efile	e GF	RAPHIC	orint - DO NOT PROCESS	As Filed Data -				D	LN: 93	349307001681		
Form	۵0	20	Return of Org	ganization E	xempt	From	Incom	e Tax		OMB No. 1545-004		
Form •	IJ	7 0	Under section 501(c), 527, or	_	ternal Reve	nue Code	e (except p	rivate foundati	ons)	2020		
Depart Treasu Interna	ry	of the enue Service	▶ Go to <u>www.irs.go</u>	ov/Form990 for ins	tructions a	and the I	atest infor	mation.		Open to Public Inspection		
A F	or th	ne 2020 ca	alendar year, or tax year begin	ning 08-01-2020	, and endi	ng 07-31	L-2021					
☐ Ad	dress	applicable: change hange	C Name of organization Equal Opportunity Schools					D Employe 37-1609		fication number		
☐ Ini	tial re	eturn	Doing business as									
☐ Am	ende	rn/terminated ed return ion pending	Number and street (or P.O. box if m 5601 6th Ave S 258	nail is not delivered to str	eet address)	Room/sui	te	E Telephone (206) 54				
			City or town, state or province, cou Seattle, WA 98108	ntry, and ZIP or foreign p	oostal code			G Gross rec	eipts \$ 1	1,869,783		
			F Name and address of principal Eddie Lincoln 5601 6th Ave S 258 Seattle, WA 98108	al officer:			sub H(b) Are	his a group reto ordinates? all subordinate		□Yes ☑ No		
		mpt status:	✓ 501(c)(3)	(insert no.) 4947	(a)(1) or 🛘	527	If "	uded? No," attach a lis up exemption r	•	instructions)		
K Forr	n of c	organization:	☑ Corporation ☐ Trust ☐ Asso	ociation Other ►			L Year of for		M State WA	of legal domicile:		
Pa	ırt I	Sumi	mary					L				
e C			cribe the organization's mission of ortunity Schools' mission is to en			oportunity	y to succeed	l in challenging	high s	chool courses.		
Activities & Governance			s box ▶ ☐ if the organization di			osed of m	ore than 25	% of its net as	sets.			
4 Number of independent voting members of the governing body (Part VI, line 1b)												
5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)									7			
i ct	l	6 Total number of volunteers (estimate if necessary)										
4	l		elated business revenue from Par ated business taxable income fro					•	7a 7b			
	"	iver uniter	ated publicess taxable income ino	11 1 01111 330-1, IIIle 33			· · ·	rior Year	/ b	Current Year		
Qı	8	Contribut	ions and grants (Part VIII, line 1h)			<u> </u>	13,857,8	34	11,724,13		

	Equal Opportunity Schools' mission is to ensure that all students have the opportunity to si	ucceed in challenging hi	gh sc	hool courses.
2	Check this box ▶ ☐ if the organization discontinued its operations or disposed of more the Number of voting members of the governing body (Part VI, line 1a)	nan 25% of its net asset	s. 3	l 8
4	Number of independent voting members of the governing body (Part VI, line 1b)		4	8
5	, , , , , , , , , , , , , , , , , , , ,		5	71
6			6	9
-	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0
1	Net unrelated business taxable income from Form 990-T, line 39	• •	7b	<u> </u>
 	The unrelated business taxable mount from 10th 10th 10th 10th 10th 10th 10th 10th	Prior Year		Current Year
8	Contributions and grants (Part VIII, line 1h)	13,857,834		11,724,137
9				0
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	109,627		142,483
11	. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			3,163
12	! Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	13,967,461		11,869,783
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	204,832		22,197
14	Benefits paid to or for members (Part IX, column (A), line 4)			0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	7,317,196		7,876,790
16	ia Professional fundraising fees (Part IX, column (A), line 11e)			0
Ł	Total fundraising expenses (Part IX, column (D), line 25) ▶38,727			
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,225,597		3,365,712
18	3 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	10,747,625		11,264,699
19	Revenue less expenses. Subtract line 18 from line 12	3,219,836		605,084
	Ве	eginning of Current Year		End of Year
20		14,168,973		16,091,420
1	Total liabilities (Part X, line 26)	1,623,678		2,332,196
122	Net assets or fund halances. Subtract line 21 from line 20	12 545 295		13 759 224

Net Assets or Fund Balances 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.

Sign	Signature of officer
Here	A Eddin Lincoln Juhaning CEO

Type or print name and title

Paid
Preparer
Use Only

Expenses

	•				
	Print/Type preparer's name	Preparer's signature	Date	Check if	PTIN P00281100
	Firm's name Jones & Associates PLLC	CPAS		Firm's EIN ► 8	2-5107131
	Firm's address ▶ 17544 Midvale Ave N Ste	e 100		Phone no. (206) 525-5186
	Shoreline, WA 98133				
cu	ss this return with the preparer shown	n above? (see instructions)			. ☑Yes ☐No

Form	990 (2020)						Page 2
Pa	t III Statement o	of Program Servic	e Accomplis	hments			
	Check if Sched	lule O contains a respo	nse or note to a	any line in this Part III .			
1	See Additional Data (Code:) (Expenses \$ including grants of \$) (Revenue \$						
Equal	Opportunity Schools' r	mission is to ensure th	at all students h	nave the opportunity to s	ucceed in challenging high school c	ourses.	
2	Did the organization u	ındertake anv significa	nt program ser	vices during the vear whi	ch were not listed on		
		, -		• •		□ Yes 🔽	No
	If "Yes," describe thes	se new services on Sch	edule O.				
3	Did the organization o						
	services?					☐Yes	✓ No
	If "Yes," describe thes	se changes on Schedul	e O.				
4	Section 501(c)(3) and	l 501(c)(4) organizatio	ns are required	to report the amount of			5.
4a	•) (Expenses \$	8,093,460	including grants of \$	22,197) (Revenue \$)	
4b	(Code:) (Expenses \$		including grants of \$) (Revenue \$)	
4 c	(Code:) (Expenses \$		including grants of \$) (Revenue \$)	
4d	Other program service	es (Describe in Schedu	le O.)				
	(Expenses \$	inclu	uding grants of	\$) (Revenue \$)	
4e	Total program servi	ice expenses >	8.093.4	60			

17

18

19

Nο

Nο

Nο

Nο

Nο

Nο

Form **990** (2020)

16

17

18

19

20a

20b

21

				rage 3
Par	Checklist of Required Schedules			
1	Is the organization described in section $501(c)(3)$ or $4947(a)(1)$ (other than a private foundation)? If "Yes," complete		Yes Yes	No
•	Schedule A 2	1		
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		No
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D,</i> Part 2	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🥞	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 2	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 🕏	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 2	12a	Yes	
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

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Par	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L</i> ,Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		NI-
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
Pai	Statements Regarding Other IRS Filings and Tax Compliance	· · · · ·		
	Check if Schedule O contains a response or note to any line in this Part V	. ;		
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 43		Yes	No

1b

 ${f b}$ Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

1c

Yes

Par	tV Statements Regarding Other IRS Filings and Tax Compliance (continued)			rage 3
	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			
h	this return	2b	Yes	
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		- 103	
3a	Did the organization have unrelated business gross income of $$1,000$ or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			N -
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 		No No
		5b		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c 6a		No
	solicit any contributions that were not tax deductible as charitable contributions?	- Va		
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
	Organizations that may receive deductible contributions under section 170(c).	_		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	_		
L	required?	7g		No
п	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		No
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	124		
	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
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			
C	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	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?	15		No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No

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Pai	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	o" respo	onse to i	ines ✓
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 8			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 8			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		No
ь	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt			
	status with respect to such arrangements?	16b		
	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed▶ WA			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest 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: • Wing Leung 5801 6th Avenue S 258 Seattle, WA 98108 (206) 547-1167			

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

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee." • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)
- who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations. • List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations. • List all of the organization's 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.

organization, more than \$10,000 of reportable co See instructions for the order in which to list the			organ	iizat	ion	and ar	ıy re	elated organizations	5.	
Check this box if neither the organization no	•		ion c	omr	anc	ated a	nv r	current officer dire	ctor or trustee	
(A) Name and title	(B) Average hours per week (list any hours	Position than of is b	on (do one bo	(C) o no ox, u n of) t ch unle fice	eck moss ss pers	ore son	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC)	(W-2/1099- MISC)	organization and related organizations
(1) Byron Garrett	40.00			x				271,597	0	13,805
CEO (2) Sasha Rabkin	0.00 40.00									
CSO	0.00							201,008	0	11,687
(3) Eddie Lincoln	40.00			.,						
Interim CEO	0.00			Х				174,447	0	10,890
(4) Evelyn Taylor	40.00							167,107	0	10,670
<u>coo</u>	0.00							,		,
(5) Kia Franklin CPO	40.00							160,360	0	10,468
(6) Jennifer N Ward Sr Dir	40.00							125,353	0	9,418
(7) Aurora P Parrish Mg Dir	40.00							109,947	0	8,955
(8) Deborah J Wilds Chair	2.00	х		х				0	0	0
(9) Ron Fortune Sec/Treasurer	2.00	_		х				0	0	0
(10) Jere King	1.00	x						0	0	0
Board Member	0.00 1.00									
(11) Lee Vargas Board Member		×						0	0	0
(12) Stephen Fink	0.00 1.00									
Board Member	0.00	×						0	0	0
(13) Joanne Harrell	2.00	х						0	0	0
Board Member	0.00							0	0	
(14) Eric Weaver Board Member	0.00	x						0	0	0
(15) Doug Borchard Board Member	1.00 0.00	х						0	0	0
										Form 990 (2020)

Page **8**

	990 (2020)											Page 8
Part	Section A. Officers, Direct		, Key ا	Emp			, and	High				
	(A) Name and title	(B) Average hours per week (list any hours	than c	one b	oox, u an off ctor/t	ot che unles fficer trust		rson a	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	Estima amount o compen from	nated of other nsation the
		for related organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	- (W-2/1099- MISC)	(W-2/1099- MISC)	organizat relat organiza	ted
				1 1			at ed	_				
				 	<u> </u>		_	+				
				 	 	 	 	+				
				 		 	_	+				
				 			<u> </u>	#				
1b S	Sub-Total	<u> </u>	<u> </u>	<u> </u>		<u></u>	<u> </u> ▶					
с То	Total from continuation sheets to F								1 200 010			75 903
2	Total (add lines 1b and 1c) Total number of individuals (includin of reportable compensation from the		to thos			¹pov	re) who	o rec	1,209,819 ceived more than \$1	L .00,000		75,893
											Yes	No
	Did the organization list any former line 1a? <i>If "Yes," complete Schedule</i>			:ee, k	.ey e	mplo •	oyee,	or hi	ghest compensated		3	No
	For any individual listed on line 1a, is organization and related organization individual										4 Yes	
	Did any person listed on line 1a rece services rendered to the organization	on?If "Yes," compl									5	No
	ection B. Independent Contrac									1:00 000 of com		
	Complete this table for your five high from the organization. Report compe	ensation for the c								on's tax year.	· 	
l		(A) e and business addre	ess							(B) cription of services	(C Comper	
Conver	ene Inc Technology Drive		_	_	_	_	_	_	Software de	evelopment		393,394
Tampa	a, FL 33647 ican Institute for Research								Software de	ovelonment		201,387
1400 C	Crystal Drive tton, VA 22202								50	меюритель		201,33,
	ation First Consulting		-						Software de	evelopment		266,667
	ox 22871 le, WA 98122											
	otal number of independent contractors compensation from the organization ▶		t not lim	nited	to th	nose	listed	abo'	ve) who received m	ore than \$100,000	of	
<u></u>	Jilipelisacion from the organizacion p					—		—				10 (2020)

orm 9 Part		Statement	of E	Pevenue						Page 9
Pari	VIII				respo	onse or note to any	line in this Part VIII			🗆
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
	1a	Federated campaig	gns	1	.a	I		revenue		1 312 314
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership dues		. 1	.b					
s, Grants Amounts	С	Fundraising events	5.	. 1	.с					
ifts,	u	Related organization		<u> </u>	.d					
s, G imil		Government grants (<u> </u>	.е	6,382,908				
Contributions, Gift and Other Similar	ľ	All other contributions and similar amounts above	not ir	schildod	Lf	5,341,229				
ibur)the	g	Noncash contributions lines 1a - 1f:\$	s incl		ĺ					
ont nd (L	Total. Add lines 1a	. 16		g	•				
<u>ت ت</u>	"	Total. Add lines 18	3-11		•	Business Code	11,724,137		-	1
	2a					Busilless Code				
en										
ven	b									
an GE	_									
ar vic	C									
Š	d									
Program Service Revenue	e									
Æ										
		All other program								
	_	Total. Add lines 2 Investment income				0 interest and other				
	S	similar amounts) .				•	142,48			142,483
		Income from invest Royalties			npt b	ond proceeds		0		
		Royaldes	r i	(i) Real	•	(ii) Personal	1	_		
		Cross routs	ا ا	()						
		Gross rents Less: rental	6a							
		expenses	6b							
	С	Rental income or (loss)	6с							
	c	Net rental income	or ((loss)				0		
				(i) Securit	ies	(ii) Other				
	7a	Gross amount from sales of	7a							
		assets other than inventory Less: cost or other basis and	Ш							
	b		7b							
		sales expenses	\vdash				_			
	С									
					. .	· · · >		0		
ne	Ga			of						
.ve⊞		contributions reported on line 1c). See Part IV, line 18			8a					
Re	b	b Less: direct expenses			8b					
Other Revenue	C	: Net income or (los	s) fr	om fundraisir	ig ev	ents		0		
Ó	9a	Gross income from	gami	ing activities.						
		See Part IV, line 19			9a					
		Less: direct expen : Net income or (los			9b ctivit	ies .		0		
	`	. Net income or (los	55) 11	om gaming a	Ctivit	les ▶				
	10	Gross sales of inve returns and allowa	entor	y, less						
	l b	Less: cost of good			10a 10b					
		: Net income or (los						0		
		Miscellaneo				Business Code				
	11	a Other				90009	3,16	3		3,163
	l E						_			
	"	•								
	,									
	6	All other revenue								
		Total. Add lines 1				>	3,16	3		
	12	Total revenue. S	ee ir	structions .						145.040
						<u>-</u>	11,869,78	ادا		145,646

Form 990 (2020)				Page 10
Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must o	complete all columns.	All other organizatio	ns must complete colu	mn (A).
Check if Schedule O contains a response or note to ar	ny line in this Part IX	<u></u>	<u> </u>	<u> 🗹 </u>
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
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	22,197	22,197		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	0			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	470,739	169,466	263,614	37,659
6 Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7 Other salaries and wages	6,100,182	5,174,291	924,993	898
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	243,599	215,474	28,125	
9 Other employee benefits	599,852	509,874	89,978	
10 Payroll taxes	462,418	393,055	69,363	
11 Fees for services (non-employees):				
a Management	0			
b Legal	0			
c Accounting	0			
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17	0			
f Investment management fees	0			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,489,758	854,272	635,486	
12 Advertising and promotion	144,775	124,599	20,176	
13 Office expenses	138,394	67,051	71,343	
14 Information technology	490,156	191,132	299,024	
15 Royalties	0			
16 Occupancy	317,771	8,170	309,601	
17 Travel	53,925	25,624	28,301	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .	0			
19 Conferences, conventions, and meetings	46,309	24,809	21,500	
20 Interest	1,192		1,192	
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	433,025	175,166	257,859	

24,725

96,213

63,674

43,659

17,663

4,473

11,264,699

23 Insurance . .

a Telephone

b Minor Equipment

d Taxes and Licenses

e All other expenses

expenses on Schedule O.)

c Professional Development

24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e

Total functional expenses. Add lines 1 through 24e
 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.
 Check here ► ☐ if following SOP 98-2 (ASC 958-720).

17,759

62,714

39,797

15,646

29

2,335

8,093,460

6,966

33,329

23,877

28,013

17,634

2,138

3,132,512

170

38,727

Form **990** (2020)

(B)

End of year

Page **11**

839.943

2,205,668

3.647.519

2.781.884

0

0

0

0

0

0

219,559

290,177

6.106.670

16,091,420

871.958

88.950

1.216.100

155.188

2.332.196

9,179,473

4,579,751

13,759,224

16,091,420

Form 990 (2020)

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

1	C

2

16

17

18

19

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21

23

24

25

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28

31

32

33

Liabilities 22

Fund Balances

5 29

Assets 30

Savings and temporary cash investments Pledges and grants receivable, net

Accounts receivable, net .

Loans and other payables to any current or former officer, director, trustee,

key employee, creator or founder, substantial contributor, or 35% controlled Loans and other receivables from other disqualified persons (as defined under

section 4958(f)(1)), and persons described in section 4958(c)(3)(B). Notes and loans receivable, net . . .

Inventories for sale or use .

basis. Complete Part VI of Schedule D Investments—publicly traded securities .

10b Investments—other securities. See Part IV, line 11 . . . Investments—program-related. See Part IV, line 11 . Intangible assets . . .

b Less: accumulated depreciation 11 12 13 14 15 Other assets. See Part IV, line 11 . . .

Accounts payable and accrued expenses .

Grants payable .

Deferred revenue . . .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

Tax-exempt bond liabilities . .

Assets 10a Land, buildings, and equipment: cost or other

10a

Prepaid expenses and deferred charges .

Total assets. Add lines 1 through 15 (must equal line 33)

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

Secured mortgages and notes payable to unrelated third parties . . .

Organizations that follow FASB ASC 958, check here ▶ 🗹 and

Unsecured notes and loans payable to unrelated third parties .

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

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds .

Total liabilities and net assets/fund balances .

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

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

Organizations that do not follow FASB ASC 958, check here ightharpoonup and

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

Retained earnings, endowment, accumulated income, or other funds

441,935

151,758

299.154

Beginning of year

255.849

2

3

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13

14

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16

17

18

19

20

21

22 23

24

25

26

27

28

29

30

31

32

33

1,572,359

4.788.500

1,581,433

8 9 285,827

5.385.851

14,168,973

324.495

83.083

1.216.100

1.623.678

6,777,648

5.767.647

12,545,295

14,168,973

10c

11 12

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

2c

Audit Act and OMB Circular A-133?

3a

Yes

3h

No

Form 990 (2020)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Additional Data

Software ID: 20011551

Software Version: 2020v4.0 **EIN:** 37-1609659

Name: Equal Opportunity Schools

Form 990 (2020)

Form 990, Part III, Line 4a:

Action for Equity (A4E): Program designed to help you build equity and sustainability at the highest levels of your academic course offerings. A4E is your road map to ensuring that your students, and particularly students of color and low-income students, have access to and success in your most academically intense high school programs. We partner with high schools to find students missing from the most rigorous classes and change their life trajectories. We identify, enroll and support missing students in challenging college-preparatory courses. We boost their academic motivation and achievement, and their likelihood of going to and graduating from college.

efile GRAPHIC print - DO NOT PROC			ESS	As Filed Data -			DLN: 9	3493070016812	
SCI	HED	ULE A	Dubl	ic C	harity Statu	e and Dul	olic Supp	ort	OMB No. 1545-0047
	m 99		Complete if t	he or	ganization is a sect 4947(a)(1) nonexe ▶ Attach to Form 9	ion 501(c)(3) e empt charitable 990 or Form 99	organization or trust. 10-EZ.	r a section	2020
		the Treasury	► Go to <u>ww</u>	w.irs.	<i>gov/Form990</i> for i	nstructions and	I the latest info	ormation.	Open to Public Inspection
Nam	e of th	ne organiza unity Schools	tion					Employer identific	ation number
		<i>,</i>						37-1609659	
Pa			for Public Charity S a private foundation be					See instructions.	
1	rgariiz		onvention of churches,		•	•		(A)(i)	
2		·	scribed in section 17 0						
3			or a cooperative hospita			,			
4		·	esearch organization o		-			•	nter the bosnital's
•	Ш	name, city,		Jei ate	a in conjunction with	a nospital descri	bed in Section .	170(D)(1)(A)(III). E	inter the hospitars
5			ition operated for the b (iv). (Complete Part II.		of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170
6			tate, or local governme		_				
7	✓		ition that normally rece 0(b)(1)(A)(vi). (Com			s support from a	governmental u	init or from the gener	al public described in
8			ty trust described in se		•	(Complete Part I	I.)		
9			ıral research organizati ant college of agricultu						ege or university or a
10		from activit investment	ition that normally receives related to its exemplification income and unrelated see section 509(a)(2)	ot func busine	ctions—subject to cer ess taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	ipport from gross
11		An organiza	tion organized and ope	erated	exclusively to test fo	r public safety. S	ee section 509	(a)(4).	
12		more public	ition organized and ope ly supported organizat through 12d that desc	ions de	escribed in section 5	09(a)(1) or se	ction 509(a)(2). See section 509(a	
a		organizatio	upporting organization n(s) the power to regul Part IV, Sections A a	arly ap					
b		manageme	supporting organization of the supporting organization or	ganizat	tion vested in the sar			• • • • • • • • • • • • • • • • • • • •	_
С		Type III f	unctionally integrate organization(s) (see ins	d. A su	upporting organizatio				ted with, its
d		Type III n	on-functionally integ integrated. The organi). You must complete	rated ization	. A supporting organi generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar	
e		Check this	oox if the organization or Type III non-function	receive	ed a written determir	nation from the I		pe I, Type II, Type II	I functionally
f	Enter		of supported organizat			-		<u> </u>	
g	Provi	de the follow	ing information about t	he sup	pported organization(
	(i) Name of supported organization			N	(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
Tota			tion Act Notice, see t			Cat. No. 11285		 Schedule A (Form 9	000 ==\

Р	Support Schedule for						
	(Complete only if you c						er Part II. If
	the organization fails to	quality under	the tests listed	pelow, please co	omplete Part II.)	
Se	ection A. Public Support						1
	Calendar year	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	(or fiscal year beginning in) ► Gifts, grants, contributions, and						
-	membership fees received. (Do not						
	include any "unusual grants.") .						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are						
•	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
5	to or expended on its behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year.						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6.)						
	ection B. Total Support		1	1	Γ	Π	1
	Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on	I					
	securities loans, rents, royalties and	I					
	income from similar sources.						
b	Unrelated business taxable income	I					
	(less section 511 taxes) from businesses acquired after June 30,	I					
	1975.	I					
C	Add lines 10a and 10b.						
11	Net income from unrelated business						
	activities not included in line 10b,	I					
	whether or not the business is	I					
12	regularly carried on.		-				1
12	Other income. Do not include gain or loss from the sale of capital assets	1					
	(Explain in Part VI.)	1					
13							
	11, and 12.).		<u> </u>	1.6 11 6601 1		F04()(2)	<u> </u>
14	First 5 years. If the Form 990 is for the	-			•	. , , ,	· —
	check this box and stop here					<u></u>	<u> ▶ ⊔ </u>
	ection C. Computation of Public S			(6)			
15	Public support percentage for 2020 (lin					15	
16	Public support percentage from 2019 S					16	
	ection D. Computation of Investi				.,		
17	Investment income percentage for 202	•	.,	•	• •	17	
18	Investment income percentage from 2	019 Schedule A,	Part III, line 17 .			18	
19a	331/3% support tests—2020. If the	organization did r	not check the box	on line 14, and lin	ne 15 is more thar	33 1/3%, and lin	e 17 is not
	more than 33 1/3%, check this box and s	stop here. The o	rganization qualifi	es as a publicly su	ipported organiza	tion	. ▶□
	33 1/3% support tests—2019. If the						
	not more than 33 1/3%, check this box	and stop here.	The organization	qualifies as a publ	icly supported org	anization	. ▶ □
20	Private foundation. If the organization	on did not check a	a box on line 14, 1	l9a, or 19b, check	this box and see	instructions	▶ 🗆

Page 4

5a

5b

5c

6

7

8

9a

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020

amendment to the organizing document).

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

the organization had excess business holdings).

organization had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

provide detail in Part VI.

answer line 10b below.

6

7

8

10a

box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 12d, of Part I, complete Sections A and D, and complete Part V.) Section A. All Supporting Organizations Vec No

				'''	
L	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1			
,	Did the organization have any supported organization that does not have an IRS determination of status under section 509	_	-		
2	(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described				
	in section 509(a)(1) or (2).	2			
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.				
	ow.				
b	Did the organization confirm that each supported organization qualified under section $501(c)(4)$, (5) , or (6) and satisfied the public support tests under section $509(a)(2)$? If "Yes," describe in Part VI when and how the organization made the				
	determination.				
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?				
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use.				
ŧa	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you				
	checked box 12a or 12b in Part I, answer lines 4b and 4c below.				
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported				

acternment.	3b					
Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?						
If tes, explain in Part VI what controls the organization put in place to ensure such use.	3с					
Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you						
checked box 12a or 12b in Part 1, answer lines 4b and 4c below.						
Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported						
organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.						
Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support						
					If "Yes," explain in Part VI what controls the organization put in place to ensure such use. Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below. Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below. Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support

	To War II and a finite Book 1/7 what are trade the appropriation must be also be a properly used.				
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с			
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you				
	checked box 12a or 12b in Part I, answer lines 4b and 4c below.				
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported				
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.				
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support				
	to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c			

	If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с				
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you					
	checked box 12a or 12b in Part I, answer lines 4b and 4c below.					
b	the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported					
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.					
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support					
	to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c				
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? 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

Substitutions only. Was the substitution the result of an event beyond the organization's control?

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

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

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

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

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

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

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

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

	Supporting Outpointing (actions)					
ŀē	Supporting Organizations (continued)		l			
			Yes	No		
11	, , , , , , , , , , , , , , , , , , , ,					
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, governing body of a supported organization?					
		11a				
	A family member of a person described in 11a above?	11b				
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in P VI.	Part 11c				
S	Section B. Type I Supporting Organizations					
			Yes	No		
1	Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in 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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if a applied to such powers during the tax year.	ny,				
_		. 1				
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	:				
	organization.	2				
	Section C. Type II Supporting Organizations					
_	action of Type 12 supporting organizations		Yes	No		
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustee	es of				
	each of the organization's supported organization(s)? 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).	1				
S	Section D. All Type III Supporting Organizations					
			Yes	No		
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organizatio tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of 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?					
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).					
3	By reason of the relationship described in line 2 above, did the organization's supported organizations have a significan	. 2				
3	By reason of the relationship described in 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? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.					
S	Section E. Type III Functionally-Integrated Supporting Organizations					
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see inst	ructions):				
	a The organization satisfied the Activities Test. Complete line 2 below.					
	b The organization is the parent of each of its supported organizations. Complete line 3 below.					
	The organization supported a governmental entity. Describe in Part VI how you supported a government entity	(see instru	ctions)			
2	Activities Test. Answer lines 2a and 2b below.		Yes	No		
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those support 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.	ed 2a				
	b Did the activities described in line 2a constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization involvement.					
3	Parent of Supported Organizations. Answer lines 3a and 3b below.	25				
	 a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each the supported organizations? If "Yes" or "No" provide details in Part VI. 	h of 3a				
	 b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard. 	21-				

	Recoveries of prior-year distributions			
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 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		

tax year or assets held for part of year):	1		
Average monthly value of securities	1a		
Average monthly cash balances	1b		
Fair market value of other non-exempt-use assets	1c		
Total (add lines 1a, 1b, and 1c)	1d		
Discount claimed for blockage or other factors (explain in detail in Part VI):			
Acquisition indebtedness applicable to non-exempt use assets	2		
Subtract line 2 from line 1d	3		
Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
Multiply line 5 by 0.035	6		
Recoveries of prior-year distributions	7		
Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
Adjusted net income for prior year (from Section A, line 8, Column A)	1		
Enter 85% of line 1	2		
Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
Enter greater of line 2 or line 3	4		
	tax year or assets held for part of year): Average monthly value of securities Average monthly cash balances Fair market value of other non-exempt-use assets Total (add lines 1a, 1b, and 1c) Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt use assets Subtract line 2 from line 1d Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 0.035 Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A)	tax year or assets held for part of year): Average monthly value of securities Average monthly cash balances Fair market value of other non-exempt-use assets Total (add lines 1a, 1b, and 1c) Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt use assets Subtract line 2 from line 1d Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 0.035 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, Column A) I Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 I and Average monthly value of securities 1b Average monthly value of securities 1c 1c 1d 1d 1d 1d 1d 1d 1d 1d	tax year or assets held for part of year): Average monthly value of securities Average monthly cash balances Fair market value of other non-exempt-use assets Total (add lines 1a, 1b, and 1c) Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt use assets 2 Subtract line 2 from line 1d Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 0.035 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 1 1 1 1 1 1 1 1 1 1 1 1

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions) Schedule A (Form 990 or 990-F7) 2020

5

5

Income tax imposed in prior 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	Total annual distributions. Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions	8	
9	Distributable amount for 2020 from Section C, line 6	9	

7 Total annual distributions. Add lines 1 through 6.	7				
8 Distributions to attentive supported organizations to who details in Part VI). See instructions	8				
9 Distributable amount for 2020 from Section C, line 6	9 Distributable amount for 2020 from Section C, line 6				
10 Line 8 amount divided by Line 9 amount	10				
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020		(iii) Distributable Amount for 2020	
1 Distributable amount for 2020 from Section C, line 6					
2 Underdistributions if any for years prior to 2020					

8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions					
9 Distributable amount for 2020 fr	9 Distributable amount for 2020 from Section C, line 6				
10 Line 8 amount divided by Line 9 amount					
Section E - Distribution (see instruction		(i) Excess Distributions	(ii) Underdistributio Pre-2020	ons	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from	om Section C, line 6				
2 Underdistributions, if any, for yea (reasonable cause required <i>exp</i> See instructions.					
3 Excess distributions carryover, if	any, to 2020:				
a From 2015			·		
b From 2016					

(see instructions)	Excess Distributions	Underdistributions Pre-2020	Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2020:			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see			

See instructions.		
3 Excess distributions carryover, if any, to 2020:		
a From 2015		
b From 2016		
c From 2017		
d From 2018		
e From 2019		
f Total of lines 3a through e		
g Applied to underdistributions of prior years		
h Applied to 2020 distributable amount		
 Carryover from 2015 not applied (see instructions) 		
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4 Distributions for 2020 from Section D, line 7:		
\$		
Applied to underdistributions of prior years		
b Applied to 2020 distributable amount		

f Total of lines 3a through e		
g Applied to underdistributions of prior years		
h Applied to 2020 distributable amount		
 Carryover from 2015 not applied (see instructions) 		
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4 Distributions for 2020 from Section D, line 7:		
\$		
 a Applied to underdistributions of prior years 		
b Applied to 2020 distributable amount		
c Remainder. Subtract lines 4a and 4b from line 4.		
5 Remaining underdistributions for years prior to		

Schedule A (Form 990 or 990-EZ) (2020)

2020, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.

6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2021. Add lines

See instructions.

d Excess from 2019.

a Excess from 2016. **b** Excess from 2017. c Excess from 2018.

e Excess from 2020.

3j and 4c. 8 Breakdown of line 7:

Schedule A (Form 990 or 990-EZ) 2020 Page 8
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).
	Facts And Circumstances Test

SCHEDULE D

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.

► Attack to Form 990.

OMB No. 1545-0047

DLN: 93493070016812

Open to Public

Department of the Treasury Internal Revenue Service

(Form 990)

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

Inspection

	me of the organization			Emp	loyer ident	tification	number
Equ	al Opportunity Schools	37-1609659					
Pa	Organizations Maintaining Donor Advi Complete if the organization answered "Ye			or Acc	ounts.		
	complete if the organization answered Te	(a) Donor ad			(b) Funds a	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 adviso organization's property, subject to the organization's ex				unds are the		Yes 🗌 No
6	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?	or donor advisor, or fo	r any other purpose				Yes 🗌 No
Pa	rt II Conservation Easements. Complete if the organization answered "Ye	s" on Form 990. Par	t IV. line 7.				
1	Purpose(s) of conservation easements held by the organ						
	Preservation of land for public use (e.g., recreation	` —	Preservation of ar	n histori	ically import	ant land a	irea
	Protection of natural habitat	П	Preservation of a		, ,		
	Preservation of open space	_	Treservation of a	certifie	a 1115corre 5cr	ucture	
_				6 .			
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year.	qualified conservation o	contribution in the fo	rm or a			f the Year
а	Total number of conservation easements			2a			
b	Total acreage restricted by conservation easements . $% \left({{{\bf{r}}_{{\bf{r}}}}} \right)$.			2b			
c	Number of conservation easements on a certified histori	c structure included in	(a)	2c			
d	Number of conservation easements included in (c) acquistructure listed in the National Register	red after 7/25/06, and	not on a historic	2d			
3	Number of conservation easements modified, transferre tax year ▶	d, released, extinguish	ed, or terminated by	the org	ganization di	uring the	
4	Number of states where property subject to conservation	n easement is located t	-		_		
5	Does the organization have a written policy regarding the and enforcement of the conservation easements it holds			of viola		Yes	□ No
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violati	ions, and enforcing c	onserva	ation easem	ents durin	g the year
7	Amount of expenses incurred in monitoring, inspecting, ▶ \$	handling of violations,	and enforcing conser	vation	easements (during the	year
8	Does each conservation easement reported on line 2(d) and section 170(h)(4)(B)(ii)?			.70(h)(Yes	□ No
9	In Part XIII, describe how the organization reports cons balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemen	footnote to the organiz			tement, and	d	L NO
Pai	Organizations Maintaining Collections Complete if the organization answered "Ye			ner Sir	nilar Asse	ets.	
1a	If the organization elected, as permitted under FASB AS historical treasures, or other similar assets held for pub Part XIII, the text of the footnote to its financial statem	lic exhibition, education	, or research in furth				
b	If the organization elected, as permitted under FASB AS historical treasures, or other similar assets held for pub 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, historic following amounts required to be reported under FASB /	cal treasures, or other s	similar assets for fina			the	
а	Revenue included on Form 990, Part VIII, line 1				. 🕨 \$		
b	Assets included in Form 990, Part X				. ▶ \$		
For	Paperwork Reduction Act Notice, see the Instruction					ule D (Fo	rm 990) 2020

Part 3 a		Organizations Maintaining Col	•									
а		the organization's acquisition, accession (check all that apply):	n, and other records,	check	any of	the fo	ollowing t	hat are a	significant u	se of its colle	ction	
		Public exhibition		d		Loar	or excha	ange prog	ırams			
b		Scholarly research		е		Othe	er					
С		Preservation for future generations										
4	Provid Part X	e a description of the organization's col	lections and explain	how the	ey furtl	her th	e organiz	zation's ex	kempt purpos	se in		
5	During	g the year, did the organization solicit o to be sold to raise funds rather than to	r receive donations of the maintained as pa	of art, h art of th	istorica ne orga	al trea mizati	sures or ion's colle	other sim	nilar	☐ Yes	□ N	
Part	t IV	Escrow and Custodial Arrange Complete if the organization answ X, line 21.	ments.									
1a		organization an agent, trustee, custodi ed on Form 990, Part X?								Yes	□ N	o
b	If "Ye	s," explain the arrangement in Part XIII	and complete the fo	llowing	table:				Ar	nount		_
c		ning balance	·	_				1c				_
d	_	ons during the year						1d				_
e		outions during the year						1e				_
f		g balance						1f				_
	-										_	_
2a		e organization include an amount on Fo								_	∐ N	0
		s," explain the arrangement in Part XIII	. Check here if the e	xplanat	ion has	beer	n provide	d in Part	XIII	Ц		
Par	rt V	Endowment Funds.		000	Dt	T) (: 10					
		Complete if the organization ansv	vered "Yes" on For (a) Current year		rior yea			ears hack	(d) Three yea	rs hack (e) F	our vea	rs hack
1a E	Beainni	ng of year balance	(a) carreit year	(5)	nor yea		(6) 1110)	curs buck	(a) Times yea	IS BUCK (C)	our yeu	3 Buck
	-	utions				+						
		estment earnings, gains, and losses				_						
		or scholarships				\dashv						
		xpenditures for facilities				_						
ā	and pro	grams										
		strative expenses										
g E	End of	year balance										
2	Provid	e the estimated percentage of the curre	ent year end balance	(line 1	g, colu	mn (a	a)) held a	s:				
а	Board	designated or quasi-endowment ▶										
b	Perma	nent endowment ►										
c	Term	endowment ▶										
	The pe	ercentages on lines 2a, 2b, and 2c shou	ld equal 100%.									
3a		ere endowment funds not in the posses	sion of the organizat	ion tha	t are h	eld ar	nd admini	istered fo	r the	r	1	
	-	zation by:								2-(:)	Yes	No
		related organizations		•	•	٠.	• •			3a(i) 3a(ii)		
b		elated organizations	s listed as required (on Sche	 dule R	? .				3b		
4		be in Part XIII the intended uses of the	•			•						
	t VI	Land, Buildings, and Equipmen										
		Complete if the organization ansv		m 990	, Part	IV, ا	ine 11a.	. See Fo	m 990, Par	t X, line 10		
	Descrip	otion of property (a) Cost or oth		or other	basis (other)	(c) Acc	umulated o	lepreciation	(d) Bo	ok valu	9
1 a L	_and .											
b E	Building	ys										
	_	old improvements			24	45,322	:		48,674			196,648
		ent				, 30,086			4,387			25,699
	-quipiii Other					56,527			98,697			67,830
_		ines 1a through 1e. (Column (d) must e	l equal Form 990. Part	X, colu					>			290,177

(including name of security) Book Cock or end-of-year market value value Increase the security interests Increase the security interests and security interests	ait VII	Complete if the organization answered "Yes" on Form 990, (a) Description of security or category	(b)	(c) Metho	d of valuation:
(Source (a) must equal from \$90, Per X, set (6) are 12.3 **Total Investments—Program Related.** Complete if the organization answered "Yes" on Form \$90, Per IV, line 11c. See Form \$90, Per X, line 13. **Total Other Assets.** Complete if the organization answered "Yes" on Form \$90, Fer IV, line 11d. See Form \$90, Per X, line 13. **Total Other Assets.** Complete if the organization answered "Yes" on Form \$90, Fer IV, line 11d. See Form \$90, Per X, line 18. **Total Other Assets.** Complete if the organization answered "Yes" on Form \$90, Fer IV, line 11d. See Form \$90, Per X, line 18. **Total Other Assets.** Complete if the organization answered "Yes" on Form \$90, Fer IV, line 11d. See Form \$90, Per X, line 18. **Total Other Liabilities.** Complete if the organization answered "Yes" on Form \$90, Per IV, line 11e or 11f. See Form \$90, Per X, line 25. **Total Other Liabilities.** Complete if the organization answered "Yes" on Form \$90, Per IV, line 11e or 11f. See Form \$90, Per X, line 25. **Total Other Liabilities.** Complete if the organization answered "Yes" on Form \$90, Per IV, line 11e or 11f. See Form \$90, Per X, line 25. **Total Other Liabilities.** Complete if the organization answered "Yes" on Form \$90, Per IV, line 11e or 11f. See Form \$90, Per X, line 25. **Total Other Liabilities.** Complete if the organization answered "Yes" on Form \$90, Per IV, line 11e or 11f. See Form \$90, Per X, line 25. **Total Other Liabilities.** Complete if the organization answered "Yes" on Form \$90, Per IV, line 11e or 11f. See Form \$90, Per X, line 25. **Total Other Liabilities.** Complete if the organization answered "Yes" on Form \$90, Per IV, line 11e or 11f. See Form \$90, Per IV, line 12e or 11f. See Form \$90, Per IV, line 12e or 11f. See Form \$90, Per IV, line 12e or 11f. See Form \$90, Per IV, line 12e or 11f. See Form \$90, Per IV, line 12e or 11f. See Form \$90, Per IV, line 12e or 11f. See Form \$90, Per IV, line 12e or 11f. See Form \$90, Per IV, line 12e or 11f. See Form \$90, Per IV, line 12e or 11f. See Form		(including name of security)	Book	Cost or end-of	-year market value
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(Column (b) must equal Form 990, Part X, col.(B) line 25.) ▶ 155,188 billity for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization.					155,188
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bility for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization)				
bility for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization					

2d

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

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)

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

Amounts included on line 1 but not on Form 990, Part VIII, line 12:

Other (Describe in Part XIII.)

Add lines 2a through 2d . .

Page 4

12,477,437

608.845

11,869,783

Schedule D (Form 990) 2020

1

2e

Schedule D (Form 990) 2020

1

2

d

e

5

3 11,868,592 3 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . 4a b 4b 1.191 Add lines **4a** and **4b** 1,191 C 4c

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. Total expenses and losses per audited financial statements . . . 1 11.263.508 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:

Donated services and use of facilities . 2a 2b Prior year adjustments 2c c Other (Describe in Part XIII.) . 2d d

Add lines 2a through 2d . 2e e 3 Subtract line 2e from line 1 . 3 11,263,508 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: 4a

Investment expenses not included on Form 990, Part VIII, line 7b . . . 1.191 4b b Add lines **4a** and **4b** 4c 1,191 C

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 11.264.699

5 **Supplemental Information**

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

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

Return Reference Explanation See Additional Data Table

chedule D (Form 990) 2020	Page 5
Part XIII Supplemental Inform	nation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2020

Additional Data

Software Version: 2020v4.0 **EIN:** 37-1609659 Name: Equal Opportunity Schools

Software ID: 20011551

Supplemental Information

Return Reference

amounts included on 990 but not

included in F/S

Part XI, Line 4b: Other revenue

Investment fees \$1191

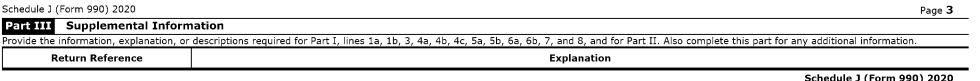
Explanation

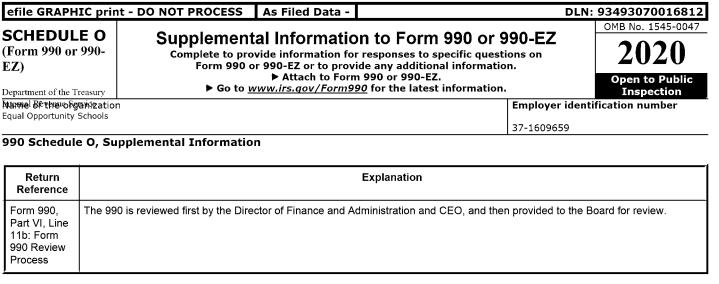
upplemental Information					
Return Reference	Explanation				
Part XII, Line 4b: Other revenue amounts included on 990 but not included in F/S					

efil	le GRAPHIC pr	rint - DO NOT PROCESS As Fil	ed Dat	a -	DLN: 9	349307	70016	812
Schedule J (Form 990)		Compe	nsat	ion Information		OMB No.	1545-0	3047
		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 for instructions and the latest information.				2020 Open to Public		
	al Revenue Service						ectio	
	me of the organiza al Opportunity School				Employer identific	ation nu	ımber	
	, ,				37-1609659			
Pa	rt I Questi	ons Regarding Compensation						
1 a	Check the appro	opiate box(es) if the organization provide ection A, line 1a. Complete Part III to pr	d any o ovide ar	f the following to or for a person liste y relevant information regarding thes	d on Form se items.		Yes	No
	☐ First-class	s or charter travel		Housing allowance or residence for	personal use			İ
	Travel for	companions		Payments for business use of person	nal residence			
	Tax idemi	nification and gross-up payments		Health or social club dues or initiation	on fees			
	☐ Discretion	nary spending account		Personal services (e.g., maid, chauf	feur, chef)			İ
b		xes on Line 1a are checked, did the orga or provision of all of the expenses descri				1b		
2		ation require substantiation prior to reim				2		
	directors, truste	ees, officers, including the CEO/Executive	Directo	r, regarding the items checked on Lir	ne 1a? . .			
3	organization's C	if any, of the following the filing organiza EO/Executive Director. Check all that ap ed organization to establish compensation	ply. Do	not check any boxes for methods				
	☐ Compens	ation committee	✓	Written employment contract				
		ent compensation consultant		Compensation survey or study				
	Form 990	of other organizations	✓	Approval by the board or compensa	tion committee			İ
4	During the year related organiza	, did any person listed on Form 990, Par ation:	t VII, Se	ction A, line 1a, with respect to the fi	ling organization or a	a		
а	Receive a sever	ance payment or change-of-control payr	nent? .			4a		No
b	Participate in, o	r receive payment from, a supplemental	nonqua	ified retirement plan?		4b		No
С		r receive payment from, an equity-based of lines 4a-c, list the persons and provide				4c		No
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organi	zations	must complete lines 5-9.				
5	For persons liste	ed on Form 990, Part VII, Section A, line ontingent on the revenues of:		-				
а	The organization	n?				5a		No
b	Any related orga	anization?				5b		No
	If "Yes," on line	5a or 5b, describe in Part III.						
6		ed on Form 990, Part VII, Section A, line ontingent on the net earnings of:	1a, did	the organization pay or accrue any				
а	The organization	n?				6a		No
b	,	anization?				6b		No
	If "Yes," on line	6a or 6b, describe in Part III.						
7		ed on Form 990, Part VII, Section A, line escribed in lines 5 and 6? If "Yes," descr				7		No
8	subject to the ir	nts reported on Form 990, Part VII, paid nitial contract exception described in Reg 	ulations	section 53.4958-4(a)(3)? If "Yes," de		8		No
9		8, did the organization also follow the re				9		140
For I	Panerwork Redu	ction Act Notice, see the Instruction	s for Fo	orm 990. Cat. No. 5	0053T Schedule	J (Form	1 990)	2020

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

(A) Name and Titl	e	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	column (B) reported as deferred on prior Form 990
1 Byron Garrett CEO	(i)	271,597			8,148	5,657	285,402	
	(ii)							
2 Eddie Lincoln Interim CEO	(i)	174,447			5,233	5,657	185,337	
	(ii)							
3 Evelyn Taylor COO	(i)	167,107			5,013	5,657	177,777	
	(ii)							
4 Kia Franklin CPO	(i)	160,360			4,811	5,657	170,828	
	(ii)							
5 Sasha Rabkin CSO	(i)	201,008			6,030	5,657	212,695	
	(ii)							





990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 12c: Explanation of Monitoring and Enforcement of Conflicts	Board members are required to complete an annual conflict of interest statement and to dis close during the year any transactions that fall within the scope of the policy. They are reviewed by the special assistant to the CEO each year.

Return Reference Explanation

Form 990, Part VII Line

990 Schedule O, Supplemental Information

Part VI, Line
19: Other
Organization
Documents
Publicly
Available