-0-07-692495-0	2	\$38.55	\$77.10	*Free Materials
IMPACT CALIFORNIA BENCHMARK CONNECTIONS BOOKLET GRADE 4	978-0-07-692543-8	0	\$14.32	\$0.00	*Free Materials

Teacher Resources Subtotal: \$1,302.32 \$0.00

CA IMPACT Grade 4: A Changing State Subtotal: \$1,302.32 \$4,924.56

CA Inspire Science - TK					
INSPIRE SCIENCE EARLY LEARNERS COMPREHENSIVE 3 YEAR SUBSCRIPTION BUNDLE	978-0-07-689422-2	2	\$77.52	\$0.00	\$155.04
INSPIRE SCIENCE EARLY LEARNERS COLORING BOOK SET OF 30	978-0-07-683964-3	2	\$32.74	\$0.00	\$65.48

INSPIRE SCIENCE EARLY LEARNERS SCIENCE KIT	978-0-07-689129-0	2	\$482.40	\$0.00	\$964.80
<b>CA Inspire Science - TK Subtotal:</b>				<b>\$0.00</b>	<b>\$1,185.32</b>

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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
<b>CA Inspire Science Grade K</b>					
<u>Student Resources</u>					
INSPIRE SCIENCE CALIFORNIA COMPREHENSIVE STUDENT 3 YR SUBSC BUNDLE GRADE K	978-0-07-699371-0	50	\$77.30	\$0.00	\$3,865.00
<b>Student Resources Subtotal:</b>				<b>\$0.00</b>	<b>\$3,865.00</b>

<u>Teacher Resources</u>					
INSPIRE SCIENCE CALIFORNIA TEACHER EDITION GRADE K	978-0-07-682072-6	2	\$49.15	\$98.30	*Free Materials
INSPIRE SCIENCE CALIFORNIA TEACHER EDITION VOLUME 2 GRADE K	978-0-07-683515-7	2	\$49.15	\$98.30	*Free Materials
INSPIRE SCIENCE CALIFORNIA TEACHER EDITION VOLUME 3 GRADE K	978-0-07-683524-9	2	\$49.15	\$98.30	*Free Materials
INSPIRE SCIENCE CALIFORNIA TEACHER EDITION VOLUME 4 GRADE K	978-0-07-683534-8	2	\$49.15	\$98.30	*Free Materials
INSPIRE SCIENCE CALIFORNIA ONLINE TEACHER CENTER 3 YEAR SUBSCRIPTION GRADE K	978-0-07-698707-8	2	\$755.07	\$1,510.14	*Free Materials
INSPIRE SCIENCE CALIFORNIA PROGRAM GUIDE GRADE K-5	978-0-07-687740-9	2	\$11.24	\$22.48	*Free Materials
INSPIRE SCIENCE READ ALOUD CLASS SET (1 COPY) GRADE K	978-0-07-688253-3	2	\$39.68	\$79.36	*Free Materials
INSPIRE SCIENCE LEVELED READER LIBRARY (6 COPIES) GRADE K	978-0-07-688259-5	2	\$264.50	\$529.00	*Free Materials
INSPIRE SCIENCE CALIFORNIA POSTER PACK GRADE K	978-0-07-687683-9	2	\$22.47	\$44.94	*Free Materials
INSPIRE SCIENCE CALIFORNIA ASSESSMENT BLM GRADE K	978-0-07-687753-9	2	\$22.47	\$44.94	*Free Materials
INSPIRE SCIENCE CALIFORNIA SNAP IN TABS GRADE K	978-0-07-689507-6	2	\$22.47	\$44.94	*Free Materials
INSPIRE SCIENCE ESSENTIAL PLUS COLLABORATION KIT GRADE K 3YR FULFILLMENT	978-1-26-428802-1	2	\$2,145.66	\$0.00	\$4,291.32
<b>Teacher Resources Subtotal:</b>				<b>\$2,669.00</b>	<b>\$4,291.32</b>
<b>CA Inspire Science Grade K Subtotal:</b>				<b>\$2,669.00</b>	<b>\$8,156.32</b>

<b>CA Inspire Science Grade 1</b>					
<u>Student Resources</u>					
INSPIRE SCIENCE CALIFORNIA COMPREHENSIVE STUDENT 3 YR SUBSC BUNDLE GRADE 1	978-0-07-699381-9	68	\$77.30	\$0.00	\$5,256.40
<b>Student Resources Subtotal:</b>				<b>\$0.00</b>	<b>\$5,256.40</b>
<u>Teacher Resources</u>					
INSPIRE SCIENCE CALIFORNIA TEACHER EDITION GRADE 1	978-0-07-682102-0	2	\$49.15	\$98.30	*Free Materials
INSPIRE SCIENCE CALIFORNIA TEACHER EDITION VOLUME 2 GRADE 1	978-0-07-683516-4	2	\$49.15	\$98.30	*Free Materials
INSPIRE SCIENCE CALIFORNIA TEACHER EDITION VOLUME 3 GRADE 1	978-0-07-683525-6	2	\$49.15	\$98.30	*Free Materials

INSPIRE SCIENCE CALIFORNIA TEACHER EDITION VOLUME 3 GRADE 1	978-0-07-683528-0	2	\$49.15	\$98.30	Free Materials
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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
INSPIRE SCIENCE CALIFORNIA TEACHER EDITION VOLUME 4 GRADE 1	978-0-07-683535-5	2	\$49.15	\$98.30	*Free Materials
INSPIRE SCIENCE CALIFORNIA ONLINE TEACHER CENTER 3 YEAR SUBSCRIPTION GRADE 1	978-0-07-698739-9	2	\$755.07	\$1,510.14	*Free Materials
INSPIRE SCIENCE CALIFORNIA PROGRAM GUIDE GRADE K-5	978-0-07-687740-9	2	\$11.24	\$22.48	*Free Materials
INSPIRE SCIENCE READ ALOUD CLASS SET (1 COPY) GRADE 1	978-0-07-688255-7	2	\$39.68	\$79.36	*Free Materials
INSPIRE SCIENCE LEVELED READER LIBRARY (6 COPIES) GRADE 1	978-0-07-688260-1	2	\$264.50	\$529.00	*Free Materials
INSPIRE SCIENCE CALIFORNIA POSTER PACK GRADE 1	978-0-07-687733-1	2	\$22.47	\$44.94	*Free Materials
INSPIRE SCIENCE CALIFORNIA ASSESSMENT BLM GRADE 1	978-0-07-687756-0	2	\$22.47	\$44.94	*Free Materials
INSPIRE SCIENCE CALIFORNIA SNAP IN TABS GRADE 1	978-0-07-689508-3	2	\$22.47	\$44.94	*Free Materials
INSPIRE SCIENCE ESSENTIAL PLUS COLLABORATION KIT GRADE 1 3YR FULFILLMENT	978-1-26-428444-3	2	\$1,257.84	\$0.00	\$2,515.68
<b>Teacher Resources Subtotal:</b>				<b>\$2,669.00</b>	<b>\$2,515.68</b>
<b>CA Inspire Science Grade 1 Subtotal:</b>				<b>\$2,669.00</b>	<b>\$7,772.08</b>

**CA Inspire Science Grade 2**

<b>Student Resources</b>					
INSPIRE SCIENCE CALIFORNIA COMPREHENSIVE STUDENT 3 YR SUBSC BUNDLE GRADE 2	978-0-07-699299-7	68	\$77.30	\$0.00	\$5,256.40
<b>Student Resources Subtotal:</b>				<b>\$0.00</b>	<b>\$5,256.40</b>

<b>Teacher Resources</b>					
INSPIRE SCIENCE CALIFORNIA TEACHER EDITION GRADE 2	978-0-07-682408-3	2	\$49.15	\$98.30	*Free Materials
INSPIRE SCIENCE CALIFORNIA TEACHER EDITION VOLUME 2 GRADE 2	978-0-07-683517-1	2	\$49.15	\$98.30	*Free Materials
INSPIRE SCIENCE CALIFORNIA TEACHER EDITION VOLUME 3 GRADE 2	978-0-07-683528-7	2	\$49.15	\$98.30	*Free Materials
INSPIRE SCIENCE CALIFORNIA TEACHER EDITION VOLUME 4 GRADE 2	978-0-07-683538-6	2	\$49.15	\$98.30	*Free Materials
INSPIRE SCIENCE CALIFORNIA ONLINE TEACHER CENTER 3 YEAR SUBSCRIPTION GRADE 2	978-0-07-698676-7	2	\$755.07	\$1,510.14	*Free Materials
INSPIRE SCIENCE CALIFORNIA PROGRAM GUIDE GRADE K-5	978-0-07-687740-9	2	\$11.24	\$22.48	*Free Materials
INSPIRE SCIENCE INVESTIGATOR MAGAZINE SET GRADE 2	978-0-07-687710-2	2	\$56.21	\$112.42	*Free Materials
INSPIRE SCIENCE LEVELED READER LIBRARY (6 COPIES) GRADE 2	978-0-07-688261-8	2	\$264.50	\$529.00	*Free Materials
INSPIRE SCIENCE CALIFORNIA POSTER PACK GRADE 2	978-0-07-687734-8	2	\$22.47	\$44.94	*Free Materials
INSPIRE SCIENCE CALIFORNIA ASSESSMENT BLM GRADE 2	978-0-07-687757-7	2	\$22.47	\$44.94	*Free Materials
INSPIRE SCIENCE CALIFORNIA SNAP IN TABS GRADE 2	978-0-07-689509-0	2	\$22.47	\$44.94	*Free Materials

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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
INSPIRE SCIENCE ESSENTIAL PLUS COLLABORATION KIT GRADE 2 3YR FULFILLMENT	978-1-26-428447-4	2	\$1,402.58	\$0.00	\$2,805.16
<b>Teacher Resources Subtotal:</b>				<b>\$2,702.06</b>	<b>\$2,805.16</b>
<b>CA Inspire Science Grade 2 Subtotal:</b>				<b>\$2,702.06</b>	<b>\$8,061.56</b>

**CA Inspire Science Grade 3**

<b>Student Resources</b>					
INSPIRE SCIENCE CALIFORNIA COMPREHENSIVE STUDENT 3 YR SUBSC BUNDLE GRADE 3	978-0-07-699318-5	68	\$77.30	\$0.00	\$5,256.40

Student Resources Subtotal: \$0.00 \$5,256.40

<b>Teacher Resources</b>						
INSPIRE SCIENCE CALIFORNIA TEACHER EDITION GRADE 3	978-0-07-682412-0	2	\$49.15	\$98.30	*Free Materials	
INSPIRE SCIENCE CALIFORNIA TEACHER EDITION VOLUME 2 GRADE 3	978-0-07-683520-1	2	\$49.15	\$98.30	*Free Materials	
INSPIRE SCIENCE CALIFORNIA TEACHER EDITION VOLUME 3 GRADE 3	978-0-07-683529-4	2	\$49.15	\$98.30	*Free Materials	
INSPIRE SCIENCE CALIFORNIA TEACHER EDITION VOLUME 4 GRADE 3	978-0-07-683539-3	2	\$49.15	\$98.30	*Free Materials	
INSPIRE SCIENCE CALIFORNIA ONLINE TEACHER CENTER 3 YEAR SUBSCRIPTION GRADE 3	978-0-07-698805-1	2	\$755.07	\$1,510.14	*Free Materials	
INSPIRE SCIENCE CALIFORNIA PROGRAM GUIDE GRADE K-5	978-0-07-687740-9	2	\$11.24	\$22.48	*Free Materials	
INSPIRE SCIENCE INVESTIGATOR MAGAZINE SET GRADE 3	978-0-07-687711-9	2	\$79.35	\$158.70	*Free Materials	
INSPIRE SCIENCE LEVELED READER LIBRARY (6 COPIES) GRADE 3	978-0-07-688264-9	2	\$308.58	\$617.16	*Free Materials	
INSPIRE SCIENCE CALIFORNIA POSTER PACK GRADE 3	978-0-07-687735-5	2	\$22.47	\$44.94	*Free Materials	
INSPIRE SCIENCE CALIFORNIA ASSESSMENT BLM GRADE 3	978-0-07-687758-4	2	\$22.47	\$44.94	*Free Materials	
INSPIRE SCIENCE CALIFORNIA SNAP IN TABS GRADE 3	978-0-07-689510-6	2	\$22.47	\$44.94	*Free Materials	
INSPIRE SCIENCE ESSENTIAL PLUS COLLABORATION KIT GRADE 3 3YR FULFILLMENT	978-1-26-428450-4	2	\$1,760.94	\$0.00		\$3,521.88
<b>Teacher Resources Subtotal:</b>				<b>\$2,836.50</b>		<b>\$3,521.88</b>

CA Inspire Science Grade 3 Subtotal: \$2,836.50 \$8,778.28

<b>CA Inspire Science Grade 4</b>						
<b>Student Resources</b>						
INSPIRE SCIENCE CALIFORNIA COMPREHENSIVE STUDENT 3 YR SUBS BUNDLE GRADE 4	978-0-07-699330-7	68	\$77.30	\$0.00		\$5,256.40
<b>Student Resources Subtotal:</b>				<b>\$0.00</b>		<b>\$5,256.40</b>

<b>Teacher Resources</b>						
INSPIRE SCIENCE CALIFORNIA TEACHER EDITION GRADE 4	978-0-07-682417-5	2	\$49.15	\$98.30	*Free Materials	

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INSPIRE SCIENCE CALIFORNIA TEACHER EDITION VOLUME 2 GRADE 4	978-0-07-683521-8	2	\$49.15	\$98.30	*Free Materials
INSPIRE SCIENCE CALIFORNIA TEACHER EDITION VOLUME 3 GRADE 4	978-0-07-683530-0	2	\$49.15	\$98.30	*Free Materials
INSPIRE SCIENCE CALIFORNIA TEACHER EDITION VOLUME 4 GRADE 4	978-0-07-683540-9	2	\$49.15	\$98.30	*Free Materials
INSPIRE SCIENCE CALIFORNIA ONLINE TEACHER CENTER 3 YEAR SUBSCRIPTION GRADE 4	978-0-07-698836-5	2	\$755.07	\$1,510.14	*Free Materials
INSPIRE SCIENCE CALIFORNIA PROGRAM GUIDE GRADE K-5	978-0-07-687740-9	2	\$11.24	\$22.48	*Free Materials
INSPIRE SCIENCE INVESTIGATOR MAGAZINE SET GRADE 4	978-0-07-687702-7	2	\$79.35	\$158.70	*Free Materials
INSPIRE SCIENCE LEVELED READER LIBRARY (6 COPIES) GRADE 4	978-0-07-688265-6	2	\$308.58	\$617.16	*Free Materials
INSPIRE SCIENCE CALIFORNIA POSTER PACK GRADE 4	978-0-07-687738-6	2	\$22.47	\$44.94	*Free Materials
INSPIRE SCIENCE CALIFORNIA ASSESSMENT BLM GRADE 4	978-0-07-687760-7	2	\$22.47	\$44.94	*Free Materials
INSPIRE SCIENCE CALIFORNIA SNAP IN TABS GRADE 4	978-0-07-689511-3	2	\$22.47	\$44.94	*Free Materials
INSPIRE SCIENCE ESSENTIAL PLUS COLLABORATION KIT GRADE 4 3YR FULFILLMENT	978-1-26-428757-4	2	\$3,748.16	\$0.00	\$7,496.32
<b>Teacher Resources Subtotal:</b>				<b>\$2,836.50</b>	<b>\$7,496.32</b>

CA Inspire Science Grade 4 Subtotal: \$2,836.50 \$12,752.72

<b>Professional Development</b>						
PROFESSIONAL DEVELOPMENT ONSITE TRAINING K-5	978-1-26-452859-2	2	\$3,500.00	\$0.00		\$7,000.00

Complimentary Back to School Sessions are also available.

Professional Development Subtotal: \$0.00 \$7,000.00

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 Email: orders\_mhe@mheducation.com | Phone: 1-800-780-0246 | Fax: 1-866-513-8081

QUOTE DATE: 05/22/2023 ACCOUNT NAME: TEACH PREP MSC EHM ELEM EXPIRATION DATE: 07/06/2023  
 QUOTE NUMBER: JMCCO-05222023115153-001 ACCOUNT #: 12989339 PAGE #: 25



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**QUOTE PREPARED FOR:**

TEACH PREP MSC EHM ELEM  
 8505 S WESTERN AVE  
 Los Angeles, CA 90047-3053  
 ACCOUNT NUMBER: 12989339

**CONTACT:**

VALUE OF ALL MATERIALS	\$310,800.78
FREE MATERIALS	<del>(\$103,246.48)</del>
<b>PRODUCT TOTAL*</b>	<b>\$207,554.30</b>
ESTIMATED SHIPPING & HANDLING**	\$8,887.51
ESTIMATED TAX**	\$19,130.85
<b>GRAND TOTAL</b>	<b>\$235,572.66</b>

**SUBSCRIPTION/DIGITAL CONTACT:**

Comments:

\* Price firm for 45 days from quote date. Price quote must be attached to school purchase order to receive the quoted price and free materials.  
 \*\*Shipping and handling charges shown are only estimates. Actual shipping and handling charges will be applied at time of order. Taxes shown are only estimates. If applicable, actual tax charges will be applied at time of order.

Terms of Service:  
 By placing an order for digital products (the 'Subscribed Materials'), the entity that this price quote has been prepared for ('Subscriber') agrees to be bound by the Terms of Service and any specific provisions required by Subscriber's state law, each located in the applicable links below. Subject to Subscriber's payment of the fees set out above, McGraw Hill LLC hereby grants to Subscriber a non-exclusive, non-transferable license to allow only the number of Authorized Users that corresponds to the quantity of Subscribed Materials set forth above to access and use the Subscribed Materials under the terms described in the Terms of Service and any specific provisions required by Subscriber's state law, each located in the applicable links below. The subscription term for the Subscribed Materials shall be as set forth in the Product Description above. If no subscription term is specified, the initial term shall be one (1) year from the date of this price quote (the 'Initial Subscription Term'), and thereafter the Subscriber shall renew for additional one (1) year terms (each a 'Subscription Renewal Term'), provided MHE has chosen to renew the subscription and has sent an invoice for such Subscription Renewal Term to Subscriber.

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ATTENTION: In our effort to protect our customer's data, we will no longer store credit card data in any manner within in our system. Therefore, as of April 30, 2016 we will no longer accept credit card orders via email, fax, or mail/package delivery. Credit card orders may be placed over the phone by calling the number listed above or via our websites by visiting [www.mheducation.com](http://www.mheducation.com) (or [www.mhecoast2coast.com](http://www.mhecoast2coast.com)).

School Purchase Order Number: \_\_\_\_\_

\_\_\_\_\_  
 Name of School Official (Please Print)

\_\_\_\_\_  
 Signature of School Official

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QUOTE DATE: 05/22/2023 ACCOUNT NAME: TEACH PREP MSC EHM ELEM EXPIRATION DATE: 07/06/2023  
 QUOTE NUMBER: JMCCO-05222023115153-001 ACCOUNT #: 12989339 PAGE #: 26



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**QUOTE PREPARED FOR:**  
 TEACH ACAD OF TECHNOLOGIES MS  
 10045 S WESTERN AVE  
 LOS ANGELES, CA 90047-4255  
 ACCOUNT NUMBER: 4800852

**SUBSCRIPTION/DIGITAL CONTACT:**

**CONTACT:**

**SALES REP INFORMATION:**

Gerren Bennett  
 gerren.bennett@mheducation.com

Section Summary	Value of All Materials	Free Materials	Product Subtotal
<a href="#">California Wonders</a>	\$0.00	\$0.00	\$0.00
<a href="#">Grade 5</a>	\$39,710.04	(\$16,535.44)	\$23,174.60
<a href="#">Grade 6</a>	\$49,128.48	(\$20,406.36)	\$28,722.12
<a href="#">CA Study Sync Silver Package B - 1-Year Bound</a>	\$0.00	\$0.00	\$0.00
<a href="#">Grade 7</a>	\$15,493.68	(\$955.20)	\$14,538.48
<a href="#">Grade 8</a>	\$16,705.22	(\$955.20)	\$15,750.02
<a href="#">Reveal Math Grade 5</a>	\$9,175.74	(\$1,759.14)	\$7,416.60
<a href="#">Reveal Math Grade 6</a>	\$13,398.30	(\$981.00)	\$12,417.30
<a href="#">CA IMPACT Grade 5 US History: Making a New Nation</a>	\$7,934.88	(\$1,896.44)	\$5,938.44
<a href="#">CA IMPACT Grade 6 World History and Geography: Ancient Civilizations</a>	\$19,483.62	(\$1,258.98)	\$18,224.64
<a href="#">CA IMPACT Grade 7 World History and Geography: Medieval and Early Modern Times</a>	\$20,351.46	(\$1,258.98)	\$19,092.48
<a href="#">CA IMPACT Grade 8 United States History and Geography: Growth and Conflict</a>	\$21,942.90	(\$1,258.98)	\$20,683.92
<a href="#">CA Inspire Science Grade 5</a>	\$19,337.39	(\$4,254.75)	\$15,082.64
<a href="#">CA Inspire Science Integrated Grade 6</a>	\$26,484.75	(\$1,759.98)	\$24,724.77
<a href="#">CA Inspire Science Integrated Grade 7</a>	\$31,404.72	(\$1,759.98)	\$29,644.74
<a href="#">CA Inspire Science Integrated Grade 8</a>	\$31,458.17	(\$1,759.98)	\$29,698.19
<a href="#">Professional Development</a>	\$10,500.00	\$0.00	\$10,500.00
<b>PRODUCT TOTAL*</b>	<b>\$332,508.95</b>	<b>(\$56,900.41)</b>	<b>\$275,608.54</b>
<b>ESTIMATED S&amp;H**</b>			<b>\$8,627.82</b>
<b>ESTIMATED TAX**</b>			<b>\$25,238.65</b>
<b>GRAND TOTAL*</b>			<b>\$309,475.01</b>

\* Price firm for 45 days from quote date. Price quote must be attached to school purchase order to receive the quoted price and free materials.  
 \*\*Shipping and handling charges shown are only estimates. Actual shipping and handling charges will be applied at time of order. Taxes shown are only estimates. If applicable, actual tax charges will be applied at time of order.

Comments:

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QUOTE DATE: 05/22/2023 ACCOUNT NAME: TEACH ACAD OF TECHNOLOGIES MS EXPIRATION DATE: 07/06/2023  
 QUOTE NUMBER: JMCCO-05222023121619-001 ACCOUNT #: 4800852 PAGE #: 2



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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
<b>California Wonders</b>					
California Wonders Subtotal:				\$0.00	\$0.00
<b>Grade 5</b>					
<b>Student Resources</b>					
READING WONDERS CALIFORNIA STUDENT EDITION 3 YEAR SUBSCRIPTION BUNDLE GRADE 5	978-0-07-897137-2	82	\$87.50	\$0.00	\$7,175.00
READING WONDERS CLOSE READING COMPANION GRADE 5	978-0-02-131025-8	82	\$9.60	\$0.00	\$787.20
READING WONDERS YOUR TURN PRACTICE BOOK GRADE 5	978-0-07-677924-6	82	\$10.66	\$874.12	*Free Materials
Student Resources Subtotal:				\$874.12	\$7,962.20
<b>Teacher Resources</b>					
READING WONDERS CALIFORNIA TEACHER EDITION PACKAGE GRADE 5	978-0-02-145446-4	3	\$649.51	\$1,948.53	*Free Materials
READING WONDERS TEACHER WORKSPACE 3 YEAR SUBSCRIPTION GRADE 5	978-0-07-676921-6	3	\$545.22	\$1,635.66	*Free Materials
READING WONDERS LEVELED READER PACKAGE APPROACHING GRADE 5	978-0-02-119395-0	3	\$1,069.67	\$0.00	\$3,209.01
READING WONDERS LEVELED READER PACKAGE ON-LEVEL GRADE 5	978-0-02-119396-7	3	\$1,069.67	\$0.00	\$3,209.01
READING WONDERS LEVELED READER LIBRARY PACKAGE BEYOND GRADE 5	978-0-02-119370-7	3	\$1,069.67	\$0.00	\$3,209.01
READING WONDERS LEVELED READER LIBRARY PACKAGE ELL GRADE 5	978-0-02-119297-7	3	\$1,069.67	\$0.00	\$3,209.01
READING WONDERS - LEVELED READER LESSON CARDS GRADE 5	978-0-02-129209-7	3	\$82.21	\$246.63	*Free Materials
READING WONDERS VISUAL VOCABULARY CARDS GRADE 5	978-0-02-119230-4	3	\$79.13	\$237.39	*Free Materials
READING WONDERS CALIFORNIA WEEKLY ASSESSMENT GRADE 5	978-0-02-131722-6	3	\$63.04	\$189.12	*Free Materials
READING WONDERS CALIFORNIA SBAC UNIT ASSESSMENT GRADE 5	978-0-02-130772-2	3	\$63.75	\$191.25	*Free Materials
READING WONDERS CALIFORNIA SBAC BENCHMARK ASSESSMENT GRADE 5	978-0-02-132323-4	3	\$103.27	\$309.81	*Free Materials
READING WONDERS PLACEMENT AND DIAGNOSTIC ASSESSMENT GRADE K-6	978-0-07-677954-3	3	\$91.26	\$273.78	*Free Materials
Teacher Resources Subtotal:				\$5,032.17	\$12,836.04
<b>Grade 5 ELD</b>					

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QUOTE DATE: 05/22/2023 ACCOUNT NAME: TEACH ACAD OF TECHNOLOGIES MS EXPIRATION DATE: 07/06/2023  
 QUOTE NUMBER: JMCCO-05222023121619-001 ACCOUNT #: 4800852 PAGE #: 3



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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
READING WONDERS ENGLISH LEARNERS CA EXPAND/BRIDGE COMPANION WORKTEXT GRADE 5	978-0-02-131871-1	82	\$10.50	\$0.00	\$861.00
READING WONDERS ENGLISH LEARNERS STUDENT WORKSPACE 3 YR SUBSC 6 SEATS GRADE 5	978-0-07-904575-1	13	\$536.46	\$6,973.98	*Free Materials
READING WONDERS ENGLISH LEARNERS CA BEGINNER INTERACTIVE WORKTEXT UNIT 1 GRADE 5	978-0-02-131912-1	82	\$3.08	\$0.00	\$252.56
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 2 GRADE 5	978-0-02-131533-8	82	\$3.08	\$0.00	\$252.56
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 3 GRADE 5	978-0-02-131919-0	82	\$3.08	\$0.00	\$252.56
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 4 GRADE 5	978-0-02-130225-3	82	\$3.08	\$0.00	\$252.56
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 5 GRADE 5	978-0-02-131866-7	82	\$3.08	\$0.00	\$252.56
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 6 GRADE 5	978-0-02-131302-0	82	\$3.08	\$0.00	\$252.56
READING WONDERS ENGLISH LEARNERS CALIFORNIA TEACHER EDITION GRADE 5	978-0-02-130668-8	3	\$199.50	\$598.50	*Free Materials
READING WONDERS ENGLISH LEARNERS TEACHER WORKSPACE 3 YEAR SUBSCRIPTION GRADE 5	978-0-07-904539-3	3	\$121.50	\$364.50	*Free Materials
READING WONDERS ENGLISH LEARNERS ASSESSMENT GRADE 5	978-0-02-131731-8	3	\$63.75	\$191.25	*Free Materials
READING WONDERS ENGLISH LEARNERS ORAL LANGUAGE CARDS GRADE 5	978-0-02-132771-3	3	\$75.18	\$225.54	*Free Materials
READING WONDERS ENGLISH LEARNERS VISUAL VOCABULARY CARDS	978-0-02-119230-4	3	\$79.13	\$237.39	*Free Materials



GRADE 5	978-0-02-131342-0	3	\$29.10	\$07.40	*Free Materials
READING WONDERS ENGLISH LEARNERS LANGUAGE DEVELOPMENT PRACTICE BLM GRADE 4-6	978-0-02-131511-6	3	\$172.70	\$518.10	*Free Materials
READING WONDERS ENGLISH LEARNERS LANGUAGE DEVELOPMENT CARDS GRADE 4-6	978-0-02-130679-4	3	\$556.61	\$1,669.83	*Free Materials
<b>Grade 5 ELD Subtotal:</b>				<b>\$10,629.15</b>	<b>\$2,376.36</b>
<b>Grade 5 Subtotal:</b>				<b>\$16,535.44</b>	<b>\$23,174.60</b>

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QUOTE DATE: 05/22/2023 ACCOUNT NAME: TEACH ACAD OF TECHNOLOGIES MS EXPIRATION DATE: 07/06/2023  
 QUOTE NUMBER: JMCCO-05222023121619-001 ACCOUNT #: 4800852 PAGE #: 4



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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
<b>Grade 6</b>					
<b>Student Resources</b>					
READING WONDERS CALIFORNIA STUDENT EDITION 3 YEAR SUBSCRIPTION BUNDLE GRADE 6	978-0-07-897138-9	126	\$87.50	\$0.00	\$11,025.00
READING WONDERS CLOSE READING COMPANION GRADE 6	978-0-02-130649-7	126	\$9.60	\$0.00	\$1,209.60
READING WONDERS YOUR TURN PRACTICE BOOK GRADE 6	978-0-07-680259-3	126	\$10.66	\$1,343.16	*Free Materials
<b>Student Resources Subtotal:</b>				<b>\$1,343.16</b>	<b>\$12,234.60</b>

<b>Teacher Resources</b>					
READING WONDERS CALIFORNIA TEACHER EDITION PACKAGE GRADE 6	978-0-02-145447-1	3	\$649.51	\$1,948.53	*Free Materials
READING WONDERS TEACHER WORKSPACE 3 YEAR SUBSCRIPTION GRADE 6	978-0-07-676923-0	3	\$545.22	\$1,635.66	*Free Materials
READING WONDERS LEVELED READER LIBRARY PACKAGE APPROACHING GRADE 6	978-0-02-119332-5	3	\$1,069.67	\$0.00	\$3,209.01
READING WONDERS LEVELED READER PACKAGE ON-LEVEL GRADE 6	978-0-02-119492-6	3	\$1,069.67	\$0.00	\$3,209.01
READING WONDERS LEVELED READER LIBRARY PACKAGE BEYOND GRADE 6	978-0-02-119296-0	3	\$1,069.67	\$0.00	\$3,209.01
READING WONDERS LEVELED READER PACKAGE ELL GRADE 6	978-0-02-119491-9	3	\$1,069.67	\$0.00	\$3,209.01
READING WONDERS VISUAL VOCABULARY CARDS GRADE 6	978-0-02-118572-6	3	\$79.13	\$237.39	*Free Materials
READING WONDERS CALIFORNIA WEEKLY ASSESSMENT GRADE 6	978-0-02-131125-5	3	\$63.04	\$189.12	*Free Materials
READING WONDERS CALIFORNIA SBAC UNIT ASSESSMENT GRADE 6	978-0-02-130818-7	3	\$63.75	\$191.25	*Free Materials
READING WONDERS CALIFORNIA SBAC BENCHMARK ASSESSMENT GRADE 6	978-0-02-132909-0	3	\$103.27	\$309.81	*Free Materials
READING WONDERS PLACEMENT AND DIAGNOSTIC ASSESSMENT GRADE K-6	978-0-07-677954-3	3	\$91.26	\$273.78	*Free Materials
<b>Teacher Resources Subtotal:</b>				<b>\$4,785.54</b>	<b>\$12,836.04</b>

<b>Grade 6 ELD</b>					
READING WONDERS ENGLISH LEARNERS CA EXPAND/BRIDGE COMPANION WORKTEXT GRADE 6	978-0-02-130581-0	126	\$10.50	\$0.00	\$1,323.00
READING WONDERS ENGLISH LEARNERS STUDENT WORKSPACE 3 YR SUBSC 6 SEATS GRADE 6	978-0-07-904578-2	20	\$536.46	\$10,729.20	*Free Materials
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 1 GRADE 6	978-0-02-131292-4	126	\$3.08	\$0.00	\$388.08

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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 2 GRADE 6	978-0-02-131942-8	126	\$3.08	\$0.00	\$388.08
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 3 GRADE 6	978-0-02-130967-2	126	\$3.08	\$0.00	\$388.08
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 4 GRADE 6	978-0-02-131613-7	126	\$3.08	\$0.00	\$388.08
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 5 GRADE 6	978-0-02-131472-0	126	\$3.08	\$0.00	\$388.08
READING WONDERS ENGLISH LEARNERS CA EMERGING COMPANION WORKTEXT UNIT 6 GRADE 6	978-0-02-131126-2	126	\$3.08	\$0.00	\$388.08
READING WONDERS ENGLISH LEARNERS CALIFORNIA TEACHER EDITION GRADE 6	978-0-02-130402-8	3	\$163.93	\$491.79	*Free Materials
READING WONDERS ENGLISH LEARNERS TEACHER WORKSPACE 3	978-0-07-004511-3	3	\$491.50	\$983.00	*Free Materials

Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
YEAR SUBSCRIPTION GRADE 6	978-0-07-994942-3	3	\$121.00	\$364.00	*Free Materials
READING WONDERS ENGLISH LEARNERS ASSESSMENT GRADE 6	978-0-02-131176-7	3	\$63.75	\$191.25	*Free Materials
READING WONDERS ENGLISH LEARNERS ORAL LANGUAGE CARDS GRADE 6	978-0-02-131415-7	3	\$75.18	\$225.54	*Free Materials
READING WONDERS ENGLISH LEARNERS VISUAL VOCABULARY CARDS GRADE 6	978-0-02-131376-1	3	\$29.15	\$87.45	*Free Materials
READING WONDERS ENGLISH LEARNERS LANGUAGE DEVELOPMENT PRACTICE BLM GRADE 4-6	978-0-02-131511-6	3	\$172.70	\$518.10	*Free Materials
READING WONDERS ENGLISH LEARNERS LANGUAGE DEVELOPMENT CARDS GRADE 4-6	978-0-02-130679-4	3	\$556.61	\$1,669.83	*Free Materials
<b>Grade 6 ELD Subtotal:</b>				<b>\$14,277.66</b>	<b>\$3,651.48</b>
<b>Grade 6 Subtotal:</b>				<b>\$20,406.36</b>	<b>\$28,722.12</b>

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 QUOTE NUMBER: JMCCO05222023121619-001 ACCOUNT #: 4800852 PAGE #: 6



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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
<b>CA Study Sync Silver Package B: 1-Year Bound</b>					
CA Study Sync Silver Package B: 1-Year Bound Subtotal:				\$0.00	\$0.00

<b>Grade 7</b>					
<u>Student Resources</u>					
STUDYSYNC G7 CALIFORNIA 3/3 STDNT W/DESIGNATED ELD & RW 3 YEAR BUNDLE	978-0-07-905731-0	132	\$110.14	\$0.00	\$14,538.48
<b>Student Resources Subtotal:</b>				<b>\$0.00</b>	<b>\$14,538.48</b>

<u>Teacher Resources</u>					
STUDYSYNC GRADE 7 CALIFORNIA, ELD TEACHER RESOURCE COMPANION	978-1-94-276492-2	3	\$99.19	\$297.57	*Free Materials
STUDYSYNC CALIFORNIA TEACHER EDITION UNIT 1 GRADE 7	978-1-94-328652-2	3	\$24.81	\$74.43	*Free Materials
STUDYSYNC CALIFORNIA TEACHER EDITION UNIT 2 GRADE 7	978-1-94-328653-9	3	\$24.81	\$74.43	*Free Materials
STUDYSYNC CALIFORNIA TEACHER EDITION UNIT 3 GRADE 7	978-1-94-328654-6	3	\$24.81	\$74.43	*Free Materials
STUDYSYNC CALIFORNIA TEACHER EDITION UNIT 4 GRADE 7	978-1-94-328655-3	3	\$24.81	\$74.43	*Free Materials
STUDYSYNC CALIFORNIA ONLINE TEACHER WITH DESIGNATED ELD 3 YEAR SUBSCRIPTION	978-0-02-137937-8	3	\$119.97	\$359.91	*Free Materials
<b>Teacher Resources Subtotal:</b>				<b>\$955.20</b>	<b>\$0.00</b>
<b>Grade 7 Subtotal:</b>				<b>\$955.20</b>	<b>\$14,538.48</b>

<b>Grade 8</b>					
<u>Student Resources</u>					
STUDYSYNC G8 CALIFORNIA 3/3 STDNT W/DESIGNATED ELD & RW 3 YEAR BUNDLE	978-0-07-905733-4	143	\$110.14	\$0.00	\$15,750.02
<b>Student Resources Subtotal:</b>				<b>\$0.00</b>	<b>\$15,750.02</b>

<u>Teacher Resources</u>					
STUDYSYNC GRADE 8 CALIFORNIA, ELD TEACHER RESOURCE COMPANION	978-1-94-276493-9	3	\$99.19	\$297.57	*Free Materials
STUDYSYNC CALIFORNIA TEACHER EDITION UNIT 1 GRADE 8	978-1-94-328656-0	3	\$24.81	\$74.43	*Free Materials
STUDYSYNC CALIFORNIA TEACHER EDITION UNIT 2 GRADE 8	978-1-94-328657-7	3	\$24.81	\$74.43	*Free Materials
STUDYSYNC CALIFORNIA TEACHER EDITION UNIT 3 GRADE 8	978-1-94-328658-4	3	\$24.81	\$74.43	*Free Materials
STUDYSYNC CALIFORNIA TEACHER EDITION UNIT 4 GRADE 8	978-1-94-328659-1	3	\$24.81	\$74.43	*Free Materials
STUDYSYNC CALIFORNIA ONLINE TEACHER WITH DESIGNATED ELD 3 YEAR SUBSCRIPTION	978-0-02-137937-8	3	\$119.97	\$359.91	*Free Materials
<b>Teacher Resources Subtotal:</b>				<b>\$955.20</b>	<b>\$0.00</b>
<b>Grade 8 Subtotal:</b>				<b>\$955.20</b>	<b>\$15,750.02</b>

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 QUOTE NUMBER: JMCCO05222023121619-001 ACCOUNT #: 4800852 PAGE #: 7



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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
<b>Reveal Math Grade 5</b>					
<u>Student Resources</u>					
REVEAL MATH STUDENT 3 YEAR SUBSCRIPTION BUNDLE GRADE 5	978-1-98-437402-0	83	\$70.74	\$0.00	\$5,881.22

REVEAL MATH STUDENT 3 YEAR SUBSCRIPTION BUNDLE GRADE 5	978-1-26-437490-0	62	\$70.11	\$0.00	\$5,798.22
<b>Student Resources Subtotal:</b>				<b>\$0.00</b>	<b>\$5,798.22</b>
<b>Teacher Resources</b>					
REVEAL MATH TEACHER RESOURCE PACKAGE 3 YEAR SUBSCRIPTION BUNDLE GRADE 5	978-1-26-438960-5	3	\$425.73	\$1,277.19	*Free Materials
REVEAL MATH MANIPULATIVE KIT GRADE 3-5	978-1-26-441738-4	3	\$539.46	\$0.00	\$1,618.38
REVEAL MATH WORKSTATION KIT GRADE 5	978-1-26-591425-7	3	\$160.65	\$481.95	*Free Materials
<b>Teacher Resources Subtotal:</b>				<b>\$1,759.14</b>	<b>\$1,618.38</b>
<b>Reveal Math Grade 5 Subtotal:</b>				<b>\$1,759.14</b>	<b>\$7,416.60</b>
<b>Reveal Math Grade 6</b>					
<b>Student Resources</b>					
REVEAL MATH COURSE 1 STUDENT 3 YEAR BUNDLE	978-0-07-697793-2	126	\$77.13	\$0.00	\$9,718.38
LANGUAGE DEVELOPMENT HANDBOOK COURSE 1 STUDENT EDITION	978-0-07-902924-9	126	\$21.42	\$0.00	\$2,698.92
<b>Student Resources Subtotal:</b>				<b>\$0.00</b>	<b>\$12,417.30</b>
<b>Teacher Resources</b>					
REVEAL MATH COURSE 1 TEACHER DIGITAL LICENSE 3 YEAR SUBSCRIPTION	978-0-07-697747-5	3	\$122.40	\$367.20	*Free Materials
REVEAL MATH MIDDLE SCHOOL COURSE 1 TEACHER EDITION VOLUME 1	978-0-07-899720-4	3	\$96.39	\$289.17	*Free Materials
REVEAL MATH MIDDLE SCHOOL COURSE 1 TEACHER EDITION VOLUME 2	978-0-07-899175-2	3	\$96.39	\$289.17	*Free Materials
LANGUAGE DEVELOPMENT HANDBOOK COURSE 1 TEACHER EDITION	978-0-07-697589-1	3	\$11.82	\$35.46	*Free Materials
<b>Teacher Resources Subtotal:</b>				<b>\$981.00</b>	<b>\$0.00</b>
<b>Reveal Math Grade 6 Subtotal:</b>				<b>\$981.00</b>	<b>\$12,417.30</b>
<b>CA IMPACT Grade 5: US History: Making a New Nation</b>					
<b>Student Resources</b>					
IMPACT CALIFORNIA US HISTORY STUDENT 3 YEAR SUBSCRIPTION BUNDLE GRADE 5	978-0-07-689114-6	82	\$72.42	\$0.00	\$5,938.44
<b>Student Resources Subtotal:</b>				<b>\$0.00</b>	<b>\$5,938.44</b>
<b>Teacher Resources</b>					
IMPACT CALIFORNIA US HISTORY TEACHER EDITION GRADE 5	978-0-07-899310-7	3	\$180.82	\$542.46	*Free Materials

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QUOTE DATE: 05/22/2023 ACCOUNT NAME: TEACH ACAD OF TECHNOLOGIES MS EXPIRATION DATE: 07/06/2023  
 QUOTE NUMBER: JMCCO-05222023121619-001 ACCOUNT #: 4800852 PAGE #: 8



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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
IMPACT CALIFORNIA US HISTORY TEACHER CENTER 3 YEAR SUBSCRIPTION GRADE 5	978-0-07-691798-3	3	\$329.10	\$987.30	*Free Materials
IMPACT CALIFORNIA US HISTORY LANGUAGE LEARNERS TEACHING GUIDE GRADE 5	978-0-07-899380-0	3	\$102.69	\$308.07	*Free Materials
IMPACT CALIFORNIA WONDERS CONNECTIONS INSERTS GRADE 5	978-0-07-692496-7	3	\$38.55	\$115.65	*Free Materials
IMPACT CALIFORNIA BENCHMARK CONNECTIONS BOOKLET GRADE 5	978-0-07-692545-2	3	\$14.32	\$42.96	*Free Materials
<b>Teacher Resources Subtotal:</b>				<b>\$1,996.44</b>	<b>\$0.00</b>
<b>CA IMPACT Grade 5: US History: Making a New Nation Subtotal:</b>				<b>\$1,996.44</b>	<b>\$5,938.44</b>

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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
<b>CA IMPACT Grade 6 World History and Geography, Ancient Civilizations</b>					
<b>Student Resources</b>					
IMPACT CA G6 CMLPT DGLT & PRNT STDNT 4YR BNDL W/STUDYSYNC BLASTS WHGAC	978-0-07-687792-8	126	\$144.64	\$0.00	\$18,224.64
<b>Student Resources Subtotal:</b>				<b>\$0.00</b>	<b>\$18,224.64</b>

<b>Teacher Resources</b>					
IMPACT CALIFORNIA G6 TEACHER EDITION WORLD HISTORY & GEOGRAPHY ANCIENT TIMES	978-0-07-675586-8	3	\$140.89	\$422.67	*Free Materials
IMPACT CA G6 ONLINE TEACHER ED 4YR SUBSC WORLD HISTORY & GEOGRAPHY ANCIENT TIMES	978-0-07-695565-7	3	\$231.00	\$693.00	*Free Materials
SOCIAL STUDIES STUDYSYNC CALIFORNIA BLASTS ADD-ON TEACHER 4 YR SUB (CONNECT2)	978-0-07-691165-3	3	\$19.59	\$58.77	*Free Materials
IMPACT CALIFORNIA G6 CHPTR TSTS & LESSON QUIZ WORLD HIST & GEOG ANCIENT TIMES	978-0-07-906355-7	3	\$28.18	\$84.54	*Free Materials
<b>Teacher Resources Subtotal:</b>				<b>\$1,258.98</b>	<b>\$0.00</b>
<b>CA IMPACT Grade 6 World History and Geography, Ancient Civilizations Subtotal:</b>				<b>\$1,258.98</b>	<b>\$18,224.64</b>

<b>CA IMPACT Grade 7 World History and Geography, Medieval and Early Modern Times</b>					
<b>Student Resources</b>					
IMPACT CA G7 CMLPT DGLT & PRNT STDNT 4YR BNDL W/STUDYSYNC BLASTS WHGMMT	978-0-07-687859-8	132	\$144.64	\$0.00	\$19,092.48
<b>Student Resources Subtotal:</b>				<b>\$0.00</b>	<b>\$19,092.48</b>

<b>Teacher Resources</b>					
IMPACT CALIFORNIA G7 TEACHER EDITION WRLD HIST & GEOG MEDIEVAL ERLY MODERN TIMES	978-0-07-675588-2	3	\$140.89	\$422.67	*Free Materials
IMPACT CA G7 OTE 4YR SUB WORLD HISTORY & GEOGRAPHY MEDIEVAL & EARLY MODERN TIMES	978-0-07-695561-9	3	\$231.00	\$693.00	*Free Materials
SOCIAL STUDIES STUDYSYNC CALIFORNIA BLASTS ADD-ON TEACHER 4 YR SUB (CONNECT2)	978-0-07-691165-3	3	\$19.59	\$58.77	*Free Materials
IMPACT CALIFORNIA G7 CHPTR TSTS&LESN QUIZ WRLD HIST&GEOG MEDIEVAL ERLY MODRN TIME	978-0-07-906356-4	3	\$28.18	\$84.54	*Free Materials
<b>Teacher Resources Subtotal:</b>				<b>\$1,258.98</b>	<b>\$0.00</b>
<b>CA IMPACT Grade 7 World History and Geography, Medieval and Early Modern Times Subtotal:</b>				<b>\$1,258.98</b>	<b>\$19,092.48</b>

<b>CA IMPACT Grade 8 United States History and Geography, Growth and Conflict</b>					
<b>Student Resources</b>					
IMPACT CA G8 CMLPT DIG/PRNT STDNT 4YR BNDL W/SS BLASTS US HIST&GEOG GRWTH&CNFLCT	978-0-07-687900-7	143	\$144.64	\$0.00	\$20,683.52
<b>Student Resources Subtotal:</b>				<b>\$0.00</b>	<b>\$20,683.52</b>

<b>Teacher Resources</b>					
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 QUOTE NUMBER: JMCCO-05222023121619-001

ACCOUNT NAME: TEACH ACAD OF TECHNOLOGIES MS  
 ACCOUNT #: 4800852

EXPIRATION DATE: 07/06/2023  
 PAGE #: 10



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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
IMPACT CALIFORNIA G8 TEACHER EDITION US HIST & GEOG GROWTH & CONFLICT	978-0-07-675570-7	3	\$140.89	\$422.67	*Free Materials
IMPACT CA G8 ONLINE TE CENTER 4YR SUBSC US HISTORY & GEOGRAPHY GROWTH & CONFLICT	978-0-07-695526-8	3	\$231.00	\$693.00	*Free Materials
SOCIAL STUDIES STUDYSYNC CALIFORNIA BLASTS ADD-ON TEACHER 4 YR SUB (CONNECT2)	978-0-07-691165-3	3	\$19.59	\$58.77	*Free Materials
IMPACT CALIFORNIA G8 CHPTR TSTS & LESSON QUIZ US HIST & GEOG GROWTH & CONFLICT	978-0-07-906343-4	3	\$28.18	\$84.54	*Free Materials
<b>Teacher Resources Subtotal:</b>				<b>\$1,258.98</b>	<b>\$0.00</b>
<b>CA IMPACT Grade 8 United States History and Geography, Growth and Conflict Subtotal:</b>				<b>\$1,258.98</b>	<b>\$20,683.52</b>

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 QUOTE NUMBER: JMCCO-05222023121619-001 ACCOUNT #: 4800852 PAGE #: 11



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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
<b>CA Inspire Science Grade 5</b>					
<b>Student Resources</b>					
INSPIRE SCIENCE CALIFORNIA COMPREHENSIVE STUDENT 3 YR SUBSC BUNDLE GRADE 5	978-0-07-699340-6	82	\$77.30	\$0.00	\$6,338.60
<b>Student Resources Subtotal:</b>				<b>\$0.00</b>	<b>\$6,338.60</b>
<b>Teacher Materials</b>					
INSPIRE SCIENCE CALIFORNIA TEACHER EDITION GRADE 5	978-0-07-682419-9	3	\$49.15	\$147.45	*Free Materials
INSPIRE SCIENCE CALIFORNIA TEACHER EDITION VOLUME 2 GRADE 5	978-0-07-683522-5	3	\$49.15	\$147.45	*Free Materials
INSPIRE SCIENCE CALIFORNIA TEACHER EDITION VOLUME 3 GRADE 5	978-0-07-683533-1	3	\$49.15	\$147.45	*Free Materials
INSPIRE SCIENCE CALIFORNIA TEACHER EDITION VOLUME 4 GRADE 5	978-0-07-683542-3	3	\$49.15	\$147.45	*Free Materials
INSPIRE SCIENCE CALIFORNIA ONLINE TEACHER CENTER 3 YEAR SUBSCRIPTION GRADE 5	978-0-07-698868-6	3	\$755.07	\$2,265.21	*Free Materials
INSPIRE SCIENCE CALIFORNIA PROGRAM GUIDE GRADE K-5	978-0-07-687740-9	3	\$11.24	\$33.72	*Free Materials
INSPIRE SCIENCE INVESTIGATOR MAGAZINE SET GRADE 5	978-0-07-687703-4	3	\$79.35	\$238.05	*Free Materials
INSPIRE SCIENCE LEVELED READER LIBRARY (6 COPIES) GRADE 5	978-0-07-688266-3	3	\$308.58	\$925.74	*Free Materials
INSPIRE SCIENCE CALIFORNIA POSTER PACK GRADE 5	978-0-07-687739-3	3	\$22.47	\$67.41	*Free Materials
INSPIRE SCIENCE CALIFORNIA ASSESSMENT BLM GRADE 5	978-0-07-687761-4	3	\$22.47	\$67.41	*Free Materials
INSPIRE SCIENCE CALIFORNIA SNAP IN TABS GRADE 5	978-0-07-689512-0	3	\$22.47	\$67.41	*Free Materials
INSPIRE SCIENCE ESSENTIAL PLUS COLLABORATION KIT GRADE 5 3YR FULFILLMENT	978-1-26-428760-4	3	\$2,914.68	\$0.00	\$8,744.04
<b>Teacher Materials Subtotal:</b>				<b>\$4,254.75</b>	<b>\$8,744.04</b>
<b>CA Inspire Science Grade 5 Subtotal:</b>				<b>\$4,254.75</b>	<b>\$15,082.64</b>

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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
<b>CA Inspire Science Integrated Grade 6</b>					
<b>Student Resources</b>					
CALIFORNIA INSPIRE SCIENCE G6 INTEGRATED COMPREHENSIVE STUDENT 3 YEAR BUNDLE	978-0-07-696774-2	126	\$128.08	\$0.00	\$16,138.08
<b>Student Resources Subtotal:</b>				<b>\$0.00</b>	<b>\$16,138.08</b>
<b>Teacher Resources</b>					
INSPIRE SCIENCE CA GRADE 6 TEACHER EDITION	978-0-07-682900-2	3	\$101.12	\$303.36	*Free Materials
INSPIRE SCIENCE CALIFORNIA GRADE 6 TEACHER EDITION VOLUME 2	978-0-07-684702-0	3	\$101.12	\$303.36	*Free Materials
INSPIRE SCIENCE CALIFORNIA GRADE 6 TEACHER EDITION VOLUME 3	978-0-07-684703-7	3	\$101.12	\$303.36	*Free Materials
INSPIRE SCIENCE CALIFORNIA GRADE 6 TEACHER EDITION VOLUME 4	978-0-07-684706-8	3	\$101.12	\$303.36	*Free Materials
CALIFORNIA INSPIRE SCIENCE G6 INTEGRATED ETEACHER EDITION 3 YEAR SUBSCRIPTION	978-0-07-696768-1	3	\$126.00	\$378.00	*Free Materials
INSPIRE SCIENCE CA GRADE 6 PREPARING FOR THE CAST BLM	978-0-07-682973-6	3	\$22.47	\$67.41	*Free Materials
INSPIRE SCIENCE GRADE 6 POSTER PACK	978-0-07-684809-6	3	\$22.47	\$67.41	*Free Materials
CALIFORNIA INSPIRE SCIENCE G6-8 PRGRM GDE A TEACHER'S TOUR PD/L'S/DE	978-0-07-686828-5	3	\$11.24	\$33.72	*Free Materials
INSPIRE SCIENCE G6 INTGTD UN LV COLLABRTRN AND REFL KIT MTL'S 4UNIT BNDL 3YR	978-0-07-697845-8	3	\$2,862.23	\$0.00	\$8,586.69
<b>Teacher Resources Subtotal:</b>				<b>\$1,759.98</b>	<b>\$8,586.69</b>
<b>CA Inspire Science Integrated Grade 6 Subtotal:</b>				<b>\$1,759.98</b>	<b>\$24,724.77</b>

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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
<b>CA Inspire Science Integrated Grade 7</b>					
<b>Student Resources</b>					
CA INSPIRE SCIENCE INTEGRATED G7 COMPREHENSIVE STUDENT BUNDLE 3 YEAR	978-0-07-697117-6	132	\$128.08	\$0.00	\$16,906.56
<b>Student Resources Subtotal:</b>				<b>\$0.00</b>	<b>\$16,906.56</b>
<b>Teacher Resources</b>					
INSPIRE SCIENCE CA GRADE 7 TEACHER EDITION	978-0-07-682901-9	3	\$101.12	\$303.36	*Free Materials
INSPIRE SCIENCE CALIFORNIA GRADE 7 TEACHER EDITION VOLUME 2	978-0-07-684707-5	3	\$101.12	\$303.36	*Free Materials
INSPIRE SCIENCE CALIFORNIA GRADE 7 TEACHER EDITION VOLUME 3	978-0-07-684708-2	3	\$101.12	\$303.36	*Free Materials
INSPIRE SCIENCE CALIFORNIA GRADE 7 TEACHER EDITION VOLUME 4	978-0-07-684711-2	3	\$101.12	\$303.36	*Free Materials
INSPIRE SCIENCE CALIFORNIA INTEGRATED ETEACHER EDITION 3 YR SUBSCRIPTION GRADE 7	978-0-07-697111-4	3	\$126.00	\$378.00	*Free Materials
INSPIRE SCIENCE CA GRADE 7 PREPARING FOR THE CAST BLM	978-0-07-682981-1	3	\$22.47	\$67.41	*Free Materials
INSPIRE SCIENCE GRADE 7 POSTER PACK	978-0-07-684812-6	3	\$22.47	\$67.41	*Free Materials
CALIFORNIA INSPIRE SCIENCE G6-8 PRGRM GDE A TEACHER'S TOUR PD/LS/DE	978-0-07-686828-5	3	\$11.24	\$33.72	*Free Materials
INSPIRE SCIENCE G7 INTGTD COLLABORATION & REFILL KIT MATERIALS 4UNIT BUNDLE 3YR	978-0-07-697985-1	3	\$4,246.06	\$0.00	\$12,738.18
<b>Teacher Resources Subtotal:</b>				<b>\$1,759.98</b>	<b>\$12,738.18</b>
<b>CA Inspire Science Integrated Grade 7 Subtotal:</b>				<b>\$1,759.98</b>	<b>\$29,644.74</b>

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Product Description	ISBN	Qty	Unit Price	Free Materials	Line Subtotal
<b>CA Inspire Science Integrated Grade 8</b>					
<b>Student Resources</b>					
CA INSPIRE SCIENCE INTEGRATED G8 COMPREHENSIVE STUDENT BUNDLE 3 YEAR	978-0-07-697121-3	143	\$128.08	\$0.00	\$18,315.44
<b>Student Resources Subtotal:</b>				<b>\$0.00</b>	<b>\$18,315.44</b>
<b>Teacher Resources</b>					
INSPIRE SCIENCE CA GRADE 8 TEACHER EDITION	978-0-07-682972-9	3	\$101.12	\$303.36	*Free Materials
INSPIRE SCIENCE CALIFORNIA GRADE 8 TEACHER EDITION VOLUME 2	978-0-07-684712-9	3	\$101.12	\$303.36	*Free Materials
INSPIRE SCIENCE CALIFORNIA GRADE 8 TEACHER EDITION VOLUME 3	978-0-07-684713-6	3	\$101.12	\$303.36	*Free Materials
INSPIRE SCIENCE CALIFORNIA GRADE 8 TEACHER EDITION VOLUME 4	978-0-07-684715-0	3	\$101.12	\$303.36	*Free Materials
INSPIRE SCIENCE CALIFORNIA INTEGRATED ETEACHER EDITION 3 YR	978-0-07-697006-7	3	\$126.00	\$378.00	*Free Materials

SUBSCRIPTION GRADE 8	978-0-07-689193-1	3	\$ 120.00	\$ 370.00	*Free Materials
INSPIRE SCIENCE CA GRADE 8 PREPARING FOR THE CAST BLM	978-0-07-682984-2	3	\$22.47	\$67.41	*Free Materials
INSPIRE SCIENCE GRADE 8 POSTER PACK	978-0-07-684813-3	3	\$22.47	\$67.41	*Free Materials
CALIFORNIA INSPIRE SCIENCE G6-8 PRGRM GDE A TEACHER'S TOUR PD/LIS/DE	978-0-07-686828-5	3	\$11.24	\$33.72	*Free Materials
INSPIRE SCIENCE G8 INTGTD COLLABORATION & REFILL KIT MATERIALS 4UNIT BUNDLE 3YR	978-0-07-698011-6	3	\$3,794.25	\$0.00	\$11,382.75
<b>Teacher Resources Subtotal:</b>				<b>\$1,759.98</b>	<b>\$11,382.75</b>
<b>CA Inspire Science Integrated Grade 8 Subtotal:</b>				<b>\$1,759.98</b>	<b>\$29,698.19</b>
<b>Professional Development</b>					
PROFESSIONAL DEVELOPMENT ONSITE TRAINING K-5	978-1-26-452859-2	3	\$3,500.00	\$0.00	\$10,500.00
Complimentary Back to School Sessions are also available.					
<b>Professional Development Subtotal:</b>				<b>\$0.00</b>	<b>\$10,500.00</b>

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**QUOTE PREPARED FOR:**

TEACH ACAD OF TECHNOLOGIES MS  
 10045 S WESTERN AVE  
 LOS ANGELES, CA 90047-4255  
 ACCOUNT NUMBER: 4800852

**CONTACT:**

VALUE OF ALL MATERIALS	\$332,508.95
FREE MATERIALS	<del>(\$56,900.41)</del>
<b>PRODUCT TOTAL*</b>	<b>\$275,608.54</b>
ESTIMATED SHIPPING & HANDLING**	\$8,627.82
ESTIMATED TAX**	\$25,238.65
<b>GRAND TOTAL</b>	<b>\$309,475.01</b>

**SUBSCRIPTION/DIGITAL CONTACT:**

Comments:

\* Price firm for 45 days from quote date. Price quote must be attached to school purchase order to receive the quoted price and free materials.

\*\*Shipping and handling charges shown are only estimates. Actual shipping and handling charges will be applied at time of order. Taxes shown are only estimates. If applicable, actual tax charges will be applied at time of order.

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School Purchase Order Number: \_\_\_\_\_

\_\_\_\_\_  
 Name of School Official (Please Print)

\_\_\_\_\_  
 Signature of School Official

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# Coversheet

## CEO Report

**Section:** III. Items Scheduled for Information and Potential Action  
**Item:** G. CEO Report  
**Purpose:** FYI  
**Submitted by:**  
**Related Material:** Board Report- Directors.pdf



**CEO BOARD REPORT**  
**Board Meeting May 31, 2023**

<b>Department</b>	<b>Highlights</b>
<p>Maria Pimienta            Director of Human Resources</p>	<ul style="list-style-type: none"> <li>● Recruitment and hiring of new teachers</li> <li>● Supporting Admins with summer school planning</li> <li>● Attending upcoming student activities</li> </ul>
<p>Enrique Robles            Director of Operations &amp; Data            Systems</p>	<ul style="list-style-type: none"> <li>● Continuing the procurement process for the School Nutrition Program (SNP)</li> <li>● Supporting Principals with Curriculum and platforms for next year.</li> <li>● Working on CALPADS End of Year Reporting, Federal Civil Rights Data Collection Cycle and Period 3 (P3) Attendance Reporting</li> </ul>
<p>Jacky Leung            Director of Technology</p>	<ul style="list-style-type: none"> <li>● Working on technology orders for next year (Chromebooks, Staff Laptops, Copiers).</li> <li>● E-Rate</li> </ul>
<p>Luis Ramirez            Director of Enrollment and            Recruitment</p>	<ul style="list-style-type: none"> <li>● Continuing to coordinate enrollment verification for incoming TEACH families for all our campuses</li> <li>● Continuing to verify Intent to Return information for our current TEACH families</li> </ul>
<p>Beth Bulgeron,            Dir of Governance and Compliance</p>	<ul style="list-style-type: none"> <li>● Working with schools to develop the LCAPs</li> </ul>
<p>Executive Report</p>	



# Coversheet

## Update and Discussion- Annual Board Reporting Plan

**Section:** III. Items Scheduled for Information and Potential Action  
**Item:** I. Update and Discussion- Annual Board Reporting Plan  
**Purpose:** Discuss  
**Submitted by:**  
**Related Material:** CA\_annual\_board\_reporting\_calendar\_23-24.pdf

## Annual Board Reporting Calendar

**All meetings will be held on Tuesdays at 5 pm**

**August 1, 2023- CA**

**Agenda Item:** Report on State Dashboard and Internal Student Performance Indicators.

**Presenter:** Data

**Report to Include:**

- SBAC performance compared to state (show 3-year trend data)
- Chronic absenteeism compared to state (show 3-year trend data)
- Average daily attendance -compare to state
- Graduation rate (4-year cohort) compare to state
- ELL reclassification rate (show 3-year trend)
- Suspension/ expulsion rate
- Percentage of students who earned a D or F the previous academic school year in any subject.
- Percentage of seniors that took at least one AP course (at any time in their academic career, the denominator is the number of seniors the previous year)
- Percentage of seniors that took more than one AP course (at any point)
- Percentage of AP students that scored a 4 or 5 on the exam (with course breakdown)- the denominator is the total number of TEACH students that took an AP exam this year
- Teacher turnover (show percent and numbers) teachers who did not return from last year)
- Leadership turnover (from the leadership team- what people did not return from last year? Name the positions)
- EOY survey results – student safety and engagement, teacher and staff satisfaction, parent satisfaction.

**Agenda Item:** Principal Reports

**Presenters:** Principals

Written and oral reports should include:

- Highlights and lessons learned from last year
- Update on 2-3 goals you will accomplish for the upcoming school year and how they will be tracked. (Carranza approved)
- Report on the implementation of key strategies:
  - HS- AP Certification and Training
  - ES- Update on GATE
  - HS- EEG goals and implementation
  - HS- A-G goals and implementation

**August 29, 2023- CA**

**September 26, 2023- CA**

**Agenda Item:** Principal Reports on professional development, progress on strategic goals (as defined in the August meeting- use lead not lag indicators) and initial NWEA and iReady results from beginning of the year.

**Presenters:** Principals

**October 24, 2023- CA**

**Agenda Item:** Update on Parent Involvement, ELAC and SSC Meetings

**Presenter:** Luis

**December 12, 2023- CA**

**January 30, 2024- CA**

**Agenda Item:** Principal Reports on Mid-year Verified Formative Assessments, Bright Spots, Special Programs, Report on Implementation Progress of Strategic Goals (as defined in the August 1 meeting, again lead not lag indicators).

**February 27, 2024- CA**

**March 26, 2024- CA**

**Agenda Item: Report on Parent Involvement, ELAC and SSC**

**Presenter:** Luis

**April 30, 2024- CA**

**Agenda Item:** Presentation on Interim Verified Data. Same content as the April 2023 report- include interim assessments as predictors, state comps, key state data points including ADA, Chronic Absenteeism, students on track to graduate.

**Presenter:** Data

**May 21, 2024- CA**

**Monday June 17, 2024 Special Hearing Board Meeting for LCAP input-** Sites need to be open and available to the public for these meetings but it is a forum for public input only (not discussion or decision making)

**Tuesday June 18, 2024 – CA**

Important Agenda Items include LCAP and Budget Approval. Principals should be available to answer questions from the Board.

- Written reports should be submitted to Beth by noon the Wednesday preceding the meeting. Please be FERPA compliant and remember that our board meetings are Public Meetings.