### **Return of Organization Exempt From Income Tax**

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

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

Open to Public

	For the	2021 calendar v	ear, or tax year begin	nina		, 2021, a	nd endi	na		, 20			
		applicable:	C Name of organizationBR			D Emp	loyer identifica		nber				
	Address of	• •	Doing business as							20-169			
二	Name cha	•		O. box if mail is not delivere	ed to street address)		Room/sui	Room/suite E Telephor			,,,,,		
二	Initial retu	•	1633 CEDAR LAK		T COM Su	ito	- 1010	(612)3	81_1	990			
二		rn/terminated		vince, country, and ZIP or fo	oroign postal codo				G Gros	ss receipts	<u> </u>		
二	Amended				oreign postar code				\$	ss receipts	7	0 252	
二			MINNEAPOLIS, M		MA CIMIDDO			11/2) 1: 11::-		I P		0,353 s X No	
Ш	Applicatio	n pending	F Name and address of pri		MACMURDO								
_	T	npt status: X 501	Same as C abov		40.47(-)(4) - ::	507		1 ` `	e all subordinates included?				
				) (insert no.)	4947(a)(1) or	527		1			ons		
	Website:		ridges2learning					H(c) Group					
		rganization: X Corp	poration Trust Ass	ociation		L Year of formation	on: 200	)4 M	State of le	gal domicile:	MN		
Г	rt I	Summary	(h	·									
	1	-	the organization's miss	_		dges to L				_			
Φ			or the educati									in	
anc			countries. We	are currentl	y focusing o	n schools	and	educati	onal	programs	in		
ern		Vietnam.							_				
Governance	2		if the organization						1	Ì			
	3	•	g members of the gove	5 , ,	,							10	
Activities &	4		endent voting member									10	
VİĘ	5		individuals employed in	-								1_	
Λcti	6		volunteers (estimate if	• ,					. 6			25	
			ousiness revenue from	, , ,	•				. 7a			0	
	b	Net unrelated bu	usiness taxable income	from Form 990-T, Pa	art I, line 11				. 7b			0	
			Prior Year		Curr	ent Year	r						
	8	Contributions and	d grants (Part VIII, line	52	2,446		6	0,834					
	9	Program service	service revenue (Part VIII, line 2g)										
Revenue	10	Investment incom	ne (Part VIII, column (A		2			2					
Re	11	Other revenue (F	Part VIII, column (A), lin	nes 5, 6d, 8c, 9c, 10c,	and 11e)				2,161			9,517	
	12	Total revenue - a	54	54,609 70			0,353						
	13	Grants and simila	ar amounts paid (Part I	X, column (A), lines	1-3)			57	7,240		3	5,326	
	14	Benefits paid to	or for members (Part I)					0					
	15	Salaries, other co	ompensation, employee	benefits (Part IX, co	olumn (A), lines 5-10	))		13	13,707 11,477			1,477	
Expenses	16a	Professional fund	draising fees (Part IX,	column (A), line 11e)								0	
ē	b	Total fundraising	al fundraising expenses (Part IX, column (D), line 25)  9,433										
Ä	17	Other expenses	(Part IX, column (A), lir	-	7,194		1	3,021					
	18	Total expenses.	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)									9,824	
	19	Revenue less ex		3,141 3,532	)		0,529						
-	SS						Begii	nning of Curr			of Year		
ets o	20	Total assets (Pa	rt X, line 16)					52	2,588		6	2,720	
t Assets or	21	Total liabilities (F	Part X, line 26)					1	L,239			842	
Net.	22	Net assets or fur	nd balances. Subtract	line 21 from line 20					L,349		6	1,878	
Pa	rt II	Signature	Block				'						
		es of perjury, I declare	that I have examined this retu				of my know	wledge and be	lief, it is				
true	, correct, a	and complete. Declarat	ion of preparer (other than off	icer) is based on all informa	ition of which preparer ha	s any knowledge.							
		ROBERT	MACMURDO										
Sig	ın	Signature of officer							Da	ate			
He	re	ROBERT MACMURDO, TREASURER											
		Type or print name and title											
		Print/Type prepare	r's name	Preparer's signature		Date		Check	☐ if	PTIN			
Pai	d							self-em					
	parer	Firm's name		1			F	irm's EIN ▶	, .,	1			
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Max	the ID	2 discuss this rotu	ım with the nrenarer sh	own above? See inc	tructions						Voc	□ No	

· ui	Charlett Or Frogram Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
l	Briefly describe the organization's mission:
	Bridges to Learning's mission is to provide resources for the education, well-being, and social
	development of impoverished children in developing countries. We are currently focusing on
	schools and educational programs in Vietnam.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
1	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code: ) (Expenses \$ 36,196 including grants of \$ ) (Revenue \$ )
	Our primary program focuses on providing for the student's education and welfare. We transfer
	donations from private citizens to support indigent children in Vietnam to attend the Anh Linh
	Free School in district 7, Ho Chi Minh City. Their sponsorship includes education, uniforms, eye
	exams, haircuts, lunch, and school materials.
	onamb, narroad, randi, and benedi maddrarb.
	<del></del>
4b	(Code:) (Expenses \$
4b	(Code:) (Expenses \$7,500 including grants of \$) (Revenue \$)  Bridges to Learning (B2L) established the Breakfast fund as a means to provide the elementary
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<del>1</del> b	Bridges to Learning (B2L) established the Breakfast fund as a means to provide the elementary
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4d 4e	Bridges to Learning (B2L) established the Breakfast fund as a means to provide the elementary school children a nutritious breakfast each morning. Many children come from families too poor to provide more than one meal a day and hungry children do not learn very well.  (Code:) (Expenses \$

20-1698868

#### Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
_	complete Schedule A	1	Х	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	2		х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		v
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	3		Х
•	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	-		
	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	_		
_	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		v
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	9		Х
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
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		х
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
	the organization's separate of consolidated infancial statements for the tax year include a roomote that addresses  the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," <i>complete</i>			Α
	Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	46		
17	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
-	If "Yes," complete Schedule G, Part III	19		x
20 a	The state of the s	20a		x
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x

Form 990 (2021) BRIDGES TO LEARNING INC 20-1698868 Page 4 Checklist of Required Schedules (continued) Part IV

			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		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		x
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		х
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		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		х
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		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
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		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
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		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
_	19? Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
4 -	Enter the number reported in Day 2 of Form 1000 Fatar 0. If not applicable		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	4.		
	reportable gaming (gambling) winnings to prize winners?	1c	X	

Page 5

Par	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on 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		х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		Х
d	3, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	7e		37
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	76 7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			Λ
•	sponsoring organization have excess business holdings at any time during the year?	8		х
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		х
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		х
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	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.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
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		
	Note: See the instructions for additional information the organization must report on Schedule O.			
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	_		
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b 15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule Q	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	45		7.
	excess parachute payment(s) during the year?	15		Х
16	If "Yes," see instructions and file Form 4720, Schedule N.  Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		v
10	If "Yes," complete Form 4720, Schedule O.	10		X
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
••	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
	Check if Schedule O contains a response or note to any line in this Part VI
Section A.	Governing Body and Management

			Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year						
	If there are material differences in voting rights among members of the governing body, or						
	if the governing body delegated broad authority to an executive committee or similar						
	committee, explain on Schedule O.						
b	Enter the number of voting members included in line 1a, above, who are independent						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with						
	any other officer, director, trustee, or key employee?						
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		х			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		х			
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		х			
6	Did the organization have members or stockholders?	6		х			
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		х			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,						
	stockholders, or persons other than the governing body?	7b		х			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during						
	the year by the following:						
а	The governing body?	8a	х				
b	Each committee with authority to act on behalf of the governing body?	8b	х				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at						
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule Q	9		x			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)						
			Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?	10a		х			
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	х				
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	х				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"						
	describe in Schedule O how this was done	12c	х				
13	Did the organization have a written whistleblower policy?	13	х				
14	Did the organization have a written document retention and destruction policy?	14	х				
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	х				
b	Other officers or key employees of the organization	15b	х				
	If "Yes" to line 15a or 15b, describe the process on 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		х			
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					
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ► Minnesota						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)		-	-			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.						
	☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain on Schedule O)						
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,						
	and financial statements available to the public during the tax year.						
20	State the name, address, and telephone number of the person who possesses the organization's books and records						
	ROBERT MACMURDO (612)381-1990, 1633 CEDAR LAKE PARKWAY, MINNEAPOLIS, MN 55416						

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

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

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

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

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

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

(A) Name and title	(B)  Average hours per week (list any hours for related organizations below dotted line)	box, unles		Position heck more than one less person is both an and a director/trustee)  Key employee  Officer  Officer  Trustee		(D)  Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E)  Reportable compensation from related organizations W-2/ 1099-MISC/ 1099-NEC	(F) Estimated amount of other compensation from the organization and related organizations	
(1) ROBERT MACMURDO	12.00			x			0	0	0
(2) JERILYN HIRSCH	12.00								
FOUNDER (3)				х			0	0	0
(3)									
<u>(4)</u>									
<u>(5)</u>									
<u>(6)</u>									
<u>(7)</u>									
<u>(8)</u>									
<u>(9)</u>									
<u>(10)</u>									
<u>(11)</u>									
<u>(12)</u>									
<u>(13)</u>									
<u>(14)</u>									
	1						I	1	=()

Part	VII Section A. Officers, Directors, Trustee			,		(C)			, ,				
	(A) Name and title		(B)  Average box, unless person is both a officer and a director/trustee per week (list only)						(D)  Reportable compensation from the organization (W-2/	(E)  Reportable compensation from related organizations (W-2/	(F) Estimated amo of other compensatio from the		r
			Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		1099-MISC/ 1099-NEC)		nization d organiz	
<u>(15)</u>													
<u>(16)</u>													
<u>(17)</u>													
<u>(18)</u>													
<u>(19)</u>													
(20)													
(21)													
(22)													
(23)_													
(24)													
(25)													
1b c d	Subtotal	ion A .						. •	0	0			0
2	Total number of individuals (including but not limit reportable compensation from the organization	ted to those I							ore than \$100,000	of			(
3	Did the organization list any <b>former</b> officer, direct		key en	nploy	/ee,	or h	ighest	con	mpensated			Yes	No
4	employee on line 1a? If "Yes," complete Schedu. For any individual listed on line 1a, is the sum of re										3		х
	organization and related organizations greater th	an \$150,000	)? <i>If</i> "Y	'es,"	con				le J for such		4		x
5	Did any person listed on line 1a receive or accrue for services rendered to the organization? If "Yes	compensation	on from	any	unr		_		ation or individual		5		X
	on B. Independent Contractors								4 0400.00				
1	Complete this table for your five highest compensation from the organization. Report comp												
	(A) Name and business addres	SS							(B)  Description of service	es	(C) Compens	sation	
2	Total number of independent contractors (including received more than \$100,000 of compensation from	-				ted a	above)	wh	0				

Part VIII

Statement of Revenue

		Check if Schedule O contains a respons	e or n	ote to any line in thi	s Part VIII			
		·		-	(A)	(B)	(C)	(D)
					Total revenue	Related or exempt	Unrelated	Revenue excluded
						function revenue	business revenue	from tax under sections 512–514
	1a	Federated campaigns	1a					Sections 312-314
	b	Membership dues	1b					
ts			1c					
ir oun	C .	Fundraising events						
s, G	d	Related organizations	1d					
Contributions, Gifts, Grants and Other Similar Amounts	е	Government grants (contributions)	1e					
ini ji	f	All other contributions, gifts, grants,						
ario S		and similar amounts not included above	1f	60,834				
Ę Ę	g	Noncash contributions included in						
d dt		lines 1a-1f	1g	\$				
နှင့်	h	Total. Add lines 1a-1f			60,834			
-				Business Code	,			
	2a			240000 0040				
8	b	-						
e Š								
Se	C .							
am Sev	d							
Program Service Revenue	е							
Ē	f	All other program service revenue						
	g	Total. Add lines 2a-2f						
	3	Investment income (including dividends, inte	erest, a	and				
		other similar amounts)			2	2		
	4	Income from investment of tax-exempt bond	proce	eeds▶				
	5	Royalties						
		(i) Real		(ii) Personal				
	6a	Gross rents 6a		(,				
		Less: rental expenses 6b						
	1	Rental income or (loss) 6c						
	a	Net rental income or (loss)						
	7a	Gross amount from (i) Securition	es	(ii) Other				
		sales of assets						
		other than inventory 7a						
	b	Less: cost or other basis						
ē		and sales expenses   7b						
en	С	Gain or (loss) <b>7c</b>						
è	d	Net gain or (loss)						
Other Revenue	1	Gross income from fundraising						
₹	•••	events (not including \$						
O		of contributions reported on line						
				0 515				
		1c). See Part IV, line 18	8a					
	1	Less: direct expenses	8b	1				
	1	Net income or (loss) from fundraising event	s 🗀		9,517			9,517
	9a	Gross income from gaming						
		activities, See Part IV, line 19	9a					
	b	Less: direct expenses	9b					
	С	Net income or (loss) from gaming activities		▶				
	10a	Gross sales of inventory, less						
	.00	returns and allowances	10a					
	b	Less: cost of goods sold	10b					
	1	Net income or (loss) from sales of inventory		l				
-		Tiot moone or (1000) nom saics of inventors		Business Code				
	14-			Dualiteas Code				
Miscellanous Revenue	11a							
lan sun	1							
eve	C							
Mis R		All other revenue						
		Total. Add lines 11a-11d						
	12	<b>Total revenue.</b> See instructions			70,353	2	0	9,517

20-1698868

Part IX	Statement of Functional Expenses
Section 50	1(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a response or note to	any line in this Part IX			
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations		·		· ·
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16	35,326	35,326		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	10,650	8,520	1,065	1,065
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	827	661	83	83
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17 .				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses	254	203	25	26
14	Information technology	1,430	1,144	143	143
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	652	522	65	65
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)	1 052	1 010	100	100
_	Bank Charges & CC Fees	1,273	1,019	127	127
b	Printing and Postage	117	93	12	12
C	Fundraising Expenses	7,758	1 150	145	7,758
d	Dues and Subscription	1,461	1,170	145	146
е 25	All other expenses	76	60	8	8
25 26	Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the	59,824	48,718	1,673	9,433
<b>2</b> 0	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here				

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Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	42,082	1	55,713
	2	Savings and temporary cash investments	10,506	2	7,007
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
ets	8	Inventories for sale or use		8	
Assets	9	Prepaid expenses and deferred charges		9	
,	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	52,588	16	62,720
	17	Accounts payable and accrued expenses	1,239	17	842
	18	Grants payable	_,	18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
ipili		controlled entity or family member of any of these persons		22	
Ľį	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	1,239	26	842
		Organizations that follow FASB ASC 958, check here			<u> </u>
		and complete lines 27, 28, 32, and 33.			
ces	27	Net assets without donor restrictions	39,349	27	49,878
lan	28	Net assets with donor restrictions	12,000	28	12,000
Ba		Organizations that do not follow FASB ASC 958, check here	11,000		22,000
nuq		and complete lines 29 through 33.			
F	29	Capital stock or trust principal, or current funds		29	
ts o	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
sse	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances	51,349	32	61,878
Se	33	Total liabilities and net assets/fund balances	52,588	33	62,720
			32,300	55	02,720

Form	n 990 (2021) BRIDGES TO LEARNING INC 2	0-169	9886	8	Pa	age <b>1</b>
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1			70,	353
2	Total expenses (must equal Part IX, column (A), line 25)	2			59,	824
3	Revenue less expenses. Subtract line 2 from line 1	3			10,	529
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			51,	349
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10			61,	878
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					. □
					Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on					
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a	х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b		х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of					
•	the audit, review, or compilation of its financial statements and selection of an independent accountant?			2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain on					
	Schedule O.					

required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits Form **990** (2021) EEA

3a

3b

х

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

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

#### SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

OMB No. 1545-0047

**Employer identification number** 

► Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for instructions and the latest information. **Open to Public** Inspection

BRIDGES TO LEARNING INC 20-1698868 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 🗵 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. С Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV. Sections A. D. and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see instructions) above (see instructions)) document? instructions) Yes No (A) (B) (C) (D) (E) Total

Schedule A (Form 990) 2021 BRIDGES TO LEARNING INC 20-1698868 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2017 **(b)** 2018 (c) 2019 (d) 2020 (e) 2021 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . . . The value of services or facilities furnished by a governmental unit to the organization without charge .... **Total.** Add lines 1 through 3 . . . . . The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .... Public support. Subtract line 5 from line 4. Section B. Total Support (f) Total Calendar year (or fiscal year beginning in) ▶ (a) 2017 **(b)** 2018 (c) 2019 (d) 2020 (e) 2021 Amounts from line 4 . . . . . . . . . . . 7 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...... 9 Net income from unrelated business activities, whether or not the business is regularly carried on . . . . . . . . . 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . . . . . . . . . 11 **Total support.** Add lines 7 through 10 12 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage % 14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) . . . . . . 15 Public support percentage from 2020 Schedule A, Part II, line 14 .......... 15 16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . . . . . . . . . . . . . ▶ b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check 17a 10%-facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

b 10%-facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported

EEA Schedule A (Form 990) 2021

20-1698868

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

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)▶	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.") .	80,014	96,303	89,660	54,607	69,937	390,521
2	Gross receipts from admissions, merchandise sold or services performed, or facilities fumished in any activity that is related to the organization's tax-exempt purpose	-					
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	<b>Total.</b> Add lines 1 through 5	80,014	96,303	89,660	54,607	69,937	390,521
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.)						390,521
Secti	on B. Total Support						330,322
	dar year (or fiscal year beginning in) ▶	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6	80,014	96,303	89,660	54,607	69,937	390,521
10a	Gross income from interest, dividends,	00,011	30,303	03,000	31,007	05/557	330,322
·ou	payments received on securities loans, rents,						
	royalties, and income from similar sources	4	4	4	2	1	15
b	Unrelated business taxable income (less						
b	section 511 taxes) from businesses						
	acquired after June 30, 1975						
•	Add lines 10a and 10b	4	4	4		-	
C 44		4	4	4	2	1	15
11	Net income from unrelated business						
	activities not included on line 10b, whether						
40	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	80,018	96,307	89,664	54,609	69,938	390,536
14	First 5 years. If the Form 990 is for the or	•	st, second, thi	rd, fourth, or fif	th tax year as a	a section 501(c	:)(3)
	organization, check this box and stop her						▶ 📙
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2021 (line 8		•	3, column (f))		15	100.00 %
16	Public support percentage from 2020 Sch	edule A, Part I	II, line 15 .			16	100.00 %
Secti	on D. Computation of Investment Inc	come Percer	ntage				
17	Investment income percentage for 2021 (I	ine 10c, colum	n (f), divided b	y line 13, colu	mn (f))	17	0.00 %
18	Investment income percentage from 2020	Schedule A, F	Part III, line 17			18	0.00 %
19a	33 1/3% support tests - 2021. If the orga	nization did no	t check the bo	x on line 14, ar	nd line 15 is mo	ore than 33 1/3	%, and line
	17 is not more than 33 1/3%, check this be						
b	33 1/3% support tests - 2020. If the organizati	=	-		•		
	line 18 is not more than 33 1/3%, check this bo						
20	Private foundation. If the organization die		-			-	

#### Part IV Supporting Organizations

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

Section A. A	ΑII	Supporting	<b>Organizations</b>
--------------	-----	------------	----------------------

			Yes	l V
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2).	2		_
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	lines 3b and 3c below.	3a		_
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the			
	organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
	purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked 12a or 12b in Part I, answer lines 4b and 4c below.	4a		_
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations.	4b		_
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		
C	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?	5c		ĺ

- as the substitution the result of an event beyond the organ
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
  - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

6 7 8 9a 9b 9c 10a

10b

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Part I	Supporting Organizations (continued)			1
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a	_	
b	A family member of a person described in line 11a above?	11b	)	
С	A 35% controlled entity of a person described in 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in <b>Part VI.</b>	11c		
Section	on B. Type I Supporting Organizations			1
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers	,		
	directors, or trustees at all times during the tax year? 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 support	ted		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	э		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Pa	rt		
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the director	s		
	or trustees 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	1		
	the supported organization(s).	1		
Section	on 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			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supporte	d		
	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	е		
	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.	3		
Section	on 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	r (see ins	tructio	ons).
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.			
С	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instructions	s).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	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 supported organizations and explain how these activities directly furthered their exempt purposes	3,		
	how the organization was responsive to those supported organizations, and how the organization determin	ed		
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>	= 20		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in <b>Part VI.</b>	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 <b>Part VI</b> the role played by the organization in this regard.	3b		

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(see instructions).

Part				lain in Dant M. O-
1	Check here if the organization satisfied the Integral Part Test as a qualifying			
	instructions. All other Type III non-functionally integrated supporting organ	ızatı	ons must complete Sect	
Secti	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		(Optional)
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection	-		
O				
	of gross income or for management, conservation, or maintenance of			
	property held for production of income (see instructions)	6		
	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		(=) =
Secti	on 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors			
	(explain in detail in <b>Part VI</b> ):			
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,	Ť		
•	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
- 8	Minimum Asset Amount (add line 7 to line 6)	8		
	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
	· · · · · · · · · · · · · · · · · · ·	4		
4	Enter greater of line 2 or line 3.			
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to	_		
	emergency temporary reduction (see instructions).	6		
7	☐ Check here if the current year is the organization's first as a non-functional	ully ir	ntegrated Type III suppo	rting organization

EEA Schedule A (Form 990) 2021

Schedu	le A (Form 990) 2021 BRIDGES TO LEARNING INC				3868 Page <b>7</b>
Part	V Type III Non-Functionally Integrated 509(a)(3	<ol><li>Supporting Organ</li></ol>	izations (continue	ed)	
Sect	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish e	xempt purposes		1	
2	Amounts paid to perform activity that directly furthers exer	mpt purposes of support	ed		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpo	oses of supported organ	izations	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 resp	onsive		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2021	าร	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021				
	(reasonable cause required - explain in Part VI). See				
	instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	From 2017				
С	From 2018				
d	From 2019				
е	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from				
	Section D, line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result				

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greater than zero, *explain in Part VI*. See instructions.

Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, *explain in* 

7 Excess distributions carryover to 2022. Add lines 3j

Part VI. See instructions.

B Breakdown of line 7:
a Excess from 2017
b Excess from 2018
c Excess from 2019
d Excess from 2020
e Excess from 2021

and 4c.

Schedule A (Form 990) 2021 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

### SCHEDULE C (Form 990)

#### **Political Campaign and Lobbying Activities**

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

2021

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization is described below.
 ► Attach to Form 990 or Form 990-EZ.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

Name	of organization			Employer i	dentification number
BRIDG	SES TO LEARNING INC			20-1698	
Part	I-A Complete if the	e organization is exempt und	der section 501(	c) or is a section 5	27 organization.
1	Provide a description of the o	organization's direct and indirect politica	al campaign activities	in Part IV. See instruction	ns for
	definition of "political campaigness"	•			
2		penditures. See instructions			
3	Volunteer hours for political c	ampaign activities. See instructions			•
Part	I-B Complete if the	e organization is exempt und	der section 501(	c)(3).	
1		se tax incurred by the organization und			
2		se tax incurred by organization manage			
3	-	section 4955 tax, did it file Form 4720	-		= =
4a			• • • • • • • • •		Yes No
b	If "Yes," describe in Part IV.				504( )(0)
Part		e organization is exempt und			501(c)(3).
1		pended by the filing organization for sec	·		
_					\$
2	•	organization's funds contributed to oth	-		r.
•	' '	s			<b>\$</b>
3				•	¢
4		Form 1120-POL for this year?			
5		and employer identification number (Ell			
3		. For each organization listed, enter the			
	. ,	outions received that were promptly and		0 0	
		nd or a political action committee (PAC	•		·
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0-	promptly and directly
					delivered to a separate political organization.
					If none, enter -0
(4)					
(1)					
(2)					
(2)					
(2)					
(3)					
(4)					
(+)					
(5)					
(5)					
(6)					
(U)			1	1	

	edule C (Form 990) 2021 BRIDGES TO LEAD				20-1698	
Pa	rt II-A Complete if the organization	is exempt	under section 50	)1(c)(3) and file	d Form 5768 (ele	ection under
	section 501(h)).					
Α	Check ► ☐ if the filing organization belongs to	an affiliated gro	oup (and list in Part IV	each affiliated group	member's name,	
	address, EIN, expenses, and share	of excess lobby	ying expenditures).			
В	Check ► ☐ if the filing organization checked bo	x A and "limited	d control" provisions ap	oply.		
	Limits on Lobby				(a) Filing	(b) Affiliated
	(The term "expenditures" me	ans amount	s paid or incurred.	)	organization's totals	group totals
1	a Total lobbying expenditures to influence public	opinion (grassro	oots lobbying)			
	<b>b</b> Total lobbying expenditures to influence a legisl	ative body (dire	ect lobbying)			
	C Total lobbying expenditures (add lines 1a and 1	b)				
	<b>d</b> Other exempt purpose expenditures					
	e Total exempt purpose expenditures (add lines 1	cand 1d)				
	f Lobbying nontaxable amount. Enter the amount	from the following	ing table in both			
	columns.					
	If the amount on line 1e, column (a) or (b) is:	The lobbying	g nontaxable amount	is:		
	Not over \$500,000	20% of the a	mount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plu	s 15% of the excess o	ver \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plu	s 10% of the excess o	ver \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plu	s 5% of the excess ov	er \$1,500,000.		
_	Over \$17,000,000	\$1,000,000.				
	g Grassroots nontaxable amount (enter 25% of lin	ne 1f)				
	h Subtract line 1g from line 1a. If zero or less, ent	er-0				
	i Subtract line 1f from line 1c. If zero or less, ente	r-0				
	j If there is an amount other than zero on either lin		•			_
	reporting section 4911 tax for this year?					Yes No
			Period Under Sec	• •		_
	(Some organizations that made a sect			-	of the five column	s below.
	See the	separate ins	tructions for lines	2a through 2f.)		
	1.11.1		. D			
	Lobbying	Expenditure	s During 4-Year Av	/eraging Period		
	Calendar year (or fiscal year	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) Total
	beginning in)					
						-
<b>2</b> a	Lobbying nontaxable amount					
k						
	(150% of line 2a, column (e))					
c	Total lobbying expenditures					
c	d Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					

EEA Schedule C (Form 990) 2021

f Grassroots lobbying expenditures

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 Part II-B (election under section 501(h)). (b) (a) For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity. Yes No Amount During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? C Mailings to members, legislators, or the public? Publications, or published or broadcast statements? е f Direct contact with legislators, their staffs, government officials, or a legislative body? g Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? ...... 2a **b** If "Yes," enter the amount of any tax incurred under section 4912 ........... c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 **d** If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No 1 1 Did the organization make only in-house lobbying expenditures of \$2,000 or less? ...... 2 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." 1 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a 2b С 2c Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues ..... If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying 4 Part IV **Supplemental Information** Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

EEA Schedule C (Form 990) 2021

#### **SCHEDULE F** (Form 990)

#### Statement of Activities Outside the United States

OMB No. 1545-0047

**Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

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

Employer identification number

BRIDGES TO LEARNING INC 20-1698868 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ............. For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (e) If activity listed in (d) is (b) Number (c) Number of (d) Activities conducted in the (f) Total of offices in employees. region (by type) (such as. expenditures for a program service, agents, and describe specific type of the region fundraising, program services, and investments independent investments, grants to recipients service(s) in the region in the region contractors located in the region) in the region (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)(11)(12) (13)(14)(15)(16)(17)Subtotal . . . . . . . . . . . . Total from continuation sheets to Part I . . . . . . Totals (add lines 3a and 3b)

Schedule F (Form 990) 2021 BRIDGES TO LEARNING INC 20-1698868 P

(a) Name organization		(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Asia and						
)		the Pacific	SPONSORSHIPS FOR	27,826	WIRE TRANSFER			
		East Asia and						
		the Pacific	BREAKFAST FUND	7,500	WIRE TRANSFER			
)								
)								
)								
)								
0)								
1)								
2)								
3)								
4)								
5)								
6)								
	number of recipient organiz		_				_	
•	01(c)(3) organization by the number of other organization	-	•					

EEA

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (a) Type of grant or assistance (b) Region (c) Number of (g) Description (h) Method of valuation (d) Amount of (e) Manner of (f) Amount of recipients cash grant cash noncash of noncash assistance (book, FMV, disbursement assistance appraisal, other) (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12)(13) (14) (15)(16)(17)(18)

Schedule F (Form 990) 2021 BRIDGES TO LEARNING INC

Foreign Forms

Part IV

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

Schedule F (Form 990) 2021 EEA

Schedule F (Form 990) 2021

Page 5

Part V Supplemental Information

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

EEA Schedule F (Form 990) 2021

#### **SCHEDULE G** (Form 990)

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection

Employer identification number

GES TO LEARNING INC					20-169	
I Fundraising Activities.	Complete if th	e organiza	ation answ	ered "Yes" on F	orm 990, Part IV, I	ine 17.
Form 990-EZ filers are not	required to comp	olete this pa	art.			
Indicate whether the organization rai	ised funds through	any of the fo	llowing activit	ties. Check all that a	pply.	
a ☐ Mail solicitations e ☐ Solicitation of non-government grants						
☐ Internet and email solicitations		f	Solicitation	of government gran	nts	
☐ Phone solicitations		g	Special fun	ndraising events		
☐ In-person solicitations						
Did the organization have a written of	or oral agreement v	vith any indiv	idual (includir	ng officers, directors	, trustees,	
or key employees listed in Form 990	, Part VII) or entity	in connection	n with profess	sional fundraising se	ervices?	Yes No
If "Yes," list the 10 highest paid indiv	iduals or entities (fo	undraisers) p	oursuant to ag	reements under whi	ich the fundraiser is to b	ре
compensated at least \$5,000 by the	organization.					
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	or control of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No		(·)	
				1		
				tions or has been no	otified it is exempt from	
_	on to regional or				amou it io oxompt nom	
regionalier et meerionig.						
	Fundraising Activities. Form 990-EZ filers are not Indicate whether the organization rall Mail solicitations Internet and email solicitations Phone solicitations In-person solicitations Did the organization have a written or key employees listed in Form 990 If "Yes," list the 10 highest paid indivicompensated at least \$5,000 by the  (i) Name and address of individual or entity (fundraiser)	Fundraising Activities. Complete if the Form 990-EZ filers are not required to complicate whether the organization raised funds through Mail solicitations Internet and email solicitations Phone solicitations In-person solicitations Did the organization have a written or oral agreement or key employees listed in Form 990, Part VII) or entity If "Yes," list the 10 highest paid individuals or entities (frompensated at least \$5,000 by the organization.  (i) Name and address of individual or entity (fundraiser)  (ii) Activity	Fundraising Activities. Complete if the organization Form 990-EZ filers are not required to complete this part Indicate whether the organization raised funds through any of the foliations and Internet and email solicitations fundering Internet and email solicitations guildreners of Internet and email solicitations guildreners gu	Fundraising Activities. Complete if the organization answ Form 990-EZ filers are not required to complete this part.  Indicate whether the organization raised funds through any of the following activi Mail solicitations	Fundraising Activities. Complete if the organization answered "Yes" on F Form 990-EZ filers are not required to complete this part.  Indicate whether the organization raised funds through any of the following activities. Check all that a Mail solicitations	Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, Form 990-EZ filers are not required to complete this part.    Indicate whether the organization raised funds through any of the following activities. Check all that apply.

If "No," explain:

If "Yes," explain:

10a

EEA Schedule G (Form 990) 2021

Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

#### **SCHEDULE O** (Form 990)

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

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

OMB No. 1545-0047

**Open to Public** 

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

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

Name of the organization **Employer identification number** 20-1698868 BRIDGES TO LEARNING INC 01. Officer, directors, etc. family relationship (Part VI, line 2) Jerilyn Hirsch's spouse is Robert Mac Murdo. 02. Form 990 governing body review (Part VI, line 11) The organization's 990 is compiled by our accountant with the assistance of the Treasurer. Once the 990 has been completed it is distributed electronically to the board for review and comment prior to filing. All comments and questions are resolved prior to filing, primarily through email between all board members. 03. Conflict of interest policy compliance (Part VI, line 12c) Bridges to Learning Inc's Conflict of Interest policy is completed annually by each board member. The board collectively reviews each member's statement and discusses any questions that members may have. Members are bound to report any change in their situation throughout the year. Randomly, the Chairman, will poll the board as to their status at periodic board meetings and those results are compiled in the minutes. 04. CEO, executive director, top management comp (Part VI, line 15a) During the Board's annual strategic planning session in 2008, it concluded that establishing a salary for the President and Treasurer would be sound policy to begin to establish credibility as a sustainable organization. Consulting firms such as MAP for Non-Profits and the Minnesota Council of Non-Profits were accessed to evaluate appropriate salary structures for organization our size. 05. Other officer or key employee compensation (Part VI, line 15b

Compensation for an Administrative Assistant was also approved for the prevailing rate of

Schedule O (Form 990) 2021 Employer identification number Name of the organization BRIDGES TO LEARNING INC 20-1698868 \$20.00/hr for part time work. 06. Governing documents, etc, available to public (Part VI, line 19) Bridges to Learning Inc posts its by-laws and governing documents on their website, www.Bridges2Learning.org

#### Eorm 8879-TE

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

For calendar year 2021, or fiscal year beginning

, 2021, and ending

, 20

2021

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Do not send to the IRS. Keep for your records.

► Go to www.irs.gov/Form8879TE for the latest information.

Name of filer EIN or SSN BRIDGES TO LEARNING INC 20-1698868 Name and title of officer or person subject to tax ROBERT MACMURDO, TREASURER Part I Type of Return and Return Information Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I. b Total revenue, if any (Form 990, Part VIII, column (A), line 12)..... 1b 1a Form 990 check here . . . . . 70,353 Form 990-EZ check here . . . Total revenue, if any (Form 990-EZ, line 9) . . . . . . . . . . . . . . . 2b 2a Form 1120-POL check here. ▶ 3а Form 990-PF check here. .▶ Tax based on investment income (Form 990-PF, Part V, line 5). . . . . 4b 4a Form 8868 check here . . . ▶ 5a Form 990-T check here. . . ▶ **Total tax** (Form 990-T, Part III, line 4) . . . . . . . . . . . . . . . 6b 6a Form 4720 check here . . . ▶ 7a Form 5227 check here . . . ▶ b FMV of assets at end of tax year (Form 5227, Item D) . . . . . . . . 8b 8a 9a Form 5330 check here . . . ▶ **b** Tax due (Form 5330, Part II, line 19). . . . . . . . . . . . . . . . 9b 10a Form 8038-CP check here. . > b Amount of credit payment requested (Form 8038-CP, Part III, line 22) . 10b Part II Declaration and Signature Authorization of Officer or Person Subject to Tax I am an officer of the above entity or Under penalties of perjury, I declare that I am a person subject to tax with respect to (name and that I have examined a copy of the of entity) 2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only X lauthorize DAO T NGUYEN CPA to enter my PIN 21868 as my signature **ERO firm name** Enter five numbers, but do not enter all zeros on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the retum's disclosure consent screen. As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Signature of officer or person subject to tax ▶ Date ▶ 05-12-2022 Part III **Certification and Authentication** ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. 414864 21188 Don't enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. ERO's signature ▶

# Statement of Program Service Accomplishments Pag01 Name(s) as shown on return Pag01 Your Social Security Number 20-1698868

#### Form 990-Part III(a)

Statement #4

Statement of Service Accomplishment

Program Service Code

Program Service Expenses \$1674
Grants and allocations included in above expense \$0
Program Services Revenue \$0

#### Explanation

Collaborations & Partnerships As one of a relatively small number of organizations supplying resources to poor children in Vietnam, B2L has a unique position to become an organization that is also providing strength to the infrastructure of nonprofit organizations currently in Vietnam as a movement-maker, B2L initiates collaborations and partnerships that strengthen our ability to carry out our mission. We seek partners who work with models similar to ours, supporting the unique needs of each child.

## Statement of Program Service Accomplishments Page 1 Page 1 Your Social Security Number BRIDGES TO LEARNING INC Statement of Program Service Accomplishments 2021 PG01 Your Social Security Number 20-1698868

#### Form 990-Part III(b)

Statement #4

Statement of Service Accomplishment

Program Service Code

Program Service Expenses	\$837
Grants and allocations included in above expense	\$0
Program Services Revenue	\$0

#### Explanation

School Asset Management Even though schools like Anh Linh Free School are poor in capital and cash, they still have more funds than many places in impoverished communities. Keeping the money donated from B2L in their local bank accounts can be a challenge. It attracts attention, and could be confiscated. For schools in developing countries, it is often safer to retain their funds offshore. B2L works with the school to help them with their cash flow and cash management. B2L is creating an escrow account to finance programs for the next year and help the school maintain, budget, and manage the flow of funds.

# Statement of Program Service Accomplishments Name(s) as shown on return BRIDGES TO LEARNING INC Statement of Program Service Accomplishments Your Social Security Number 20-1698868

Form 990-Part III(c)

Statement #4

Statement of Service Accomplishment

Program Service Code

Program Service Expenses \$837
Grants and allocations included in above expense \$0
Program Services Revenue \$0

#### Explanation

The capital building initiative provides for the furnishing of computer labs, dormitories, building maintenance and the construction of facilitities including new schools.

990	990 Overflow Statement (This page is not filed with the return. It is for your records only.)		Page 1
Name(s) as shown on return		FEIN	_
BRIDGES TO	LEARNING INC	2	0-1698868

#### OTHER ASSISTANCE TO ORGANIZATION OUTSIDE THE US

Description		Amount
Sponsored Elementary school children		\$ 20,826
Children's Breakfast Fund		7,500
Anh Viet School		7,000
	Total: \$	35,326