990

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 2018

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 Inspection

A	For th	ne 20	018 calend	lar year, or tax year begin	ning	, 2018, and	ending		, 20
В	Check i	if appl	licable:	C Name of organization BRID	GES TO LEARNING INC			С	Employer identification no.
	Address	s chai	nge	Doing business as					20-1698868
	Name o	chang	je	Number and street (or P.O. box	(if mail is not delivered to street address)		Room/suite	E	Telephone number
	Initial re	eturn		1633 CEDAR LAKE	PARKWAY				(612)381-1990
	Final re	turn/t	erminated		country, and ZIP or foreign postal code		<u> </u>		Gross receipts
Ī	Amende	ed ret	turn	MINNEAPOLIS, MN					\$ 96,307
Ī	Applica			F Name and address of principal			H(a) Is this a group	o return for	
_			3	Same as C above			H(b) Are all subo		
	Tax-exe	empt s	status: X) ◀ (insert no.) 4947(a)(1) or	527			list. (see instructions)
J	Websit			v.bridges2learning	<u> </u>		H(c) Group exe		
					ociation Other ►	L Year of formation:			domicile: MN
	art I		Summar		Suidi -	E Toda of formation.	2001 111 01011	z or rogar	dominione. P114
•	1				on or most significant activities: Br	idaes to Lea	rning!e miee	ion	is to provide
	'				on, well-being, and social				
çe		_			are currently focusing				
nan			ietnam.		are currencty focusing	on schools a	na educacion	ar p	IOGIAMS III
ver	2	_		ox ▶ ☐ if the organization	/ of its not assets				
Ó	3				rning body (Part VI, line 1a)			3	_
ళ	4			-					6
ties				=	s of the governing body (Part VI, line 1				6
ξį	5				calendar year 2018 (Part V, line 2a)				2
Activities & Governance	6			er of volunteers (estimate if r	• ,				100
					Part VIII, column (C), line 12			7a	0
	-	D IN	iet unrelate	ed business taxable income	from Form 990-T, line 38			7b	0
		_			41.)		Prior Year		Current Year
a)	8			,	1h)			3,139	_
ğ	9		-		(2g)				0
e	10), lines 3, 4, and 7d)			4	4
Revenue	11				es 5, 6d, 8c, 9c, 10c, and 11e)			5 , 875	
	12				must equal Part VIII, column (A), line 1	•		,018	
	13			• •	X, column (A), lines 1-3)			1,915	72,064
	14				(, column (A), line 4)				0
Ś	15				benefits (Part IX, column (A), lines 5-			3,368	11,974
Expenses	16			- · · · · · · · · · · · · · · · · · · ·	olumn (A), line 11e)				0
ğ				ising expenses (Part IX, col		3,657			
Ш	17				es 11a-11d, 11f-24e)			3,197	
	18	T	otal expens	ses. Add lines 13-17 (must	equal Part IX, column (A), line 25) .		76	5 , 480	93,663
	19	R	tevenue les	s expenses. Subtract line 1	8 from line 12		3	3,538	2,644
ō	seo						Beginning of Curren	t Year	End of Year
sets	20	T	otal assets	(Part X, line 16)			55	744	55,391
Net Assets or	<u> </u> 21			, ,			4	4,205	1,207
_		N			ine 21 from line 20		51	L,539	54,184
	art II			ire Block					
					 n, including accompanying schedules and statemeter) is based on all information of which preparer h 		ny knowledge and belief,	it is	
_		Ϊ.							
e:.				RT MACMURDO				<u> </u>	
Sig		"	Signatur	re of officer				Date	
He	re		·	RT MACMURDO, TREA	SURER				
			Type or	print name and title					
_			Print/Type pre	eparer's name	Preparer's signature	Date	Check	if P	PTIN
Pa							self-employ	ed	
	epare	F	Firm's name	>			Firm's EIN ▶		
Us	e On	ly	Firm's addres	ss ►			Phone no.		
May	the IF	RS c	discuss this	retum with the preparer sho	own above? (see instructions)				Yes No

Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	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.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$74,532 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.
4b	(Code:) (Expenses \$7,500 including grants of \$) (Revenue \$)
	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.
4c	(Code:) (Expenses \$ 1,993 including grants of \$) (Revenue \$)
	Research & Dissemination B2L performs research to gather information that can be useful for
	B2L strategic decision-making and for its partners, collaborators. Information that advances
	the B2L mission can be disseminated to the general public using social media vehicles. B2L
	uses the communications from students and schools in Vietnam, stories about their progress,
	and other information to help donors and interested parties understand education in its
	global context.
	*
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 3,987 including grants of \$) (Revenue \$)
4e	Total program service expenses ► 88,012
	•

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	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	_		3.7
_	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,	_		37
c	assessments, or similar amounts as defined in Revenue Procedure 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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	0		
′	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? <i>If</i> "Yes,"			
Ü	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			- 25
•	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
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		X
С				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	,			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е		11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			3.7
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	401-		v
40	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a b	Did the organization maintain an office, employees, or agents outside of the office States?	14a		Λ
D	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
-	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? 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		Х
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	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	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

Part IV

BRIDGES TO LEARNING INC 20-1698868 Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? 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		_X
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		X
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		_X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		_X_
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			7.7
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		_X_
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, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
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 in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O.	38	Х	
Part				
	Check if Schedule O contains a response or note to any line in this Part V			
			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			
	reportable gaming (gambling) winnings to prize winners?	1c	Х	

Form 990 (2018) BRIDGES TO LEARNING INC 20-1698868 Page 5 Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V Yes No

2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax											
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 2											
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X									
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)											
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X								
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b										
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,											
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X								
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		X								
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X								
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?											
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		X								
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	Χ									
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Χ									
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	If "Yes," indicate the number of Forms 8282 filed during the year											
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X								
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X								
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X								
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X								
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the											
	sponsoring organization have excess business holdings at any time during the year?	8										
9	Sponsoring organizations maintaining donor advised funds.											
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a										
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b										
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 10b											
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 12b											
13	Section 501(c)(29) qualified nonprofit health insurance issuers.											
а	Is the organization licensed to issue qualified health plans in more than one state?	13a										
	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		X								
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b										
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or											
	excess parachute payment(s) during the year	15		X								
	If "Yes," see instructions and file Form 4720, Schedule N.											
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X								
	If "Yes," complete Form 4720, Schedule O.											

20-1698868

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.

Sec	tion A. Governing Body and Management		-	ı	
		_ [Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	6			
	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				
L	committee, explain in Schedule O.	_			
b	Enter the number of voting members included in line 1a, above, who are independent	6			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2	Х	
3	any other officer, director, trustee, or key employee?	• • •		Λ	
3	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		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		X
6	Did the organization become aware during the year of a significant diversion of the organizations assets:		6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	• • • •	•		- 21
<i>1</i> u	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,	• • • •			21
	stockholders, or persons other than the governing body?		7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during				21
•	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	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at				
•	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		Х
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	Χ	
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	Χ	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		12b	Χ	
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	Χ	
13	Did the organization have a written whistleblower policy?	• • •	13	Χ	
14	Did the organization have a written document retention and destruction policy?		14	X	
15	Did the process for determining compensation of the following persons include a review and approval by				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
a	The organization's CEO, Executive Director, or top management official	_	15a	X	
b	Other officers or key employees of the organization	• • •	15b	Χ	
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement				3.7
	with a taxable entity during the year?	• • • •	16a		X
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		16h		
<u>Sac</u>	organization's exempt status with respect to such arrangements?	• • •	16b		
3ec 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)				
.0	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.				
	✓ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	4			
. •	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				

orm=	990	(201	8)

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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 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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)	Position (do not check more than one box, unless person is both an officer and a director/trustee) Highest compensated Key employee Officer Individual trustee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations		
(1) JERILYN HIRSCH	12.00	ustee	trustee		ee	npensated				Uiganizanuris
FOUNDER				X				(0	0
(2) ROBERT MACMURDO	12.00			3,7						
TREASURER (3)				X				(0	0
(4)										
(5)										
<u>(6)</u>										
(7)										
(8)										
(9)										
(10)										
(11)										
<u>(12)</u>										
(13)										
(14)										

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Part	VII Section A. Officers, Directors, Trustees	, Key Emplo	yees,	and			st Con	npen	sated Employee	s (continued)			
	40	(5)				C) sition			(D)	(5)		(E)	
	(A)	(B)	(do n	ot che			nan one		(D)	(E)	l _	(F)	
	Name and title	Average hours per					both an		Reportable compensation	Reportable compensation from		stimated nount of	
		week (list any	1	ficer and a director/		 		from	related		other		
		hours for	or director	Institutional trustee	Officer	vey embloyee	employee	-ormei	the	organizations		pensation	
		related organizations	ecto	ution	9	1 2	oyee	E E	organization (W-2/1099-MISC)	(W-2/1099-MISC)		rom the anization	
		below dotted	r rus	ial tr		o ye						d related	
		line)	Tee	uste		. "					orga	anizations	
				U			l ed						
(15)													_
(12)													
(16)													_
7.5/													
(17)													
<u>(18)</u>													
<u>(19)</u>													
(20)													_
<u>(29</u>)													
(21)													_
·													
(22)													
(23)													
(0.1)											-		_
(24)													
(25)													_
(22)													
1b	Sub-total							•					_
С	Total from continuation sheets to Part VII, Section	n A						•					
d	Total (add lines 1b and 1c)							•	(0		0	
2	Total number of individuals (including but not limited	d to those liste	ed abo	ove)	who	rec	eived	more	than \$100,000 of				
	reportable compensation from the organization									0			
												Yes No)
3	Did the organization list any former officer, directo		-		-		-		•		_		
	employee on line 1a? If "Yes," complete Schedule									• • • • • • •	3	X	
4	For any individual listed on line 1a, is the sum of rep												
	organization and related organizations greater than individual										4	X	
5	Did any person listed on line 1a receive or accrue co										4	^A	
•	for services rendered to the organization? <i>If</i> "Yes,"	•		•			•				5	Х	
Secti	on B. Independent Contractors											<u>'</u>	
1	Complete this table for your five highest compensate	d independer	nt cont	racto	ors t	hat i	receive	ed mo	ore than \$100,000	of			
	compensation from the organization. Report comper	nsation for the	e caler	ndar	yea	r en	ding w	ith or	within the organiz	zation's tax			
	year.								T				
	(A)								(B)			(C)	
	Name and business address								Description of	services	Comp	ensation	_
													_
													_
													_
													_
2	Total number of independent contractors (including	but not limite	d to th	ose	liste	d al	oove) v	who					
	received more than \$100,000 of compensation from	the organiza	ition	•									

Form 990 (2018) BRIDGES TO Part VIII Statement of Revenue

		Check if Schedule O contains a response	or no	ote to any line in thi	s Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
(0, (0	1a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b					
ع ق	C	Fundraising events	1c					
ifts, Ir A	d	Related organizations	1d					
<u>∃</u> .6	e	Government grants (contributions)	1e					
Sii	f	All other contributions, gifts, grants,	16					
buti the	'	and similar amounts not included above	1f	92.608				
a d d O	_	Noncash contributions included in lines 1a-		82,698				
පු පි	g				00.500			
	h	Total. Add lines 1a-1f	• •		82,698			
<u>o</u>				Business Code				
nue/	2a							
Program Service Revenue	b							
	C							
Se	d							
gran	e							
ē.		All other program service revenue						
	g	Total. Add lines 2a-2f						
	3	Investment income (including dividends, inter						
		and other similar amounts)			4	4		
	4	Income from investment of tax-exempt bond	•					
	5	Royalties						
		(i) Real		(ii) Personal				
	6a	Gross rents						
	b	Less: rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (loss)		▶				
	7a	Gross amount from sales of (i) Securitie	s	(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses						
	С	Gain or (loss)						
	d	Net gain or (loss)						
e	8a	Gross income from fundraising						
/enne		events (not including \$						
Re		of contributions reported on line 1c).	_					
Other Rev		See Part IV, line 18	а	13,605				
₹	b	Less: direct expenses						
	l .	Net income or (loss) from fundraising events			13,605			13,605
		Gross income from gaming activities.						
		See Part IV, line 19	а					
	b	Less: direct expenses						
		Net income or (loss) from gaming activities						
	IUa	Gross sales of inventory, less returns and allowances	а					
	b	Less: cost of goods sold						
		Net income or (loss) from sales of inventory						
		Miscellaneous Revenue	••	Business Code				
	11a			Duamess Coue				
	b	-						
		-						
	ч С	All other revenue						
		Total. Add lines 11a-11d						
				-	25 22-			
	12	Total revenue. See instructions			96,307	4	<u> </u>	13,605

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (A) Total expenses (B) (D) Do not include amounts reported on lines 6b. 7b. Program service Management and Fundraising 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 2 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 72,064 72,064 5 Compensation of current officers, directors, 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 1,110 11,103 8,883 1,110 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 10 871 697 87 87 11 Fees for services (non-employees): b Legal...... d Professional fundraising services. See Part IV, line 17 . f Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 12 13 1,303 1,043 130 130 14 2,200 1,760 220 220 15 16 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 68 54 7 7 20 21 22 Depreciation, depletion, and amortization 23 777 621 78 78 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 209 a Bank Charges & CC Fees 2,090 1,672 209 Printing and Postage 113 89 12 12 1,663 C Fundraising expenses 1,663 113 d Dues and Subscription 1,127 901 113 е All other expenses 284 228 28 28 Total functional expenses. Add lines 1 through 24e 25 93,663 88,012 1,994 3,657 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)

Balance Sheet

Part X

Page 11

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 49,525 43,391 2 2 6,219 12,000 3 Pledges and grants receivable, net 3 4 4 5 Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees. 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 7 7 8 8 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a b Less: accumulated depreciation 10b 10c 11 11 12 Investments - other securities. See Part IV, line 11 12 13 13 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 55,744 55,391 17 17 4,205 1,207 18 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 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 25 26 26 1,207 4,205 Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 27 51,539 42,184 28 28 12,000 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here

and complete lines 30 through 34. 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 33 51,539 54,184 Total liabilities and net assets/fund balances 34 55,744 34 55,391

Both consolidated and separate basis

Χ

Χ

2c

3a

If "Yes," check a box below to indicate whether the financial statements for the year were audited on a

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight

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

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

of the audit, review, or compilation of its financial statements and selection of an independent accountant?

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

separate basis, consolidated basis, or both:

Consolidated basis

Separate basis

Schedule O.

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

2018

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Employer identification number

BRI	DGE	S TO LEARNING INC					20-16988	68	
Pa	rt I	Reason for Public Charity	y Status (All or	ganizations must co	omplete	this part	.) See instruction	ns.	•
The	orgar	nization is not a private foundation bec	ause it is: (For lines	s 1 through 12, check only	y one box.)			
1		A church, convention of churches, or	association of chu	rches described in sect i	ion 170(b)	(1)(A)(i).			
2		A school described in section 170(b)(1)(A)(ii). (Attach	Schedule E (Form 990 c	or 990-EZ).	.)			
3		A hospital or a cooperative hospital s	service organization	n described in section 1	70(b)(1)(A	.)(iii).			
4		A medical research organization ope	rated in conjunctio	n with a hospital describ	ed in sect	ion 170(b)	(1)(A)(iii). Enter the		
		hospital's name, city, and state:							
5		An organization operated for the bene	efit of a college or υ	university owned or opera	ated by a g	jovernmen	tal unit described in		
		section 170(b)(1)(A)(iv). (Complete	Part II.)						
6		A federal, state, or local government	or governmental u	nit described in section	170(b)(1)	(A)(v).			
7		An organization that normally receive	s a substantial part	of its support from a gov	ernmental/	unit or from	m the general public		
		described in section 170(b)(1)(A)(vi). (Complete Part I	l.)					
8		A community trust described in secti	on 170(b)(1)(A)(vi	i). (Complete Part II.)					
9		An agricultural research organization	described in sect	ion 170(b)(1)(A)(ix) ope	rated in co	njunction	with a land-grant coll	lege	
		or university or a non-land-grant colle	ege of agriculture (s	see instructions). Enter the	e name, cit	ty, and stat	e of the college or		
		university:							-
10	X	An organization that normally receive	* *	• •				SS	
		receipts from activities related to its e	•			,			
		support from gross investment income		,			rom businesses		
		acquired by the organization after Ju	•	• • • • • • • • • • • • • • • • • • • •	•	,			
11	H	An organization organized and opera	•						
12	Ш	An organization organized and opera	•	•					
		of one or more publicly supported or	-				•		
	_	Check the box in lines 12a through 12				•		•	
	а	Type I. A supporting organization		•		•		ving	
		the supported organization(s) the			ity of the c	illectors or	trustees of the		
	L	supporting organization. You mu	•		ith ita ayan	orted area	nization(a) by bayin	. ~	
	b	Type II. A supporting organization	•			•		•	
		control or management of the sup		·	ISOIIS IIIAI (CONTROL OF 1	nanage the supporte	u	
	_	organization(s). You must comp			anaction w	ith and fu	actionally intograted	with	
	С	its supported organization(s) (see						with,	
	d	Type III non-functionally integr						tion(s)	
	u	that is not functionally integrated.						` '	
		requirement (see instructions). Y					it and an attentivenes		
	е	Check this box if the organization	•				Tyne II Tyne III		
	C	functionally integrated, or Type III				sa Type I,	Type II, Type III		
	f	Enter the number of supported organ							٦
	g	Provide the following information abo							١
		Name of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization	(v) Amount of monetary	(vi) Amount of	-
				(described on lines 1-10	listed in you		support (see	other support (see	
				above (see instructions))	docum	ent?	instructions)	instructions)	
					Yes	No			_
(A)									
									_
(B)									
									-
(C)									
(D)									-
(D)									_
(E)									
									-

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

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

Sec	tion A. Public Support			· •	•	,	
Caler	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	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						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	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)						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4						
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	Gross receipts from related activities, etc. (s	see instructions)				12	
13	First five years. If the Form 990 is for the organization, check this box and stop here	·		urth, or fifth tax yea	ar as a section 501	(c)(3)	▶ 🗌
Sec	tion C. Computation of Public Su						
14	Public support percentage for 2018 (line 6, o		-				%
15	Public support percentage from 2017 Sched						%
16a	33 1/3% support test - 2018. If the organize						
	box and stop here. The organization qualit						▶ ⊔
b	33 1/3% support test - 2017. If the organiz						
	this box and stop here. The organization q						▶ ⊔
17a	10%-facts-and-circumstances test - 2018 10% or more, and if the organization meets Part VI how the organization meets the "fac	s the "facts-and-ci	ircumstances" test,	, check this box an	d stop here. Expla	ain in	
b	organization						▶ □
	15 is 10% or more, and if the organization in Explain in Part VI how the organization mee	ets the "facts-and-	circumstances" tes	t. The organization	qualifies as a publ	icly	. \Box
18	supported organization	not check a box	on line 13, 16a, 16	b, 17a, or 17b, che	eck this box and se	ee	
						<u> </u>	- · · · <u> </u>

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

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

Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	142,185	86,112	123,053	80,014	96,303	527,667
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	112/103	307112	123,033	007011	30,303	327,007
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	Total. Add lines 1 through 5	142,185	86,112	123,053	80,014	96,303	527,667
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.)						527,667
Se	ction B. Total Support		I				
Cale	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	142,185	86,112	123,053	80,014	96,303	527,667
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		3	4	4	4	15
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b		3	4	4	4	15
11	Net income from unrelated business activities not included in line 10b, whether 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.)	142,185	86,115	123,057	80,018	96,307	527,682
14	First five years. If the Form 990 is for the organization, check this box and stop here						▶ □
Se	ction C. Computation of Public Su						
15	Public support percentage for 2018 (line 8, co				T	15	100.00 %
	Public support percentage from 2017 Schedu					16	99.97 %
	ction D. Computation of Investmen						
17 18	Investment income percentage for 2018 (line Investment income percentage from 2017 S		-			17 18	0.00 %
19a	33 1/3% support tests - 2018. If the organiz 17 is not more than 33 1/3%, check this box						▶ 🏻
b 20	33 1/3% support tests - 2017. If the organization 18 is not more than 33 1/3%, check this Private foundation. If the organization did r	box and stop here	. The organization	n qualifies as a pub	olicly supported org	ganization	

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
	1		
	2		
	2-		
	3a		
	3b		
			,
	3с		
	4-		
	4a		
	4b		
	_		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	7		
	8		
	9a		
	ΟĿ		
	9b		
	9с		
	10a		
	401		
/Ec	10b	or 000 F	7) 2018
	rm 990	OF 990-F	- / 1 /UTX

activities but for the organization's involvement.

3 Parent of Supported Organizations. Answer (a) and (b) below.

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? Provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these

3a

2b

Schedule A (Form 990 or 990-EZ) 2018

BRIDGES TO LEARNING INC

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 20-1698868

2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 4 Add lines 1 through 3. 5 Depreciation and depletion 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) Section B - Minimum Asset Amount 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities	1 2 3 4 5 5 6 7 8	(A) Prior Year	(B) Current Year (optional)
2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 4 Add lines 1 through 3. 5 Depreciation and depletion 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) Section B - Minimum Asset Amount 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities	2 3 4 5 6 7		
3 Other gross income (see instructions) 4 Add lines 1 through 3. 5 Depreciation and depletion 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) Section B - Minimum Asset Amount 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities	3 4 5 6 7		
4 Add lines 1 through 3. 5 Depreciation and depletion 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) Section B - Minimum Asset Amount 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities	6 7		
Depreciation and depletion Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) Cection B - Minimum Asset Amount Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): A Average monthly value of securities	5 6 7		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) Section B - Minimum Asset Amount 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities	6 7		
collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) Section B - Minimum Asset Amount 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities	7		
maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) Section B - Minimum Asset Amount 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities	7		
7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) Section B - Minimum Asset Amount 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) Section B - Minimum Asset Amount 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities			
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities	8		
 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities 			
instructions for short tax year or assets held for part of year): a Average monthly value of securities		(A) Prior Year	(B) Current Year (optional)
a Average monthly value of securities			
	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
·	6		

instructions).

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Schedu	le A (Form 990 or 990-EZ) 2018 BRIDGES TO LEARNING INC		20-16	98868	Page
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continued)		
Sec	tion D - Distributions			Current Ye	ear
1	Amounts paid to supported organizations to accomplish exen	npt purposes			
2	Amounts paid to perform activity that directly furthers exempt	purposes of supported			
	organizations, in excess of income from activity				
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizat	ions		
4	Amounts paid to acquire exempt-use assets				
5	Qualified set-aside amounts (prior IRS approval required)				
6	Other distributions (describe in Part VI). See instructions.				
7	Total annual distributions. Add lines 1 through 6.				
8	Distributions to attentive supported organizations to which the	e organization is respons	sive		
	(provide details in Part VI). See instructions.				
9	Distributable amount for 2018 from Section C, line 6				
10	Line 8 amount divided by Line 9 amount				
	·	(2)	(ii)	(iii)	
S	ection E - Distribution Allocations (see instructions)	(i)	Underdistributions	Distributa	ble
	,	Excess Distributions	Pre-2018	Amount for	2018
1	Distributable amount for 2018 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2018				
	(reasonable cause required - explain in Part VI). See				
	instructions.				
3	Excess distributions carryover, if any, to 2018				
а	From 2013				
	From 2014				
С	From 2015				
	From 2016				
е	From 2017				
	Total of lines 3a through e				
	Applied to underdistributions of prior years				
	Applied to 2018 distributable amount				
i	Carryover from 2013 not applied (see instructions)				
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.				
4	Distributions for 2018 from				
	Section D, line 7:				
а	Applied to underdistributions of prior years				
	Applied to 2018 distributable amount				
	Remainder. Subtract lines 4a and 4b from 4.				
	Remaining underdistributions for years prior to 2018, if				
	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, explain in Part VI . See instructions.				
6	Remaining underdistributions for 2018. Subtract lines 3h				
-	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2019. Add lines 3j				
-	and 4c.				

8 Breakdown of line 7: a Excess from 2014 **b** Excess from 2015 c Excess from 2016 d Excess from 2017 e Excess from 2018

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 or 990-EZ)

Political Campaign and Lobbying Activities

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

Open to Public Inspection

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.

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.

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

•	Section 501(c)(4), (5), or (6) organizations	: Complete Part III.			
Nam	e of organization			Employer	identification number
BR	IDGES TO LEARNING INC			20-169	
Pa	rt I-A Complete if the organ	ization is exempt under secti	on 501(c) or is	a section 527 orga	nization.
1	Provide a description of the organization's	s direct and indirect political campaign a	ctivities in Part IV.	(see instructions for	
	definition of "political campaign activities"	,			
2	Political campaign activity expenditures (s	see instructions)		▶ \$	
3_	Volunteer hours for political campaign act				
Pa	<u> </u>	ization is exempt under secti			
1	Enter the amount of any excise tax incurre				
2	Enter the amount of any excise tax incurre				
3	If the organization incurred a section 4959				
4a	Was a correction made?				. Yes No
b	If "Yes," describe in Part IV.				
Pa		ization is exempt under section		ept section 501(c)(3	3).
1	Enter the amount directly expended by the		•		
	activities			▶ \$	
2	Enter the amount of the filing organization	-			
	527 exempt function activities			▶ \$	
3	Total exempt function expenditures. Add I				
	line 17b				
4	Did the filing organization file Form 1120	-			
5	Enter the names, addresses and employe		-		=
	organization made payments. For each or	•	0 0		
	the amount of political contributions receive		•		
	as a separate segregated fund or a politi	cal action committee (PAC). If additiona	space is needed,	provide information in Part	IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

f Grassroots lobbying expenditures

Г	costion 501/h)	is exempt ui	idei section so	i(c)(3) and med	1 01111 37 00 (elec	dion under
	section 501(h)).	on offiliated aroun	(and list in Dort IV) as	ash offiliated aroun n	a amb a ria nama	
•	Check ► ☐ if the filing organization belongs to a	٠.	•	ach anniated group n	iember's name,	
,	address, EIN, expenses, and share	•	,	s.h.,		
3	Check ▶ ☐ if the filing organization checked bo			DIY.	() =:::	# A A ##
		ring Expenditure			(a) Filing organization's totals	(b) Affiliated group totals
_	(The term "expenditures" me	•			Organization's totals	group totals
1a	, , , , , , , , , , , , , , , , , , , ,	,0	, 0,			
b		• •	, ,,			
C	3 - 1 - 1 - 1 - 1					
d	outer exempt purpose experiances					
е	Total exempt purpose expenditures (add lines 1c a	and 1d)				
f	Lobbying nontaxable amount. Enter the amount from	om the following ta	ble in both			
	columns.					
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amoun	t is:		
	Not over \$500,000	20% of the an	nount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess of	over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess o	ver \$1,500,000.		
	Over \$17,000,000	\$1,000,000.				
g	Grassroots nontaxable amount (enter 25% of line	1f)				
h	Subtract line 1g from line 1a. If zero or less, enter	-0				
i	Subtract line 1f from line 1c. If zero or less, enter -	0				
j	If there is an amount other than zero on either line	1h or line 1i, did th	ne organization file F	orm 4720		
•	reporting section 4911 tax for this year?	•	· · · · · · · · · ·			☐ Yes ☐ No
	, ,		ng Period Under			
	(Some organizations that made a sec	•	•	` '	of the five column	s below.
	•	• •	structions for lin			
					,	
	Lobbyi	ng Expenditures	During 4-Year Aver	aging Period		
	Colondar was (an final was	(-) 2045	(h) 2040	(-) 2047	(4) 2040	(a) Tatal
	Calendar year (or fiscal year	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
	beginning in)					
2a	Lobbying nontaxable amount					
Zu	Lobbying normanable amount					
b	Lobbying ceiling amount					
	(150% of line 2a, column (e))					
С	Total lobbying expenditures					
d	Grassroots nontaxable amount					
е	Grassroots ceiling amount					
	(150% of line 2d, column (e))					

EEA Schedule C (Form 990 or 990-EZ) 2018

	ule C (Form 990 or 990-EZ) 2018 BRIDGES TO LEARNING INC		1698		Page 3
Pa	t II-B Complete if the organization is exempt under section 501(c)(3) and has NOT fi	led F	orm 5	5768	
	(election under section 501(h)).				
For	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(a)	(b)
	cription of the lobbying activity.	Yes	No	Amo	unt
aco	inputori of the lobbying details.	163	140	AIII0	unt
1	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:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	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?				
Pa	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c))(5), c	or sec	tion	
	501(c)(6).				
				Y	es No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?			3	
Pa	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c))(5), c	or sec	tion	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O	R (b)	Part	III-A, lin	e 3, is
	answered "Yes."				
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of				
	political expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year		2b		
С	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	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				
	and political expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Pa	t IV Supplemental Information				
Prov	de 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, I	ines 1	and		
2 (se	e instructions); and Part II-B, line 1. Also, complete this part for any additional information.				

EEA

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

OMB No. 1545-0047

2018

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Employer identification number

BRI	DGES TO LEARNING INC				2	20-1698868
Pa		on on Activitie	es Outside the	United States. Complete		
	Form 990, Part IV, I			·	J	
1	For grantmakers. Does the org		ain records to su	ubstantiate the amount of its gr	ants and	
	other assistance, the grantees' e					
	award the grants or assistance?					Yes No
	9					
2	For grantmakers. Describe in	Part V the organ	nization's proced	ures for monitoring the use of i	ts grants and other a	assistance
_	outside the United States.				g	
	outside the ermod etates.					
3	Activities per Region. (The follow	wing Part I line 3	R tahla can ha du	nlicated if additional space is no	andad)	
<u> </u>	(a) Region	(b) Number	(c) Number of	(d) Activities conducted in the	(e) If activity listed in (d)	is (f) Total
	()	of offices in	employees,	region (by type) (such as,	a program service,	expenditures for
		the region	agents, and independent	fundraising, program services, investments, grants to recipients	describe specific type of service(s) in the region	
			contractors	located in the region)	Service(3) in the regio	in the region
			in the region	-		
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
` '						
(8)						
(-,						
(9)						
(0)						
(10)						
(10)						
(11)						
('')				+		
(12)						
(12)						
(42)						
(13)				+		
/4 A\						
(14)						
, <u>, </u>						
(15)				-	-	
(16)						
(17)						
3 a	Sub-total					
b	Total from continuation					
	sheets to Part I					
_	Totals (add lines 3a and 3h)					

Schedule F (F	orm 990) 2018 BI	RIDGES TO LEARN	ING INC				20-169	8868	Page
Part II	Grants and Othe	r Assistance to O	rganizations or Entities	Outside the Unit	ed States. Comple	ete if the organ	ization answered	"Yes" on For	rm 990,
	Part IV, line 15, fo	or any recipient who	received more than \$5,00	00. Part II can be	duplicated if additi	onal space is r	needed.		
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other
			East Asia and the						
(1)			Pacific	SPONSORSHI	73,147	WIRE TRANS			
` ,			East Asia and the						
(2)			Pacific	BREAKFAST	8,497	WIRE TRANS			
(3)									
(4)									
(5)									

(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)	_						
2	Enter total number of recipient organizations listed about	ove that are recognized as chariti	es by the foreign cou	ntry, recognized as tax	-exempt		

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

1
1

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. (h) Method of (a) Type of grant or assistance (b) Region (e) Manner of (c) Number of (d) Amount of (f) Amount of (g) Description valuation 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)

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	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

EEA Schedule F (Form 990) 2018

Schedule F (Form 990) 2018 Page **5**

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) 2018

SCHEDULE G (Form 990 or 990-EZ)

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.

2018

Open to Public

OMB No. 1545-0047

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

BRIDGES TO LEARNING INC 20-1698868 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. 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. Mail solicitations e Solicitation of non-government grants Internet and email solicitations **f** Solicitation of government grants b Phone solicitations g Special fundraising events **d** In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, No Yes or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (iv) Gross receipts (or retained by) custody or control of (or retained by) (ii) Activity from activity or entity (fundraiser) fundraiser listed in contributions? organization col. (i) Yes No 1 2 3 4 5 6 7 8 9 10 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Schedule G (Form 990 or 990-EZ) 2018 BRIDGES TO LEARNING INC 20-1698868 Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events (add col. (a) through col. (c)) (event type) (event type) (total number) Revenue Gross receipts 1 Less: Contributions Gross income (line 1 minus Cash prizes 5 Noncash prizes Direct Expenses Rent/facility costs Food and beverages 8 Entertainment Other direct expenses Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming col. (a) through col. (c)) bingo/progressive bingo Cash prizes 2 Direct Expenses 3 Noncash prizes Rent/facility costs Other direct expenses Volunteer labor No No Direct expense summary. Add lines 2 through 5 in column (d) 7

_			
	Enter the state(s) in which the organization conducts gaming activities:		
а	Is the organization licensed to conduct gaming activities in each of these states?	Yes 🗌	No
b	If "No," explain:		
0a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	Yes	No
h	If "Voo" oveloin:		

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No. 1545-0047 **2018**

Open to Public Inspection

Employer identification number

Department of the Treasury
Internal Revenue Service
Name of the organization

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

BRIDGES TO LEARNING INC 20-1698868

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. A new Executive Director was hired in August

2010 to replaced Jerilyn Hirsch who wished to retire and support the organization through

service with the board.

Schedule O (Form 990 or 990-EZ) (2018) Page 2 Name of the organization Employer identification number BRIDGES TO LEARNING INC 20-1698868 05. Other officer or key employee compensation (Part VI, line 15b Using the information gleaned from the aforementioned organizations the board determined that a half time salary of \$25,000 per annum was appropriate to offer the new director. Compensation for an Administrative Assistant was also approved for the prevailing rate of \$10.00/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

IRS e-file Signature Authorization for an Exempt Organization

		•	_	
or calendar vear 2018	or fiscal year beginning			and ending

▶ Do not send to the IRS. Keep for your records.

2018

OMB No. 1545-1878

Department of the Treasury Internal Revenue Service Name of exempt organization

▶ Go to www.irs.gov/Form8879EO for the latest information.

Employer identification number 20-1698868

BRIDGES TO LEARNING INC Name and title of officer

ROBERT MACMURDO, TREASURER

Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, 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.

	applicable line below. Be not estimate than one line line in that it	
1a	Form 990 check here ► 🗓 b Total revenue, if any (Form 990, Part VIII, column (A), line 12) 1b	96,30
	Form 990-EZ check here ▶ ☐ b Total revenue, if any (Form 990-EZ, line 9)	
3a	Form 1120-POL check here b Total tax (Form 1120-POL, line 22)	
	Form 990-PF check here b Tax based on investment income (Form 990-PF, Part VI, line 5) 4b	
5a	Form 8868 check here ▶ □ b Balance Due (Form 8868, line 3c)	

Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2018 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 organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's 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 organization's 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 organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

.00.	0 1 1141 011001		DON O	,				
X	I authorize	DAO	T N	GUYEN	CPA	to enter my PIN	18868	as my signature
					ERO firm name		Enter five numbers, but do not enter all zeros	
	being filed	with a	state a	agency(ie	18 electronically filed retum. If I haves) regulating charities as part of the m's disclosure consent screen.			,

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 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.

Officer's signature Date ▶ 05-06-2019

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 18996 Do not enter all zeros

Date >

tioned

I certify that the above numeric entry is my PIN, which is my signature on the 2018 electronically filed return for the organization 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 Must Retain This Form - See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

ERO's signature

Statement of Program Service Accomplishments

2018

PG01

20-1698868

Name(s) as shown on return

BRIDGES TO LEARNING INC

Your Social Security Number

Form 990-Part III(a)

Statement #4

Statement of Service Accomplishment

Program Service Code
Program Service Expenses \$1993
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

2018

PG01

20-1698868

Name(s) as shown on return

BRIDGES TO LEARNING INC

Your Social Security Number

Form 990-Part III(b)

Statement #4

Statement of Service Accomplishment

Program Service Code
Program Service Expenses \$997
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 \$997
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 Overflow Statement	2018 Page 1
Name(s) as shown on return	FEIN
BRIDGES TO LEARNING INC	20-1698868

OTHER ASSISTANCE TO ORGANIZATION OUTSIDE THE US

Description		Amount	
Sponsored Elementary school children		\$	42,564
Children's Breakfast Fund			7,500
Anh Viet School			22,000
	Total:	\$	72,064

July 12, 2019

BRIDGES TO LEARNING INC 1633 CEDAR LAKE PARKWAY MINNEAPOLIS, MN 55416

Subject: Preparation of 2018 Tax Returns

BRIDGES TO LEARNING INC:

Thank you for choosing to assist with the 2018 taxes for BRIDGES TO LEARNING INC. This letter confirms the terms of the engagement and outlines the nature and extent of the services we will provide.

We will prepare the 2018 federal and state income tax returns for BRIDGES TO LEARNING INC. We will depend on management to provide the information we need to prepare complete and accurate returns. We may ask management to clarify some items but will not audit or otherwise verify the data submitted.

We will perform accounting services only as needed to prepare the tax returns. Our work will not include procedures to find defalcations or other irregularities. Accordingly, our engagement should not be relied upon to disclose errors, fraud, or other illegal acts, though it may be necessary for management to clarify some of the information submitted. We will, of course, inform management of any material errors, fraud, or other illegal acts we discover.

The law imposes penalties when taxpayers underestimate their tax liability. Please call us if there are any concerns about such penalties.

Should we encounter instances of unclear tax law, or of potential conflicts in the interpretation of the law, we will outline the reasonable courses of action and the risks and consequences of each. We will ultimately adopt, on the behalf of BRIDGES TO LEARNING INC, the alternative selected by management.

Our fee will be based on the time required at standard billing rates plus out-of-pocket expenses. Invoices are due and payable upon presentation. To the extent permitted by state law, an interest charge may be added to all accounts not paid within thirty (30) days.

We will return the original records to management at the end of this engagement. These records, along with all supporting documents, canceled checks, etc., should be securely stored, as these items may later be needed to prove accuracy and completeness of a return. We will retain copies of the records and our work papers for the engagement for seven years, after which these documents will be destroyed.

Our engagement to prepare the 2018 tax returns will conclude with the delivery of the completed returns to management (if paper-filing) or with the tax matters partner's signature and our subsequent submittal of the tax return (if e-filing). If management has not selected to e-file the returns with our office, management will be solely responsible to file the returns with the appropriate taxing authorities. The tax matters partner should review all tax-return documents carefully before signing them.

To affirm that this letter correctly summarizes the arrangements for this work, please sign the enclosed copy of this letter in the space indicated and return it to us in the envelope provided.

We appreciate your confidence in us. Please call if you have questions.
Sincerely,
Accepted By:
Officer
Date

July 12, 2019 BRIDGES TO LEARNING INC: Enclosed is the 2018 federal return for a tax-exempt organization, prepared for BRIDGES TO LEARNING INC from the information provided. This return will be e-field with the IRS once we receive a signed Form 8879-EO, IRS e-file Signature Authorization for an Exempt Organization. The organization's federal return reflects neither a refund nor a balance due. Thank you for the opportunity to be of service. For further assistance with your tax needs, please contact this office at . Sincerely;	
BRIDGES TO LEARNING INC 1633 CEDAR LAKE PARKWAY MINNEAPOLIS, MN 55416 BRIDGES TO LEARNING INC: Enclosed is the 2018 federal return for a tax-exempt organization, prepared for BRIDGES TO LEARNING INC from the information provided. This return will be e-filed with the IRS once we receive a signed Form 8879-EO, IRS e-file Signature Authorization for an Exempt Organization. The organization's federal return reflects neither a refund nor a balance due. Thank you for the opportunity to be of service. For further assistance with your tax needs, please contact this office at .	
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	The organization's federal return reflects neither a refund nor a balance due.
Sincerely,	Thank you for the opportunity to be of service. For further assistance with your tax needs, please contact this office at .
	Sincerely,

July 12, 2019 **BRIDGES TO LEARNING INC** 1633 CEDAR LAKE PARKWAY MINNEAPOLIS, MN 55416 Your privacy is important to us. Please read the following privacy policy. We collect nonpublic personal information about you from various sources, including: * Interviews regarding your tax situation * Applications, organizers, or other documents that supply such information as your name, address, telephone number, Social Security Number, number of dependents, income, and other tax-related data * Tax-related documents you provide that are required for processing tax returns, such as Forms W-2, 1099R, 1099-INT and 1099-DIV, and stock transactions We do not disclose any nonpublic personal information about our clients or former clients to anyone, except as requested by our clients or as required by law. We restrict access to personal information concerning you, except to our employees who need such information in order to provide products or services to you. We maintain physical, electronic, and procedural safeguards that comply with federal regulations to guard your personal information. If you have any questions about our privacy policy, please contact us. Sincerely,