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

▶ 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.

Department of the Treasury Internal Revenue Service

Open to Public Inspection

Α	FOR the	2020 calendar year, or tax year beginning	an	a enaing				
В	Check if applicable	C Name of organization			D Employer identif	ication number		
	Addre	e THE TEAK FELLOWSHIP, INC.						
	Name chang	Doing business as			13-4011465	i		
	Initial return Final	Number and street (or P.O. box if mail is not do 16 WEST 22ND STREET, 3RD FLOOR	elivered to street address)	Room/suite	E Telephone number			
	return termir ated		ZIP or foreign postal code		G Gross receipts \$	4,377,219.		
	Amen		ZIF of foreign postal code		,			
	return Applio		PDING M CIADVIN		H(a) Is this a group			
	tion pendi	SAME AS C ABOVE	EKINE H. CHAKKIN		for subordinate			
_			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	, 50	H(b) Are all subordinates			
			(insert no.) 4947(a)(1) or 527	7	a list. See instructions		
		ee: WWW.TEAKFELLOWSHIP.ORG			H(c) Group exemption			
			ssociation Other >	L Year	of formation: 1998	M State of legal domicile; NY		
P	art I	Summary						
a	1	Briefly describe the organization's mission or mos			ICALLY TALENTED			
Activities & Governance		NEW YORK CITY STUDENTS FROM LOW-INCOM						
rus	2	Check this box if the organization disco	entinued its operations or disp	osed of more	than 25% of its net as	sets.		
Š	3	Number of voting members of the governing body	. , , , , , , , , , , , , , , , , , , ,		3	+		
ر د	4	Number of independent voting members of the go	verning body (Part VI, line 1b)					
Se	5	Total number of individuals employed in calendar	year 2020 (Part V, line 2a)		5	81		
ij	6	Total number of volunteers (estimate if necessary)			6	100		
Ċ	7 a	Total unrelated business revenue from Part VIII, co				0.		
_	b	Net unrelated business taxable income from Form	990-T, Part I, line 11		7b	0.		
					Prior Year	Current Year		
ď	8	Contributions and grants (Part VIII, line 1h)			3,996,807.	3,631,677.		
Ž	9				0.	0.		
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4		377,764.	918,068.			
ď	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8d		-217,502.	-11,000.			
	1	Total revenue - add lines 8 through 11 (must equa			4,157,069.			
		Grants and similar amounts paid (Part IX, column			0.	0,		
	1	Benefits paid to or for members (Part IX, column (0.	0.			
	45	Salaries, other compensation, employee benefits (1,995,662.	1,966,205.		
ses	162	Professional fundraising fees (Part IX, column (A),			0.	0.		
Expenses	h	Total fundraising expenses (Part IX, column (D), lir		028				
X	17	Other expenses (Part IX, column (A), lines 11a-11c			914,809.	1,026,167.		
	''				2,910,471.	, , ,		
	1	Total expenses. Add lines 13-17 (must equal Part			1,246,598.			
	19 //	Revenue less expenses. Subtract line 18 from line	12			 		
ts 0	j	T (D		B	eginning of Current Year 13,671,791	End of Year		
SSe	20	Total assets (Part X, line 16)				15,802,634.		
Net Assets or	21	Total liabilities (Part X, line 26)			67,670.			
	22 art II	Net assets or fund balances. Subtract line 21 from Signature Block	i line 20		13,604,121.	15,422,759.		
		_ •						
		Ities of perjury, I declare that I have examined this return				y knowledge and belief, it is		
true	e, correc	t, and complete. Declaration of preparer (other than offic	er) is based on all information of	wnich preparei	r nas any knowledge.			
		Signature of officer			I Date			
Sig		Signature of officer			Date			
He	re	Type or print name and title						
		,	T		Doto I o	DTIN		
		Print/Type preparer's name	Preparer's signature	44	Date Check if	PTIN		
Pai		JAMES J. REILLY	James Re	illy	self-emplo			
	parer	Firm's name CONDON O'MEARA MCGINTY	DONNELLY LLP		Firm's EIN ▶	13-3628255		
Use	Only	Firm's address ONE BATTERY PARK PLAZA NI N YOR Y 0004			hadana	2 661 - 7777		
N 4 -	ا جملتان		of Collinst State		- Trio e no. 1			
		RS discuss the sireturn of the repair snown in	e? See instructions			Yes No Form 990 (2020)		
0320	001 12-2	3-20 LHA For Paper Work Reduction Act Noti	ce, see the separate instruc	ions.	_	- rorm 330 (2020)		

1	Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: SEE SCHEDULE O	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	Yes X No
_	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes _ANo
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the services of the se	
4a	revenue, if any, for each program service reported. (Code:) (Expenses \$ 1,039,620. including grants of \$) (Revenue \$) HIGH SCHOOL PROGRAMMING - SEE SCHEDULE O.	
4b	(Code:) (Expenses \$ 934,901. including grants of \$) (Revenue \$ MIDDLE SCHOOL PROGRAMMING - SEE SCHEDULE O.)
4c	(Code:) (Expenses \$504,724. including grants of \$) (Revenue \$) COLLEGE SUCCESS PROGRAMMING - SEE SCHEDULE O.)
4d	Other program services (Describe on Schedule O.)	

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	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
•	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	_ <u> </u>		
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X			
••	as applicable.			
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
u	Part VI	11a	х	
h	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	110		
b	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
_	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
٨	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	110		 -
u		11d		x
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11e		x
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	Tie		<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	444		x
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," <i>complete</i>	11f		<u> </u>
ıza	, ,	40-	х	
	Schedule D, Parts XI and XII	12a	Λ	
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	401		_v
40	If "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	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	4.41		x
1 E	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		
15		4		x
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_ A
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	40		x
4-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			x
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		v	
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			•
00	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	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 other state of organization or			_v
	domestic government (A.D. t IX & lumin (A), line (A.), long etc. Sche lule (Parts Land II)	21	gan	(2020)
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Form 990 (2020)

THE TEAK FELLOWSHIP, INC.

Part IV | Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
u	"Yes," complete Schedule L, Part IV	28a		х
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	200		
·		28c		х
29	"Yes," complete Schedule L, Part IV	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	23		_
30		30		х
21	contributions? If "Yes," complete Schedule M	31		
31 32	Did the organization required the transfer more than 25% of its net assets? If "Yes," complete	31		
32	, ,	32		х
22	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33		22		х
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	04		х
25.0	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	0.E.L		
20	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	00		х
27	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	07		v
00	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?		v	
Par	Note: All Form 990 filers are required to complete Schedule O **T V Statements Regarding Other IRS Filings and Tax Compliance	38	X	
i ai				
	Check if Schedule O contains a response or note to any line in this Part V			<u> </u>
	Establis analysis Barol (Establish 200) Establish (Establish 200) Establish (Establish 200) Establish (Establish 200)		Yes	No
_	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 13			
b	Enter the number of Forms W-2G included in line 1a, Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup within blding rules or rapid able payments to ventions and aportable familiant (complying visiting to the visiting visiting and complying visiting to the visiting visiting and complying visiting and complying visiting and complying visiting v		v	
	(gambling) winni gs to the winner ?	1c	X QQA	(2020)
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	orm 990 (2020) THE TEAK FELLOWSHIP, INC.	13-401146	55	Р	age 5						
Pai	Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)										
0-	On Enter the number of ampleyees reported an Form W.S. Transmittal of Ware and Tay Statements	1		Yes	No						
Za	2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 81									
h	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns	<u> </u>	2b	х							
b	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)		20								
За			За		х						
	b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		3b								
	4a At any time during the calendar year, did the organization have an interest in, or a signature or other au										
	financial account in a foreign country (such as a bank account, securities account, or other financial account,		4a		х						
b	b If "Yes," enter the name of the foreign country										
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Acc	counts (FBAR).									
5а	5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х						
b	, , , , , , , , , , , , , , , , , , , ,										
С	c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?										
6a		· ·									
	any contributions that were not tax deductible as charitable contributions?		6a		Х						
b	b If "Yes," did the organization include with every solicitation an express statement that such contribution	•									
_	were not tax deductible?		6b								
7	,	inco provided to the power	7-	х							
a			7a 7b	X							
b	 b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was 	roquirod	10								
C	to file Form 8282?	•	7c		x						
d		7d	70								
e		•	7e		х						
f			7f		х						
g			7g								
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	on file a Form 1098-C?	7h								
8	8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by	by the									
	sponsoring organization have excess business holdings at any time during the year?		8								
9											
а	, , , , , , , , , , , , , , , , , , , ,		9a								
b	7 7 1		9b								
10	1, 7, 9	ا م									
a	· · · · · · · · · · · · · · · · · · ·	10a	-								
b		10b	-								
11 a		11a									
b		1 Id	1								
		11b									
12a	12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1		12a								
		12b									
13	I3 Section 501(c)(29) qualified nonprofit health insurance issuers.										
а	a Is the organization licensed to issue qualified health plans in more than one state?		13a								
	Note: See the instructions for additional information the organization must report on Schedule O.										
b	b Enter the amount of reserves the organization is required to maintain by the states in which the										
	organization is licensed to issue qualified health plans	13b									
С		13c									
14a			14a		Х						
b	b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule		14b								
15			l		,,						
	excess parachute payment(s) during the year?		15		Х						
40	If "Yes," see instructions and file Form 4720, Schedule N.	0	10		v						
16		ncome?	16		Х						
	If "Yes," complete Form 4720, Schedule O.		Eorn	990	(2020						
	TAXPAYER CO	1PV	LOUIT	1 330	(2020)						
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THE TEAK FELLOWSHIP, INC. Form 990 (2020) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 20 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Х 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 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? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c in Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Х 14 Did the organization have a written document retention and destruction policy? 14 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? The organization's CEO, Executive Director, or top management official Х 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶NY Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available

for public inspection. Indicate how you made these available. Check all that apply

X Own website X Upon request __ Another's website

Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, address, and telephone number of the person

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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.

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

(A)	(B)			((C)			(D)	(E)	(F)
Name and title	Average	(do		Pos		າ than d	ne	Reportable	Reportable compensation	Estimated
	hours per	box	, unles	ss per	rson i	s both	an	compensation		amount of
	week	_	cer an	la a a	recio	r/trus	.ee)	from	from related	other
	(list any hours for	irecto						the organization	organizations (W-2/1099-MISC)	compensation from the
	related	e or c	stee			sated		(W-2/1099-MISC)	(***2/1099****130)	organization
	organizations	Individual trustee or director	Institutional trustee		yee	mper		(** 27 1000 141100)		and related
	below	idual	ution	la e	Key employee	est co oyee	ler			organizations
	line)	Indiv	Instit	Officer	Key 6	Highest compensated employee	Former			
(1) JOHN F. GREEN	65.00									
EXECUTIVE DIRECTOR		Х		Х				220,356.	0.	31,777
(2) WYNDY SLOAN	55.00									
DEPUTY DIR. EXTERNAL RELAT						Х		125,164.	0.	30,542
(3) MICHELLE KIM	55.00									
DIRECTOR OF BUSINESS OPERATIONS			L	L	L	х		107,256.	0.	19,128
(4) MARC BECKER	10.00									
CHAIR		Х		Х				0.	0.	(
(5) MATTHEW R. STOPNIK	5.00									
VICE CHAIR		х		х				0.	0.	
(6) CATHERINE M. CLARKIN	5.00									
TREASURER		х		х				0.	0.	
(7) CHRISTOPHER LANNING	5.00									
SECRETARY		Х		Х				0.	0.	(
(8) ROBERT S. KAPLAN	3.00									
FOUNDING BOARD CHAIR/DIREC		Х						0.	0.	
(9) JUSTINE STAMEN ARRILLAGA	5.00									
CHAIR EMERITUS		Х						0.	0.	(
(10) ROBERT KALSOW-RAMOS	3.00									
DIRECTOR		Х						0.	0.	
(11) PAUL SPIVEY	3.00									
DIRECTOR		Х						0.	0.	(
(12) CHRISTINA SEDA	3.00									
DIRECTOR		х						0.	0.	
(13) JARED HOROWITZ	3.00									
DIRECTOR		х						0.	0.	
(14) KENNETH FOX	3.00									
DIRECTOR		х						0.	0.	
(15) JUDSON TRAPHAGEN	3.00									
DIRECTOR		х		L	L	L		0.	0.	
(16) JILL BORST	3.00									
DIRECTOR		х	_			_		0.	0.	
(17) AMRAN HUSSEIN	200	1								
DIRECTOR	HA	х					7	0.	0.	
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Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)			
(A)	(B)			(((D)	(E)		(F)	
Name and title	Average	(da		Pos				Reportable	Reportable	Est	timate	ed
	hours per	box	, unle	ss per	rson i	than o	n an	compensation	compensation	am	ount	of
	week	_	cer ar	id a di	irecto	r/trus	tee)	from	from related	(other	
	(list any	ector						the	organizations		pensa	
	hours for related	or dir	e e			ated		organization	(W-2/1099-MISC)	1	om th	
	organizations	ustee	trust		e e	Suedu		(W-2/1099-MISC)		_	anizat I relat	
	below	lual tr	tional		ploye	st con	_			1	nizati	
	line)	ndividual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			Jorga	. neaci	0110
(18) BRAD COPPENS	3.00	_	_		×	1						
DIRECTOR		х						0.	0.			0.
(19) JACQUES S. PIERRE	3.00											
DIRECTOR		х						0.	0.			0.
(20) JONATHAN BILZIN	3.00											
DIRECTOR		х						0.	0.			0.
(21) JASON CALDWELL	3.00											
DIRECTOR		х						0.	0.			0.
(22) JARED HENDRICKS	3.00											
DIRECTOR		х						0.	0.			0.
		1										
		1										
		1										
		1										
1b Subtotal	•							452,776.	0.		81,	447.
c Total from continuation sheets to Part VI	I. Section A						•	0.	0.			0.
d Total (add lines 1b and 1c)							•	452,776.	0.		81,	447.
2 Total number of individuals (including but no							o re	ceived more than \$100,	000 of reportable			
compensation from the organization						,		,	•			3
											Yes	No
3 Did the organization list any former officer,	director, trust	ee, k	ey e	empl	oye	e, or	hig	hest compensated empl	oyee on			
line 1a? If "Yes," complete Schedule J for si										3		Х
4 For any individual listed on line 1a, is the su												
and related organizations greater than \$150	0,000? If "Yes.	" co	mple	ete S	Sche	edule	J fo	or such individual	-	4	Х	
5 Did any person listed on line 1a receive or a												
rendered to the organization? If "Yes." com										5		Х
Section B. Independent Contractors	•											
Complete this table for your five highest cor	mpensated inc	lepe	nder	nt co	ontra	acto	rs th	at received more than \$	100,000 of compensa	tion fro	m	
the organization. Report compensation for t	the calendar ye	ear e	endir	ng w	ith c	or wi	thin	the organization's tax y	ear.			
(A)								(B)		(C	;)	
Name and business	address	NO	NE					Description of s	ervices (Comper	nsatio	n
2 Total number of independent contractors (in	ncluding but n	ot lir	nite	to t	thos	e lis	ted	above) who received mo	ore than			
\$100,000 of con pensation from he organiz	zati n	1		L	(0						
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		Check if Schedule O	conta	ains a respo	nse (or note to any line	e in this Part VIII			
						,	(A)	(B)	(C)	(D)
							Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
								function revenue	business revenue	sections 512 - 514
oς	1 2	Federated campaigns		1a						
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues								
20.5		Fundraising events				15,724.				
fts,		Related organizations				,:				
ë ë										
ns, Sim		Government grants (contr								
e ë	Ť	All other contributions, gifts,				2 615 052				
현된		similar amounts not included	abov			3,615,953.				
E E	ç	Noncash contributions included in	lines '	1a-1f 1g	\$	110,414.				
<u>2 g</u>	r	Total. Add lines 1a-1f					3,631,677.			
						Business Code				
ø	2 a	·								
ξ	b									
Sel	c									
E S	c	_								
P	6									
Program Service Revenue		All other program service	rovo	nue						
		Total. Add lines 2a-2f								
\rightarrow	3									
	3	Investment income (includ					278 177			278,177.
		other similar amounts)					278,177.			270,177.
	4	Income from investment o		· ·	-	ı				
	5	Royalties			<u></u>					
				(i) Rea	l	(ii) Personal				
	6 a	Gross rents	6a							
	b	Less: rental expenses	6b							
	c	Rental income or (loss)	6с							
	c	Net rental income or (loss)	<u></u>							
	7 a	Gross amount from sales of		(i) Securi	ties	(ii) Other				
		assets other than inventory	7a	467,	365.					
	b	Less: cost or other basis								
ā		and sales expenses	7b	-172,	526.					
her Revenue		Gain or (loss)			391.					
ě		Net gain or (loss)					639,891.			639,891.
포		Gross income from fundraising					, -			, -
	0 6	including \$								
Ò										
		contributions reported on		,		0.				
		Part IV, line 18			8a	11,000.				
		Less: direct expenses			8b	11,000.	11 000			11 000
		Net income or (loss) from					-11,000.			-11,000.
	9 a	Gross income from gamin								
		Part IV, line 19			9a					
		Less: direct expenses								
	c	: Net income or (loss) from	gam	ing activitie	s					
	10 a	Gross sales of inventory, I	ess	returns						
		and allowances			10a					
	b	Less: cost of goods sold			10b					
_		Net income or (loss) from			ry					
						Business Code				
Snc	11 a	1								
e ge	b									
≫ Ker					_					
Miscellaneous Revenue		All oth <u>er reven</u> ue								
Ē										
		Total royan a So test uction	X				4 55 745.		1 0.	907,068.
	12	Total reven e. Se finet uction	1 2	·	-		= 335, 743.		<u> </u>	Form 990 (2020)
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Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	ot include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
	Grants and other assistance to domestic individuals. See Part IV, line 22				
	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
	Benefits paid to or for members				
	Compensation of current officers, directors, trustees, and key employees	253,258.	205,139.	22,793.	25,32
	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
	Other salaries and wages	1,340,976.	1,086,191.	120,688.	134,09
	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	76,453.	61,927.	6,881.	7,64
	Other employee benefits	170,206.	137,866.	15,319.	17,02
	Payroll taxes	125,312.	101,503.	11,278.	12,53
	Fees for services (nonemployees):				
а	Management				
b	Legal	83,366.	68,852.	10,316.	4,19
С	Accounting	10,140.	8,315.	1,318.	50
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	49,258.		49,258.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	11,061.	9,070.	1,438.	55
	Advertising and promotion				
	Office expenses	84,858.	72,753.	7,718.	4,38
	Information technology	27,982.	23,784.	2,798.	1,40
	Royalties				
	Occupancy	325,977.	293,379.	19,559.	13,03
	Travel	632.	568.	32.	3
	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings				
	Interest				
	Payments to affiliates				
	Depreciation, depletion, and amortization	44,165.	37,982.	3,975.	2,20
	Insurance				
	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	STUDENT SERVICES & SUPP	349,673.	349,673.		
b	OTHER	24,711.	22,243.	1,728.	74
۲ C	FUNDRAISING	14,344.			14,34
d e	All other expenses				
е	Total functional expenses. Add lines 1 through 24e	2,992,372.	2,479,245.	275,099.	238,02
	Joint costs. Complete this line only if the organization	2,352,372.	2,1,0,240.	2,0,000.	230,02
	reported in column (B) joint costs from a combined educational campa in and an traising scricita on.	۸ ۱ / ۲			/

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Part X | Balance Sheet

art X	^	Balance Sneet					
		Check if Schedule O contains a response or	note to a	ny line in this Part X	(A)		(B)
					Beginning of year		End of year
1	1	Cash - non-interest-bearing			1,000.	1	1,000
2		Savings and temporary cash investments			1,338,384.	2	1,673,22
3	3	Pledges and grants receivable, net			133,859.	3	172,19
4		Accounts receivable, net			4		
5		Loans and other receivables from any current					
		trustee, key employee, creator or founder, su	bstantial	contributor, or 35%			
		controlled entity or family member of any of t		5			
6	6	Loans and other receivables from other disqu					
		under section 4958(f)(1)), and persons describ		6			
က္ 7	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
ĕ g		Donate of all accounts are a small all of control of the control			30,474.	9	80,562
10	0a	Land, buildings, and equipment: cost or other	r				
		basis. Complete Part VI of Schedule D	10a	490,721.			
	b	Less: accumulated depreciation	10b	203,119.	301,404.	10c	287,602
11	1	Investments - publicly traded securities	11,866,670.	11	13,588,050		
12		Investments - other securities. See Part IV, lir		12			
13	3	Investments - program-related. See Part IV, lii		13			
14	4	Intangible assets		14			
15		Other assets. See Part IV, line 11			15		
16		Total assets. Add lines 1 through 15 (must e		13,671,791.	16	15,802,63	
17	7	Accounts payable and accrued expenses		67,670.	17	66,17	
18		Grants payable		18	313,700		
19		Deferred revenue		19			
20		Tax-exempt bond liabilities			20		
21		Escrow or custodial account liability. Comple				21	
ທ 22		Loans and other payables to any current or fo					
₽		trustee, key employee, creator or founder, su	bstantial	contributor, or 35%			
Liabilities		controlled entity or family member of any of t				22	
≝ <u>2</u> 3	3	Secured mortgages and notes payable to uni	related th			23	
24	4	Unsecured notes and loans payable to unrela	ated third			24	
25		Other liabilities (including federal income tax,					
		parties, and other liabilities not included on li					
		of Schedule D				25	
26	6	Total liabilities. Add lines 17 through 25			67,670.	26	379,875
		Organizations that follow FASB ASC 958, o	check he	re 🕨 🗓			
es		and complete lines 27, 28, 32, and 33.					
등 27	7	Net assets without donor restrictions			12,498,295.	27	14,216,933
<u>e</u> 28	8	Net assets with donor restrictions	1,105,826.	28	1,205,826		
힏		Organizations that do not follow FASB ASC					
로		and complete lines 29 through 33.					
চু 29	9	Capital stock or trust principal, or current fun	ds			29	
3C 8		Paid-in or capital surplus, or land, building, or				30	
8 3₁		Retained earnings, endowment, accumulated				31	
Net Assets or Fund Balances		Total net assets or fund balances			13,604,121.	32	15,422,759
2 33		Total liabilities and net assets/fund balances			13,671,791.	33	15,802,634

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Pa	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI							
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4	,538,	745.			
2	Total expenses (must equal Part IX, column (A), line 25)	2	2	,992,	372.			
3	Revenue less expenses. Subtract line 2 from line 1	3	1,546,37					
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	13	,604,	121.			
5	Net unrealized gains (losses) on investments							
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
	column (B))	10	15	,422,	759.			
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII							
				Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		2b	Х				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,						
	consolidated basis, or both:							
	X Separate basis Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,						
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х				
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Audit						
	Act and OMB Circular A-133?		За		Х			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require							
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b					
			Form	990	(2020)			

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Employer identification number Name of the organization THE TEAK FELLOWSHIP INC. 13-4011465 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions))

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	ction A. Public Support	, plott		,			
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Gifts, grants, contributions, and		` ,	()	. ,	,	
	membership fees received. (Do not						
	include any "unusual grants.")	2,724,955.	2,822,897.	5,379,282.	3,996,807.	3,631,677.	18,555,618.
2	Tax revenues levied for the organ-						
	ization'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	2,724,955.	2,822,897.	5,379,282.	3,996,807.	3,631,677.	18,555,618.
	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)						1,583,733.
6	Public support. Subtract line 5 from line 4.						16,971,885.
	ction B. Total Support						, , .
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 4	2,724,955.	2,822,897.	5,379,282.	3,996,807.	3,631,677.	18,555,618.
	Gross income from interest,		_ / ' / ' '	7 7 7 7 7 7 7 7		, , , , , , , , ,	
Ü	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	135,049.	162,679.	231,967.	301,880.	278,177.	1,109,752.
۵	Net income from unrelated business		,	,,	,		
9							
	activities, whether or not the						
40	business is regularly carried on Other income. Do not include gain						
10	•						
	or loss from the sale of capital						
44	assets (Explain in Part VI.)						19,665,370.
	Total support. Add lines 7 through 10 Gross receipts from related activities,	eta (aga inaturatio	no)			12	13,003,370.
12	First 5 years. If the Form 990 is for the	•	,	auth or fifth town			
13	•	· ·	st, second, triird, i	ourin, or min tax y	ear as a section 5	01(0)(3)	▶□
Sec	organization, check this box and stop ction C. Computation of Publi		centage				
	Public support percentage for 2020 (I			olumn (f))		14	86.30 %
15	Public support percentage from 2019					15	86.82 %
	33 1/3% support test - 2020. If the o						,,,
104	stop here. The organization qualifies						L 17
h	33 1/3% support test - 2019. If the		~			or more, check thi	
	and stop here. The organization qual						
170							
17 a	10% -facts-and-circumstances test	_					
	and if the organization meets the fact			=	•	-	\sim
	meets the facts-and-circumstances te	-	•	*			
b	10% -facts-and-circumstances test	_					∪% Or
	more, and if the organization meets the				-		▶ □
40	organization meets the facts-and-circu			•	• • •		
ΙŎ	Private foundation. If the organization	on did not check a t	JUX UII IIIIE 13, 16a	, 100, 178, 0r 17b,		nd see instructions	

Schedule A (Form 990 or 990-EZ) 2020

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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	siow, picase comp	oloto i art ii.j				
Cale	endar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization'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						
	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						
ŀ	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						
(Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	endar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 6	(4) 2010	(5) 2017	(0) 2010	(4) 2010	(6) 2020	(i) rotar
	a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)					1	<u> </u>
14	First 5 years. If the Form 990 is for the	•			•		_
	check this box and stop here	. 0					>
	ction C. Computation of Publi					T 1	
	Public support percentage for 2020 (li		•	column (f))		15	%
	Public support percentage from 2019					16	%
	ction D. Computation of Inves					T .= T	
	Investment income percentage for 20					17	9/
	Investment income percentage from 2	•				<u> 18 </u>	9/
19	a 33 1/3% support tests - 2020. If the						7 is not
	more than 33 1/3%, check this box an	•					 •
k	o 33 1/3% support tests - 2019. If the line 18 is not more than 33 1/3%, h						.nd ▶□
20	Private foundation, If the paniz			a, o 19) check		st regions	•

schedule A (Form 990 or 990-EZ) 2020

Page 4

<u>No</u>

Yes

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 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.
- 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 lines 3b and 3c 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")? |f "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- 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? |f "Yes." answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- 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).
- 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," and
 - Did the organiza

1		
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9с		
10a		
10b	0 EZ	0000

a A	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
a A	Has the organization accepted a gift or contribution from any of the following persons?			
a A				
	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
1	11c below, the governing body of a supported organization?	11a		
	A family member of a person described in line 11a above?	11b		
	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Section	on B. Type I Supporting Organizations			
	· · · · · · · · · · · · · · · · · · ·		Yes	No
1 0	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations			
			Yes	No
1 V	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations	_		
			Yes	No
1 0	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	/ear, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
•	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No." explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
	By reason of the relationship described in line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	ncome or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Section	on E. Type III Functionally Integrated Supporting Organizations			
1 (Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction	s).	
2 A	Activities Test. Answer lines 2a and 2b below.		Yes	No
a D	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
ti	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
ti	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	now the organization was responsive to those supported organizations, and how the organization determined			
t/	that these activities constituted substantially all of its activities.	2a		
b D	Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement,			
0	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
P	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
	Parent of Supported Organizations. Answer lines 3a and 3b below.			
a D	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
tı	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	. 3a		
	Did the organization exercise a substant al deglee of tirection over the policies, programs, and activities of hach			
0	of its supported rganifations? [A lest interesting the second of the supported by the organization in the regard	3b		

Sche	edule A (Form 990 or 990-EZ) 2020 THE TEAK FELLOWSHIP, INC.			13-4011465	Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	zations		
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	lov. 20, 1970 (explain in	Part VI). See instr	uctions.
	All other Type III non-functionally integrated supporting organizations mu	st complete S	Sections A through E.		
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current (optiona	
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3.	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or				
	collection of gross income or for management, conservation, or				
	maintenance of property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current (optiona	
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
а	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
С	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other factors				
	(explain in detail in Part VI):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,				
	see instructions).	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by 0.035.	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion C - Distributable Amount			Current Y	ear
_1	Adjusted net income for prior year (from Section A, line 8, column A)	1			
2	Enter 0.85 of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
	emergency temporary reduction (see instructions).	6			
7	Check here if the current year is the organization's first as a non-function	ally integrated	d Type III supporting orga	anization (see	

Schedule A (Form 990 or 990-EZ) 2020

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instructions)

Par	rt V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continued)	
Secti	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes	1	
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported		
	organizations, in excess of income from activity	2		
3	Administrative expenses paid to accomplish exempt purpos	es of supported organizations	3	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required - prior IRS approval - prior IRS	rovide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	
8	Distributions to attentive supported organizations to which t	he organization is responsive		
	(provide details in Part VI). See instructions.		8	
9	•			
10	Line 8 amount divided by line 9 amount		10	
	•	(i)	(ii)	(iii)
Secti	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2020	Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2020 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2020			
a	From 2015			
b	From 2016			
с	From 2017			
d	From 2018			
е	From 2019			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2020 distributable amount			
i_	Carryover from 2015 not applied (see instructions)			
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2020 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2020 distributable amount			
С	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2020, 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 2020. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2021. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
	Excess from 2019			
	Excess from 2020			

Schedule A (Form 990 or 990-EZ) 2020



Scriedule A	(Form 990 of 990-EZ) 2020 The Term Teleboronii , The:
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.)
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ochedule A (Form 990 or 990-EZ) 2020

Schedule A

Identification of Excess Contributions Included on Part II, Line 5

2020

** Do Not File ** *** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions
CARYN SEIDMAN BECKER & MARC BECKER	1,686,062.	1,292,755
PAUL, WEISS, RIFKIND, WHARTON & GARRISON	500,000.	106,693
THE HECKSCHER FOUNDATION FOR CHILDREN	500,000.	106,693
YOUTH INC	470,899.	77,592
TAVDAVE		

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

Employer identification number

2020

THE TEAK FELLOWSHIP, INC. 13-4011465 Organization type (check one): Filers of: Section: Form 990 or 990-EZ X 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ______ > \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)



Name of organization

Employer identification number

THE TEAK FELLOWSHIP, INC.

13-4011465

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	CARYN SEIDMAN BECKER & MARC BECKER 9 WEST 57TH STREET, 48TH FLOOR NEW YORK, NY 10019	\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
2	THE HECKSCHER FOUNDATION FOR CHILDREN 123 EAST 70TH STREET NEW YORK, NY 10021	\$	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
3	JACK KENT COOKE FOUNDATION 44325 WOODRIDGE PKWY LANDOWNE, VA 20176	\$159,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
4	ANA & KENNETH FOX 402 WEST 13TH STREET NEW YORK, NY 10014	\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
5	PAUL, WEISS, RIFKIND, WHARTON & GARRISON LLP 1285 AVENUE OF THE AMERICAS NEW YORK, NY 10019	\$100,000.	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
6	THE EARL & ANNA BROADY FOUNDATION 11400 W OLYMPIC BLVD SUITE 1050 LOS ANGELES, MY 9006	\$ 125,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)			

Name of organization

Employer identification number

THE TEAK FELLOWSHIP, INC.

13-4011465

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	ELIZABETH & DICK CASHIN 10 GRACIE SQUARE NEW YORK, NY 10028	\$110,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	TOWERBROOK FOUNDATION 65 EAST 55TH STREET NEW YORK, NY 10128	\$100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	ROBERT S. KAPLAN 1918 N OLIVE STREET DALLAS, TX 75201	\$80,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	CHARLES HAYDEN FOUNDATION 140 BROADWAY 51ST FLOOR NEW YORK, NY 10005	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	JUSTINE STAMEN & JOHN ARRILLAGA 4652 KOLOHALA ST HONOLULU, HI 96816	\$	Person X Payroll
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12 023452 11-25	PRICEWATERHOUSE COOPERS 300 MADISON AVENUE NEW YORK NY 10017	\$ 75,000.	Person X Payroll Noncash (Complete Part II for not cash contributions.)

Name of organization

Employer identification number

THE TEAK FELLOWSHIP, INC.

13-4011465

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	TAXPAYER	«COP	Y

Name of or	ganization		Employer identification number
THE TEAK	FELLOWSHIP, INC.		13-4011465
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, of Use duplicate copies of Part III if additional states.	through (e) and the following line er charitable, etc., contributions of \$1,000 or	section 501(c)(7), (8), or (10) that total more than \$1,000 for the year ntry. For organizations r less for the year. (Enter this info. once.)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of git	ft
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gi	ft
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of git	 ft
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of git	ft
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
	TAYD	AVED	CODV
		┱┼┼	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Nam	THE TEAK FELLOWSHIP, INC.				Empi	-	4011465	n number ;
Pai	•	d Funds or Other	r Similar Funds	or Acc	ount			
	organization answered "Yes" on Form 990, Part IV, lin							
		(a) Donor adv	vised funds	(b)	Funds	and ot	her accou	ints
1	Total number at end of year							
2	Aggregate value of contributions to (during year)							
3	Aggregate value of grants from (during year)							
4	Aggregate value at end of year							
5	Did the organization inform all donors and donor advisors in		held in donor advis	sed funds				
	are the organization's property, subject to the organization's	exclusive legal contro	l?			\square	Yes	☐ No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that	grant funds can be	used only	y			
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for	any other purpose	conferring	g			
	impermissible private benefit?						Yes	No
Pai				Part IV, li	ne 7.			
1	Purpose(s) of conservation easements held by the organization	ion (check all that appl	y)					
	Preservation of land for public use (for example, recrea	ation or education)	Preservation o	f a histori	cally in	nportant	land area	a
	Protection of natural habitat		Preservation o	f a certifie	ed histo	oric stru	cture	
	Preservation of open space							
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation cont	ribution in the form	of a cons	ervatio	n easen	nent on th	ne last
	day of the tax year.			-		leld at th	e End of th	e Tax Yea
а				·····-	2a			
b				····	2b			
С	Number of conservation easements on a certified historic str	()		····	2c			
d	Number of conservation easements included in (c) acquired a	*			٠. ا			
•	listed in the National Register				2d			
3	Number of conservation easements modified, transferred, rel	leased, extinguished, o	or terminated by the	e organiza	ition ai	aring the	etax	
4	year ▶ Number of states where property subject to conservation eas	coment is located						
5	Does the organization have a written policy regarding the per		oction handling of					
3	violations, and enforcement of the conservation easements it		ection, nanding of				Yes	□ No
6	Staff and volunteer hours devoted to monitoring, inspecting,						_	
-	>	,	,g				9 ,	
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and	enforcing conserva	tion ease	ments	during t	he year	
	▶ \$,	Ü			Ü	,	
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirem	ents of section 170	(h)(4)(B)(i)				
	and section 170(h)(4)(B)(ii)?					\square	Yes	☐ No
9	In Part XIII, describe how the organization reports conservation							
	balance sheet, and include, if applicable, the text of the footr	note to the organizatio	n's financial statem	ents that	descri	oes the		
	organization's accounting for conservation easements.							
Pai			reasures, or O	ther Sin	nilar .	Assets	S.	
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.						
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its r	evenue statement a	and balan	ce she	et works	3	
	of art, historical treasures, or other similar assets held for pub	blic exhibition, educati	on, or research in fo	urtherance	e of pu	blic		
	service, provide in Part XIII the text of the footnote to its finar	ncial statements that o	describes these iten	ns.				
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its reve	nue statement and	balance s	heet w	orks of		
	art, historical treasures, or other similar assets held for public	c exhibition, education	, or research in furt	herance o	f publi	c service	Э,	
	provide the following amounts relating to these items:							
	(i) Revenue included on Form 990, Part VIII, line 1				> \$			
					> \$			
2	If the organization received or held works of art, historical tre	•		al gain, pro	ovide			
	the following amounts required to be reported under FASB A	ASC 958 relating to the	ese items:					
a	Revenue included on Form 990. Part VIII, line 1				\$			
	Assets included in Form 9.0, Pa. X) 			V	D /F	000) 000
LHA		s for Form 990.			S	checule	ש (Form	990) 202

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Par	t III Organizations Maintaining Co	ollections of Art	, Historical Tre	asures, or Oth	ner Si	milar A	Assets	(contin		age Z
3	Using the organization's acquisition, accession							(COITIIII	<u> 100)</u>	
•	collection items (check all that apply):	.,	,		o o.g		0 01 110			
а	Public exhibition	d	I oan or excl	nange program						
b	Scholarly research	e		lange program						
c	Preservation for future generations	ū								
4	Provide a description of the organization's co	llections and explain	how they further th	e organization's e	vemnt	nurnose	in Part	XIII		
5	During the year, did the organization solicit or						illi ait.	ZIII.		
Ŭ	to be sold to raise funds rather than to be ma							Yes		No
Par	t IV Escrow and Custodial Arrang									
	reported an amount on Form 990, Part					555,				
1a	Is the organization an agent, trustee, custodia	n or other intermedia	ary for contributions	or other assets n	ot incl	uded				
	on Form 990, Part X?							Yes		No
b	If "Yes," explain the arrangement in Part XIII a							_		
	, .	·	J					Amount		
С	Beginning balance					1c				
	Additions during the year					1d				
	Distributions during the year					1e				
	Ending balance					1f				
	Did the organization include an amount on Fo					<u> </u>		Yes		No
	If "Yes," explain the arrangement in Part XIII.				-					
Par										
		(a) Current year	(b) Prior year	(c) Two years bac		Three yea	ars back	(e) Four	years	back
1a	Beginning of year balance	5,261,992.	5,361,992.	5,260,992			5,389.		386,	
	Contributions	200,000.		101,000	٠.				60,	200.
	Net investment earnings, gains, and losses									
d	Grants or scholarships									
	Other expenditures for facilities									
	and programs	100,000.	100,000.			34	1,397.		151,	071.
f	Administrative expenses									
	End of year balance	5,361,992.	5,261,992.	5,361,992	2.	5,260	0,992.	5,	295,	389.
2	Provide the estimated percentage of the curre	ent year end balance	(line 1g, column (a)) held as:						
а	Board designated or quasi-endowment	77.5116	%							
b	Permanent endowment 22.4880	%								
С	Term endowment ▶	6								
	The percentages on lines 2a, 2b, and 2c should	ıld equal 100%.								
За	Are there endowment funds not in the posses	sion of the organizat	ion that are held an	d administered fo	r the o	rganizati	on	_		
	by:								Yes	No
	(i) Unrelated organizations							3a(i)		Х
	(ii) Related organizations							3a(ii)		Х
b	If "Yes" on line 3a(ii), are the related organizat	ions listed as require	d on Schedule R?					3b		
4	Describe in Part XIII the intended uses of the		ment funds.							
Par										
	Complete if the organization answered	"Yes" on Form 990,			X, line	10.				
	Description of property	(a) Cost or ot basis (investm	` '	1 '	Accu depred	mulated ciation		(d) Book	value	e
1a	Land									
	Buildings									
	Leasehold improvements			297,224.		9,6	22.	;	287,	602.
	Equipment			193,497.		193,49				0.
	Other									
	. Add lines 1a through 1e. (Column (d) must ed		(. column (B) line 10	Oc.)					287,	602.
	S (SSIMILITY MASE CC		21511111 (D), 11110 11				chodul-	D /Earm		

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Schedule D	(Form 990) 2020 THE TEAK FELLOWS	HIP, INC.		13-4011465	Page 3
Part VII	Investments - Other Securities.				
	Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.		
(a) Descrip	tion of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or	end-of-year market	value
(1) Financia	al derivatives				
(2) Closely	held equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Col. (I	o) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII	Investments - Program Related.				
	Complete if the organization answered "Yes"				
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or	end-of-year market	value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	o) must equal Form 990, Part X, col. (B) line 13.)				
Part IX	Other Assets.				
	Complete if the organization answered "Yes"		11d. See Form 990, Part X, line 15.		
	(a)	Description		(b) Book	√alue
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	mn (b) must equal Form 990. Part X, col. (B) lin	e 15.)		>	
Part X	Other Liabilities.				
	Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line		
<u>1. </u>	(a) Description of liability			(b) Book	/aiue
	eral income taxes				
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	<u>mn (b) must equal Form 990, Part X, col. (B) lin</u>	,		<u> </u>	
-	for uncertain tax positions. In Part XIII, provide		_	•	
organiza	ation's liability for uncertain tax positions unde	r FASB ASC 740. Check he	ere if the text of the footnote has been		
		$^{\prime}$ $^{\prime}$ $^{\prime}$		chi du'e D (Form	990) 2020
		→ 1 	ヽ いんノア	T	

				1465 Page 4
·	ts With F	Revenue per Re	turn.	
				4 500 250
			1	4,762,352.
	1.1	272 265		
		,		
		600.		
60 (5 0 1 5 1 M)	<u> </u>			
· · · · · · · · · · · · · · · · · · ·				272 065
•				272,865.
			3	4,489,487.
	1.1	40 250		
		49,258.		
· · · · · · · · · · · · · · · · · · ·			_	40.250
				49,258.
Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	oto \A/ith	Evnanasa nar F		4,538,745.
	its with	expenses per h	teturn.	
				0.040.744
			1	2,943,714.
, , ,	1 1			
Donated services and use of facilities		600.		
Prior year adjustments	2b			
Other losses	2c			
Other (Describe in Part XIII.)	2d			
			2e	600.
Subtract line 2e from line 1			3	2,943,114.
Amounts included on Form 990, Part IX, line 25, but not on line 1:				
Investment expenses not included on Form 990, Part VIII, line 7b	4a	49,258.		
Other (Describe in Part XIII.)	4b			
Add lines 4a and 4b			4c	49,258.
			5	2,992,372.
t XIII Supplemental Information.				
de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV	/, lines 1b a	nd 2b; Part V, line 4	; Part X, lin	e 2; Part XI,
2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addition	onal informa	ation.		
V, LINE 4:				
PURPOSE OF THE GENERAL ENDOWMENT (PERMANENT AND BOARD DESIGNATE	D) IS			
ONTRIBUTE TO UNDERWRITING THE OPERATING COSTS OF THE FELLOWSHIP	e's			
AL PROGRAM, TO COMPLEMENT ANNUAL PRIVATE FUND-RAISING IN UNDERW	RITING			
FELLOWSHIP'S PROGRAMS, AND TO PROVIDE ASSURANCE AND STABILITY T	O THE			
OWSHIP'S PROGRAMS AND FINANCES, ESPECIALLY DURING INEVITABLE PE	ERIODS			
owdiii b incommb imb limmedb, bbibeindbi boxine inbviimbbb ii				
onemii b incolume imb limmele, idilicimeli bonino ineviimbel ii				
CONOMIC AND FINANCIAL DIFFICULTY AND TURBULENCE. THE PURPOSE OF				
·				
·	THE			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains (losses) on investments Donated services and use of facilities Recoveries of prior year grants Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Investment expenses not included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. Jine 12.) **TXII Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Investment expenses not included on Form 990, Part IX, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I. line 18.) **TXIII Supplemental Information.** die the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IX 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addition of the part XIII. Supplemental Information. Total expenses of the General Endowment (Permanent and Board Designate Contribute to Underwriting the Operating Costs of the Fellowshie Contribute to Underwriting the Operating Costs of the Fellowshie Contribute to Underwriting the Operating Costs of the Fellowshie Contribute to Underwriting the Operating Costs of the Fellowshie Contribute to Underwriting the Operating Costs of the Fellowshie Contribute funders and the Complement and Additional Pr	TXI Reconciliation of Revenue per Audited Financial Statements With Foundation of Revenue per Audited Financial Statements With Foundation answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains (losses) on investments Pecoveries of prior year grants Donated services and use of facilities Pecoveries of prior year grants Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Add lines 4a and 4b Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 12.) Total expenses and losses per audited financial statements With Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a Amounts included on Form 990, Part IX, line 25,	Reconciliation of Revenue per Audited Financial Statements With Revenue per Re Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	TXI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains (losses) on investments 2a 272,265. Net unrealized gains (losses) on investments 2b 600. Pecoveries of prior year grants 2c 0 Other (Describe in Part XIII.) Add lines 2a through 2d 2e 2 Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 49, 258. 4b Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part IV, line 12.) Total expenses and losses per audited financial statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IV, line 25: Donated services and use of facilities 2a 600. Prior year adjustments Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part IV, line 18.) Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I line 18.) Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part II, lines 15 and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

OF THE PUBLIC INTEREST PROGRAM AT TEAK.

Schedule D (Form 990) 2020 THE TEAK FELLOWSHIP, INC. Part XIII Supplemental Information (continued)	13-4011465	Page 5
Part XIII Supplemental Information (continued)		
TAXPAYER CO	UV	

SCHEDULE G

Department of the Treasury Internal Revenue Service

(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.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization						Employer identification number		
THE TEAK FELLOWSHIP, INC.						13-4011465		
Part I Fundraising Activities. required to complete this par	 Complete if the organization answet. 	red "Y	'es" or	n Form 990, Part IV, I	ine 1	7. Form 990-EZ	filers are not	
Indicate whether the organization rais a	sed funds through any of the followin e Solicita	tion of tion of	non-g gover	overnment grants				
2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the 10 highest paid individendments of the compensated at least \$5,000 by the	art VII) or entity in connection with poviduals or entities (fundraisers) pursu	rofessi	onal f	undraising services?		Yes		
(i) Name and address of individual or entity (fundraiser)	(i) Name and address of individual or entity (fundraiser) (ii) Activity or entity (fundraiser) (iii) Activity or control of from activity			tò (d	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization		
		Yes	No					
Total 3 List all states in which the organization or licensing.	on is registered or licensed to solicit o		utions	or has been notified	it is e	exempt from re	gistration	
LHA For Paperwork Reduct of Act 1 of	ce, ee the Invitructions for Form 9	90 r	990 E	z.	Sche	ule ((Furm 8	90 or 990-EZ) 2020	

032081 11-25-20

Pa	rt I		_			
_		of fundraising event contributions and gro			<u> </u>	ts greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
					NONE	(add col. (a) through
			GALA (ovent type)	JUNIOR BOARD EVENT	(total number)	col. (c))
ne			(event type)	(event type)	(total number)	
Revenue	4	Cross respires		15,724.		15,724.
Re	1	Gross receipts		13,721.		13,721.
	2	Less: Contributions		15,724.		15,724.
	_	2000. 00/1/1/04/10/10		,		,
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
"	5	Noncash prizes				
Jses	_	Dept/facility agets				
Direct Expenses	6	Rent/facility costs				
i E	7	Food and beverages				
) jre(•					
	8	Entertainment				
	9	Other direct expenses	l .	9,000.		11,000.
	10	Direct expense summary. Add lines 4 through	9 in column (d)		>	11,000.
D-		Net income summary. Subtract line 10 from li				-11,000.
Pa	rt I		answered "Yes" on Form	990, Part IV, line 19, or	reported more than	
		\$15,000 on Form 990-EZ, line 6a.	<u> </u>	(b) Pull tabs/instant	<u> </u>	(d) Total gaming (add
ine			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c)
Revenue						() ()
Ä	1	Gross revenue				
Ś	2	Cash prizes				
Direct Expenses						
y X	3	Noncash prizes				
ct E		Double of the cities and the				
Dire	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No	No —	
	7	Direct expense summary. Add lines 2 through	5 in column (d)		>	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		·····	
9	Ent	ter the state(s) in which the organization condu	icts gaming activities.			
		the organization licensed to conduct gaming ac	_	states?		Yes No
		No," explain:				
	_					
		ere any of the organization's gaming licenses re			year?	Yes No
b	If "	Yes," explain:				
	_					
กรรกร	2 11	-25-20			She wes (No	rm 50 or 990-EZ) 2020

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<u>Sc</u> h	edule G (Form 990 or 990-EZ) 2020 THE TEAK FELLOWSHIP, INC.	13-401	146	55	Page 3
	Does the organization conduct gaming activities with nonmembers?			Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed				
	to administer charitable gaming?	[Yes	No
13	Indicate the percentage of gaming activity conducted in:				
	The organization's facility		13a		%
	An outside facility		13b		//
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		100		/0
17	The the flame and address of the person who prepares the organization's gaming/special events books and records.				
	Nama N				
	Name				
	Addison				
	Address				
		Г	_	V	
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	L		Yes	No
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount	t			
	of gaming revenue retained by the third party \$\bigseleft\ \bigseleft\ \bigs				
С	If "Yes," enter name and address of the third party:				
	Name	_		_	
	Address				
16	Gaming manager information:				
	Name				
	Gaming manager compensation ▶ \$				
	Carning manager compensation				
	Description of continue provided				
	Description of services provided				
	Director/officer Employee Independent contractor				
17	Mandatory distributions:				
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to				
	retain the state gaming license?	L		Yes	└─ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	ıe			
	organization's own exempt activities during the tax year ▶ \$				
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); an	d Part I	II, lin	es 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.				
		1/			
	<u> </u>	Y			
03208	33 11-25-20 Schedule G	(Form 9	990 d	or 990	-EZ) 2020

Schedule (G (Form 990 or 990-EZ) THE TEAK FELLOWSHIP, INC. Supplemental Information (continued)	13-4011465	Page 4
Part IV	Supplemental Information (continued)		
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SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

► Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service Name of the organization

Part I Questions Regarding Compensation

Department of the Treasury

THE TEAK FELLOWSHIP, INC.

Employer identification number 13-4011465

			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
	The organization?	6a		Х
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		I

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

Schedule J (Form 990) 2020

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Page 2

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Deficition	(6)(()-(0)	reported as deferred on prior Form 990
(1) JOHN F. GREEN	(i)	220,356.	0.	0.	19,800.	11,977.	252,133.	0
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0
(2) WYNDY SLOAN	(i)	125,164.	0.	0.	10,605.	19,937.	155,706.	0
DEPUTY DIR. EXTERNAL RELAT	(ii)	0.	0.	0.	0.	0.	0.	0
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(ii)	$\Lambda \Lambda$						
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Schedule J (Form 990) 2020



Page 3

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

THE TEAK FELLOWSHIP, INC.

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

Employer identification number 13-4011465

Pai	rt I Types of Property						
		(a) Check if	(b) Number of contributions or	(c) Noncash contribution amounts reported on	(d) Method of det		
		applicable		Form 990, Part VIII, line 1g	noncash contribut	ion amoun	is
1	Art - Works of art			, ,			
2	Art - Historical treasures						
3	Art - Fractional interests						
4	Books and publications						
5	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
9	Securities - Publicly traded	Х	9	110,414.	FMV		
10	Securities - Closely held stock						
11	Securities - Partnership, LLC, or						
	trust interests						
12	Securities - Miscellaneous						
13	Qualified conservation contribution -						
	Historic structures						
14	Qualified conservation contribution - Other						
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate - Other						
18	Collectibles						
19 20	Food inventory Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other						
26	Other						
27	Other ()						
28	Other ()						
29	Number of Forms 8283 received by the organiz	ation during	the tax year for co	ontributions			
	for which the organization completed Form 828	33, Part V, D	onee Acknowledg	ement 29			
					-	Yes	No
30a	During the year, did the organization receive by	contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it		
	must hold for at least three years from the date	of the initia	l contribution, and	which isn't required to be us	sed for		
	exempt purposes for the entire holding period?					30a	Х
b	If "Yes," describe the arrangement in Part II.				J		
31	Does the organization have a gift acceptance p				ions?	31 X	
32a	Does the organization hire or use third parties of	or related or	ganizations to solid	cit, process, or sell noncash			
	contributions?					32a	Х
b	If "Yes," describe in Part II.				I		
33	If the organization didn't report an amount in co	olumn (c) fo	r a type of property	for which column (a) is chec	ked,		
	describe in Part II.						

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

Schedule M (Form 990) 2020

032142 11-23-20

SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

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.

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

OMB No. 1545-0047 Inspection

Name of the organization

THE TEAK FELLOWSHIP, INC.

Employer identification number

13-4011465 PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: THE MOST SELECTIVE SECONDARY SCHOOLS AND COLLEGES. PART III - LINE 1 THE TEAK FELLOWSHIP, INC. ("TEAK") BELIEVES THAT MOTIVATION AND POTENTIAL, NOT ECONOMIC CIRCUMSTANCES, SHOULD DETERMINE A STUDENT'S FUTURE. TEAK UNLOCKS ACCESS TO OUTSTANDING EDUCATION AND TRANSFORMATIVE EXPERIENCES FOR EXCEPTIONAL NYC STUDENTS, WHO USE THESE OPPORTUNITIES TO CHANGE THEIR LIVES AND THE WORLD AROUND THEM PART III - LINE 4A HIGH SCHOOL PROGRAMMING: TEAK'S COMPREHENSIVE PROGRAMS AND SERVICES SUPPORT HIGH SCHOOL STUDENTS IN COMPETITIVE ACADEMIC ENVIRONMENTS. ENABLING THEM TO EXPLORE THEIR INTERESTS AND REACH THEIR POTENTIAL, WHILE ALSO PREPARING THEM FOR ADMISSION TO AND SUCCESS AT SELECTIVE COLLEGES. THIS 4-YEAR PROGRAM INCLUDES: INDIVIDUALIZED ACADEMIC ADVISING AND SUPPORT; A BREADTH OF EXPERIENTIAL LEARNING OPPORTUNITIES AND A MENU OF TRANSFORMATIONAL PROGRAMS DURING THE SUMMER; AND SUMMER INTERNSHIPS AT CORPORATIONS AND NONPROFIT ORGANIZATIONS. TEAK'S EXTENSIVE COLLEGE GUIDANCE PROGRAMMING INCLUDES INDIVIDUALIZED ONE-ON-ONE COUNSELING, INNOVATIVE PREPARATION FOR STANDARDIZED TESTS. TRIPS TO VISIT COLLEGE CAMPUSES, AND WORKSHOPS COVERING THE APPLICATION AND FINANCIAL AID PROCESSES. 100% OF THE HIGH SCHOOL GRADUATING CLASS OF 2020 EARNED ADMISSION TO SELECTIVE FOUR-YEAR COLLEGES AND UNIT

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990 or 990-EZ) 2020

Name of the organization THE TEAK FELLOWSHIP, INC.	Employer identification number 13-4011465
UNIVERSITY, WILLIAMS COLLEGE AND WESLEYAN UNIVERSITY. THE CLASS OF 2020	
ALSO EARNED OVER \$6 MILLION IN GRANTS FOR THEIR FOUR YEARS OF COLLEGE.	
PART III - LINE 4B	
MIDDLE SCHOOL PROGRAMMING:	
TEAK PROVIDES A CYCLE OF INTENSIVE PROGRAMS TO PREPARE MIDDLE SCHOOL	
STUDENTS TO SUCCEED AT SELECTIVE INDEPENDENT/PAROCHIAL AND SPECIALIZED	
HIGH SCHOOLS. TEAK'S MIDDLE SCHOOL CURRICULUM FOCUSED ON CORE ACADEMIC	
SKILLS IN ELA AND MATH, AS WELL AS PROVIDING STUDENTS WITH UNIQUE	
EXPOSURE TO STEM THROUGH CODING AND LAB-BASED SCIENCE COURSES, AND THE	
PERFORMING ARTS. TEAK ALSO PROVIDES AN INTENSIVE HIGH SCHOOL PLACEMENT	
PROGRAM, FEATURING SSAT TEST PREPARATION, AND INDIVIDUALIZED COACHING	
THROUGH THE HIGHLY-SELECTIVE HIGH SCHOOL PLACEMENT PROCESS. ALL	
STUDENTS ARE PAIRED WITH VOLUNTEER ADULT MENTORS, MANY OF WHOM ARE TEAK	
ALUMNI. TEAK PARENTS BENEFIT FROM ONGOING PROGRAMMING AS WELL. IN	
2020, 100% OF TEAK'S CLASS 21 EARNED ADMISSION TO INDEPENDENT DAY,	
BOARDING, AND SCREENED HIGH SCHOOLS.	
PART III - LINE 4C	
COLLEGE SUCCESS PROGRAMMING:	
THE COLLEGE SUCCESS PROGRAM AIMS TO PROVIDE ONGOING ACADEMIC, CAREER,	
SOCIAL/EMOTIONAL AND FINANCIAL SUPPORT FOR FELLOWS TO THRIVE IN COLLEGE	
AND BEYOND. TEAK STAFF GUIDE STUDENTS THROUGH COURSE SELECTION AND MAKE	
PERSONAL VISITS TO CAMPUSES. IN 2020, TEAK STUDENTS REPORTED AN AVERAGE	
GPA OF 3.46 AT THE END OF THEIR FIRST SEMESTER, DURING HOLIDAY BREAKS	
AND SUMMERS, TEAF AND THE PARKER CHAPANICS OST ORKS OPS ON INCERVIEW	chedule O (Form 990 or 990-EZ) 2020

THE TEAK FELLOWSHIP, INC.	13-4011465
PREPARATION, CAREER PATHS, MICROSOFT EXCEL, FINANCIAL LITERACY, AND	
NETWORKING TO PREPARE STUDENTS FOR SUMMER INTERNSHIPS AND FUTURE	
EMPLOYMENT. TEAK ALSO HELPS STUDENTS AND FAMILIES RENEW THEIR FINANCIAL	
AID REQUESTS, A YEARLY PROCESS EVEN AFTER COLLEGE ADMITTANCE. TEAK	
REPORTS A GRADUATION RATE OF 89% FROM COLLEGE.	
FORM 990, PART VI, SECTION B, LINE 11B:	
THE DRAFT FORM 990 IS PRESENTED TO THE TREASURER. THE TREASURER REVIEWS AND	
RECOMMENDS APPROVAL AND FILING TO THE FULL BOARD IF SATISFIED WITH THE	
DOCUMENT.	
FORM 990, PART VI, SECTION B, LINE 12C:	
THE BOARD AND KEY EMPLOYEES CONFIRM COMPLIANCE WITH THE POLICY BY ANNUALLY	
RE-READING THE CONFLICT OF INTEREST POLICY AND SIGNING A DISCLOSURE	
STATEMENT.	
FORM 990, PART VI, SECTION B, LINE 15:	
THE GOVERNANCE & NOMINATING COMMITTEE REVIEWS SALARY SURVEYS, OTHER	
SUMMARIES OF COMPARABLE DATA, AND EVALUATION BY THE STAFF TO DETERMINE THE	
COMPENSATION OF THE EXECUTIVE DIRECTOR. THE COMMITTEE PRESENTS THE	
RECOMMENDATION TO THE FULL BOARD WHO APPROVES OR DENIES THE RECOMMENDATION.	
THE DETERMINATION IS SUBSTANTIATED IN WRITING IN AN ANNUAL LETTER OF	
APPOINTMENT AND PLACED IN THE EXECUTIVE DIRECTOR'S EMPLOYEE FILE.	
TONG COOL DIDE UT GEOTICAL G. LTW 10	
FORM 990, PART VI, SECTION C, LINE 19:	
TEAK WILL MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND	DV
TRANCIAL STATEM VIS LABOUTO THE GEN TODITE OF ARE TEST.	uule O (Form 990 or 990-EZ) 2020

TAX RETURN FILING INSTRUCTIONS

NEW YORK FORM CHAR500

FOR THE YEAR ENDING

DECEMBER 31, 2020

PREPARED FOR:

THE TEAK FELLOWSHIP, INC. 16 WEST 22ND STREET, 3RD FLOOR NEW YORK, NY 10010

PREPARED BY:

CONDON O'MEARA MCGINTY & DONNELLY LLP ONE BATTERY PARK PLAZA NEW YORK, NY 10004

AMOUNT OF TAX:

BALANCE DUE OF \$775

MAKE CHECK PAYABLE TO:

DEPARTMENT OF LAW

MAIL TAX RETURN TO:

NYS OFFICE OF ATTORNEY GENERAL CHARITIES BUREAU REGISTRATION SECTION 28 LIBERTY STREET NEW YORK, NY 10005

RETURN MUST BE MAILED ON OR BEFORE:

PLEASE MAIL AS SOON AS POSSIBLE.

SPECIAL INSTRUCTIONS:

THE REPORT SHOULD BE SIGNED AND DATED BY AN AUTHORIZED INDIVIDUAL(S).

NEW YORK FORM CHAR500 REPORTS SHOULD ALSO BE FILED WITH THE DEPARTMENT OF STATE VIA THE WEB AT: HTTPS://MY.NY.GOV/

THE ATTACHED COPY OF THE FEDERAL FORM 990 MUST BE PROPERLY SIGNED AND DATED.

CHAR500

NYS Annual Filing for Charitable Organizations www.CharitiesNYS.com

01/01/2020

Send with fee and attachments to:

NYS Office of the Attorney General
Charities Bureau Registration Section
28 Liberty Street
New York, NY 10005

and Ending (mm/dd/yyyy) 12/31/2020

2020

Open to Public Inspection

1.General Information

For Fiscal Year Beginning (mm/dd/yyyy)

Check if Applicable: Address Change	Name of Organization: THE TEAK FEI	LOWSHIP, INC.		Employer Identification Number (EIN): 13-4011465
Name Change	Mailing Address:			NY Registration Number:
Initial Filing		STREET, 3RD	FLOOR	06-19-03
Final Filing	City / State / ZIP: NEW YORK, NY	7 10010		Telephone: 212 288-6678
Amended Filing Reg ID Pending	Website:	10010		Email:
riog ib r chaing	WWW.TEAKFELI	LOWSHIP.ORG		
Check your organization's	3			Confirm your Registration Category in the
registration category:	7A only	EPTL only X DUAL (7	7A & EPTL) EXEM	Charities Registry at www.CharitiesNYS.com .
2. Certification				
See instructions for certif	cation requirements. Imp	roper certification is a viola	tion of law that may be su	bject to penalties. The certification requires
two signatories.				
			9	to the best of our knowledge and belief, ork applicable to this report.
President or Authorized	Officer:			
	Signature		Prin	: Name and Title Date
Chief Financial Officer of				
	Signature		Prin	: Name and Title Date
3. Annual Reporting	Exemption			
categories (DUAL filers) tl	nat apply to your registrat e required. If you cannot	ion, complete only parts 1, claim an exemption or are a	2, and 3, and submit the	e category (7A or EPTL only filers) or both certified Char500. No fee, schedules, or ally one exemption, you must file applicable
exceed \$2 contribution 3b. EPTL	5,000 <u>and</u> the organizations during the fiscal year.	on did not engage a profess	ional fund raiser (PFR) or	ons, government agencies, etc. did not fund raising counsel (FRC) to solicit of assets did not exceed \$25,000 at any time
4. Schedules and A	ttachmonts			
See the following page	llacilileilis			
for a checklist of	Yes X No 4a.	Did your organization use a	professional fund raiser,	fund raising counsel or commercial co-venturer
schedules and		fund raising activity in NY S		
attachments to				
complete your filing.	Yes X No 4b.	Did the organization receive	e government grants? If y	es, complete Schedule 4b.
5. Fee				
See the checklist on the	7A filing fee:	EPTL filing fee:	Total fee:	
next page to calculate yo	-	2. 72 111119 100.	Total 100.	Make a single check or money order
fee(s). Indicate fee(s) you				payable to:
are submitting here:	\$ 25.	\$ <u>750.</u>	\$ 775.	"Department of Law"
CHAR500 Annual F 10 *The "Exempt" catego / re	Churitable Organizations fer /to an organization's		es and er to its IRS ta	x lesigna io Page 1

CHAR500

Annual Filing Checklist

Simply submit the certified CHAR500 with no fee, schedule, or additional attachments IF:

- Your organization is registered as 7A only and you marked the 7A filing exemption in Part 3.
- Your organization is registered as EPTL only and you marked the EPTL filing exemption in Part 3.
- Your organization is registered as DUAL and you marked both the 7A and EPTL filing exemption in Part 3.

Checklist of Schedules and Attachments

If you answered "yes" in Part 4a, submit Schedule 4b: Government Grants Check the financial attachments you must submit with your CHAR500: If you answered "yes" in Part 4b, submit Schedule 4b: Government Grants Check the financial attachments you must submit with your CHAR500: If SF orm 990, 990-E2, or 990-PF, and 990-T in applicable All additional IRS Form 990 Schedules, including Schedule B (Schedule of Contributors), Schedule B of public charities is exempt from disclosure and will not be available for public review. All additional IRS Form 990 Schedules, including Schedule B (Schedule of Contributors), Schedule B of public charities is exempt from disclosure and will not be available for public for pu	Check the schedules you must submit with your CHAR500 as described in Part 4:	
Calculate Your Fee So, if you checked the F7A exemption in Part 3a S25, if the NET WORTH is \$50,000 or more but less than \$50,000,000 or less than \$1,000,000 or more but less than \$50,000,000 or less than \$1,000,000 or more but less than \$50,000,000 or less than \$1,000,000 or more but less than \$1,000,000 or more	If you answered "yes" in Part 4a, submit Schedule 4a: Professional Fund Raisers	(PFR), Fund Raising Counsel (FRC), Commercial Co-Venturers (CCV)
X IRS Form 990, 990.EZ, or 990.PF, and 990-T if applicable X All additional IRS Form 990 Schedules, including Schedule B (Schedule of Contributors). Schedule B of public charities is exempt from disclosure and will not be available for public review.	If you answered "yes" in Part 4b, submit Schedule 4b: Government Grants	
X All additional IRS Form 990 Schedules, including Schedule B (Schedule of Contributors). Schedule B of public review. Our organization was eligible for and filed an IRS 990 N e-postcard. Our revenue exceeded \$25,000 and/or our assets exceeded \$25,000 in the filing year. We have included an IRS Form 990-EZ for state purposes only. If you are a 7A only or DUAL filer, submit the applicable independent Certified Public Accountant's Review or Audit Report: Provided total revenue and support greater than \$250,000 and up to \$750,000. X Audit Report if you received total revenue and support greater than \$750,000. No Review Report or Audit Report is required because total revenue and support is less than \$250,000. No Review Report or Audit Report is required Calculate Your Fee If you checked the 7A Eer. So, if you checked the 7A exemption in Part 3a X \$25, if you did not check the 7A exemption in Part 3a X \$25, if you did not check the 7A exemption in Part 3a X \$25, if the NET WORTH is \$50,000 or more but less than \$250,000 X \$25, if the NET WORTH is \$50,000 or more but less than \$100,000 or more but less than \$10,000,000 or more but less	Check the financial attachments you must submit with your CHAR500:	
disclosure and will not be available for public review. Our organization was eligible for and filed an IRS 990-N e-postcard. Our revenue exceeded \$25,000 and/or our assets exceeded \$25,000 in the filing year. We have included an IRS Form 990-EZ for state purposes only. If you are a 7A only or DUAL filer, submit the applicable independent Certified Public Accountant's Review or Audit Report: Review Report if you received total revenue and support greater than \$250,000 and up to \$750,000. X Audit Report if you received total revenue and support greater than \$750,000 No Review Report or Audit Report is required because total revenue and support is less than \$250,000 We are a DUAL filer and checked box 3a, no Review Report or Audit Report is required Calculate Your Fee Sum Registration Category 7A EPTL, DUAL or EXEMPT2 Organizations are assigned a Registration Category upon registration with the NY Charities Bureau: \$0, if you checked the 7A exemption in Part 3a		
if you are a 7A only or DUAL filer, submit the applicable independent Certified Public Accountant's Review or Audit Report: ☐ Review Report if you received total revenue and support greater than \$250,000 and up to \$750,000. ☐ Audit Report if you received total revenue and support greater than \$250,000 and up to \$750,000. ☐ No Review Report or Audit Report is required because total revenue and support is less than \$250,000 ☐ We are a DUAL filer and checked box 3a, no Review Report or Audit Report is required Calculate Your Fee S. my Registration Category 7A, EPTL_DUAL or EXEMPT2_Organizations are assigned a Registration Category upon registration with the NY Charities Bureau. ☐ \$0, if you checked the 7A exemption in Part 3a ☐ \$0, if you checked the 7A exemption in Part 3a ☐ \$0, if you checked the 7A exemption in Part 3a ☐ \$0, if you checked the EPTL exemption in Part 3b ☐ \$0, if you checked the EPTL exemption in Part 3b ☐ \$0, if you checked the EPTL exemption in Part 3b ☐ \$0, if the NET WORTH is \$50,000 or more but less than \$250,000 ☐ \$0, if the NET WORTH is \$50,000 or more but less than \$1,000,000 ☐ \$250, if the NET WORTH is \$50,000 or more but less than \$1,000,000 ☐ \$250, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 ☐ \$250, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 ☐ \$250, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 ☐ \$250, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 ☐ \$250, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 ☐ \$250, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 ☐ \$250, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 ☐ \$250, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 ☐ \$250, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 ☐ \$250, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 ☐ \$250, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 ☐ \$250, if the NET WORTH is \$50,000,000		ntributors). Schedule B of public charities is exempt from
Review Report if you received total revenue and support greater than \$250,000 and up to \$750,000. A Judit Report if you received total revenue and support greater than \$750,000 No Review Report or Audit Report is required because total revenue and support is less than \$250,000 We are a DUAL filer and checked box 3a, no Review Report or Audit Report is required Calculate Your Fee Samy Registration Category 7A, EPTL, DUAL or EXEMPT2 Organizations are assigned a Registration Category upon registration with the NY Charities Bureau. \$0, if you checked the 7A exemption in Part 3a Samy Registration Category 7A, EPTL, DUAL or EXEMPT2 Organizations are assigned a Registration Category upon registration with the NY Charities Bureau. 7A filers are registered to solicit contributions in New York under Article 7-A of the Executive Law ("7A") EPTL filers are registered under the Estates, Powers & Trusts Law ("EPTL") because they hold assets and/or conduct activities for charitable purposes in NY. DUAL filers are registered under both 7A and EPTL. Samy Registration Category 7A, EPTL, DUAL or EXEMPT2 Organizations are assigned a Registration Category upon registration with the NY Charities Bureau they Ny for the NET WORTH is \$50,000 or more but less than \$1,000,000 Samy Charities Bureau fey filers are registered under the Estates, Powers & Trusts Law ("EPTL") because they hold assets and/or conduct activities for charitable purposes in NY. DUAL filers are registered under both 7A and EPTL. EXEMPT filers have registered under both 7A and EPTL. EXEMPT filers have registered with the NY Charities Bureau and meet conditions in Schedule E - Registration. EXEMPT filers have registered with the NY Charities Bureau and meet conditions in Schedule E - Registration. EXEMPT filers have registered under both 7A and EPTL. EXEMPT filers have registered with the NY Charities Bureau and meet conditions in Schedule E - Registration. EXEMPT filers have registered with the NY Charities Bureau and meet c	· · · · · · · · · · · · · · · · · · ·	ue exceeded \$25,000 and/or our assets exceeded \$25,000 in the
X Audit Report if you received total revenue and support greater than \$750,000 No Review Report or Audit Report is required because total revenue and support is less than \$250,000 We are a DUAL filer and checked box 3a, no Review Report or Audit Report is required Calculate Your Fee For 7A and DUAL filers, calculate the 7A fee: So, if you checked the 7A exemption in Part 3a	If you are a 7A only or DUAL filer, submit the applicable independent Certified Public	Accountant's Review or Audit Report:
No Review Report or Audit Report is required because total revenue and support is less than \$250,000 We are a DUAL filer and checked box 3a, no Review Report or Audit Report is required Calculate Your Fee		and up to \$750,000.
Calculate Your Fee S my Registration Category TA, EPTL, DUAL or EXEMPT?		
S.my Registration Category 7A, EPTL_DUAL or EXEMPT2	No Review Report or Audit Report is required because total revenue and support	ort is less than \$250,000
Is my Registration Category 7A. EPTL, DUAL or EXEMPT? Organizations are assigned a Registration Category upon registration with the NY Charities Bureau: \$0, if you checked the 7A exemption in Part 3a \$25, if you did not check the 7A exemption in Part 3a \$25, if you did not check the 7A exemption in Part 3a \$25, if you checked the EPTL exemption in Part 3b \$25, if the NET WORTH is \$50,000 or more but less than \$250,000 \$350, if the NET WORTH is \$51,000,000 or more but less than \$10,000,000 \$250, if the NET WORTH is \$50,000 or more but less than \$10,000,000 \$350, if the NET WORTH is \$50,000 or more but less than \$10,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if t	We are a DUAL filer and checked box 3a, no Review Report or Audit Report is	required
Is my Registration Category 7A. EPTL, DUAL or EXEMPT? Organizations are assigned a Registration Category upon registration with the NY Charities Bureau: \$0, if you checked the 7A exemption in Part 3a \$25, if you did not check the 7A exemption in Part 3a \$25, if you did not check the 7A exemption in Part 3a \$25, if you checked the EPTL exemption in Part 3b \$25, if the NET WORTH is \$50,000 or more but less than \$250,000 \$350, if the NET WORTH is \$51,000,000 or more but less than \$10,000,000 \$250, if the NET WORTH is \$50,000 or more but less than \$10,000,000 \$350, if the NET WORTH is \$50,000 or more but less than \$10,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if the NET WORTH is \$50,000,000 or more but less than \$50,000,000 \$350, if t	Calculate Your Fee	
For 7A and DUAL filers, calculate the 7A fee: \$0, if you checked the 7A exemption in Part 3a \$25, if you did not check the 7A exemption in Part 3a For EPTL and DUAL filers, calculate the EPTL fee: \$0, if you checked the EPTL exemption in Part 3a For EPTL and DUAL filers, calculate the EPTL fee: \$0, if you checked the EPTL exemption in Part 3b \$25, if the NET WORTH is less than \$50,000 \$250, if the NET WORTH is \$50,000 or more but less than \$250,000 \$3100, if the NET WORTH is \$1,000,000 or more but less than \$1,000,000 \$350, if the NET WORTH is \$1,000,000 or more but less than \$1,000,000 \$350, if the NET WORTH is \$1,000,000 or more but less than \$1,000,000 \$350, if the NET WORTH is \$1,000,000 or more but less than \$1,000,000 \$350, if the NET WORTH is \$1,000,000 or more but less than \$1,000,000 \$350, if the NET WORTH is \$1,000,000 or more but less than \$1,000,000 \$350, if the NET WORTH is \$1,000,000 or more but less than \$1,000,000 \$350, if the NET WORTH is \$1,000,000 or more but less than \$1,000,000 \$350, if the NET WORTH is \$1,000,000 or more but less than \$1,000,000 \$350, if the NET WORTH is \$1,000,000 or more but less than \$1,000,000 \$350, if the NET WORTH is \$1,000,000 or more but less than \$1,000,000 \$350, if the NET WORTH is \$1,000,000 or more but less than \$1,000,000 \$350, if the NET WORTH is \$1,000,000 or more but less than \$1,000,000 \$350, if the NET WORTH is \$1,000,000 or more but less than \$1,000,000 \$350, if the NET WORTH is \$1,000,000 or more but less than \$1,000,000 \$350, if the NET WORTH is \$1,000,000 or more but less than \$1,000,000 \$350, if the NET WORTH is \$1,000,000 or more but less than \$1,000,000 \$350, if the NET WORTH is \$1,000,000 or more but less than \$1,000,000 \$350, if the NET WORTH is \$1,000,000 or more but less than \$1,000,000 \$350, if the NET WORTH is \$1,000,000 or more but less than \$1,000,000 \$350, if the NET WORTH is \$1,000,000 or more but less than \$1,000,000 \$350, if the NET WORTH is \$1,000,000 \$350, if the NET WORTH is \$1,000,000 \$350, if the NET		Is my Pogistration Catagory 7A EPTL DUAL or EVEMPT?
X \$25, if you did not check the 7A exemption in Part 3a **TA filers are registered to solicit contributions in New York under Article 7-A of the Executive Law ("7A") **EPTL and DUAL filers, calculate the EPTL fee: \$0, if you checked the EPTL exemption in Part 3b \$25, if the NET WORTH is less than \$50,000 \$50, if the NET WORTH is \$50,000 or more but less than \$250,000 \$100, if the NET WORTH is \$50,000 or more but less than \$1,000,000 \$250, if the NET WORTH is \$1,000,000 or more but less than \$10,000,000 \$250, if the NET WORTH is \$10,000,000 or more but less than \$10,000,000 \$3750, if the NET WORTH is \$10,000,000 or more but less than \$10,000,000 \$3750, if the NET WORTH is \$50,000,000 or more but less than \$10,000,000 \$3750, if the NET WORTH is \$50,000,000 or more but less than \$10,000,000 \$3750, if the NET WORTH is \$50,000,000 or more but less than \$10,000,000 \$3750, if the NET WORTH is \$50,000,000 or more but less than \$10,000,000 \$3750, if the NET WORTH is \$10,000,000 or more but less than \$10,000,000 \$3750, if the NET WORTH is \$10,000,000 or more but less than \$10,000,000 \$3750, if the NET WORTH is \$10,000,000 or more but less than \$10,000,000 \$3750, if the NET WORTH is \$10,000,000 or more but less than \$10,000,000 \$3750, if the NET WORTH is \$10,000,000 or more but less than \$10,000,000 \$3750, if the NET WORTH is \$10,000,000 or more but less than \$10,000,000 \$3750, if the NET WORTH is \$10,000,000 or more but less than \$10,000,000 \$3750, if the NET WORTH is \$10,000,000 or more but less than \$10,000,000 \$3750, if the NET WORTH is \$10,000,000 or more but less than \$10,000,000 \$3750, if the NET WORTH is \$10,000,000 or more but less than \$10,000,000 \$3750, if the NET WORTH is \$10,000,000 or more but less than \$10,000,000 \$3750, if the NET WORTH is \$10,000,000 or more but less than \$10,000,000 \$3750, if the NET WORTH is \$10,000,000 or more but less than \$10,000,000 \$3750, if the NET WORTH is \$10,000,000 or more but less than \$10,000,000 \$3750, if the NET WORTH is \$10,000,000 or more	For 7A and DUAL filers, calculate the 7A fee:	Organizations are assigned a Registration Category upon
under Article 7-A of the Executive Law ("7A") EPTL filers are registered under the Estates, Powers & Trusts For EPTL and DUAL filers, calculate the EPTL fee: \$0, if you checked the EPTL exemption in Part 3b \$25, if the NET WORTH is less than \$50,000 \$50, if the NET WORTH is \$50,000 or more but less than \$250,000 \$100, if the NET WORTH is \$250,000 or more but less than \$1,000,000 \$250, if the NET WORTH is \$50,000 or more but less than \$1,000,000 \$250, if the NET WORTH is \$51,000,000 or more but less than \$10,000,000 \$250, if the NET WORTH is \$1,000,000 or more but less than \$10,000,000 \$250, if the NET WORTH is \$1,000,000 or more but less than \$10,000,000 \$250, if the NET WORTH is \$10,000,000 or more but less than \$10,000,000 \$250, if the NET WORTH is \$50,000,000 or more but less than \$10,000,000 \$250, if the NET WORTH is \$50,000,000 or more but less than \$10,000,000 \$250, if the NET WORTH is \$50,000,000 or more but less than \$10,000,000 \$250, if the NET WORTH is \$50,000,000 or more but less than \$10,000,000 \$250, if the NET WORTH is \$50,000,000 or more but less than \$10,000,000 \$250, if the NET WORTH is \$50,000,000 or more but less than \$10,000,000 \$250, if the NET WORTH is \$50,000,000 or more but less than \$10,000,000 \$250, if the NET WORTH is \$50,000,000 or more but less than \$10,000,000 \$250, if the NET WORTH is \$50,000,000 or more but less than \$10,000,000 \$250, if the NET WORTH is \$50,000,000 or more but less than \$10,000,000 \$250, if the NET WORTH is \$50,000,000 or more but less than \$10,000,000 \$250, if the NET WORTH is \$50,000,000 or more but less than \$10,000,000 \$250, if the NET WORTH is \$50,000,000 or more but less than \$10,000,000 \$250, if the NET WORTH is \$50,000,000 or more but less than \$10,000,000 \$250, if the NET WORTH is \$50,000,000 or more but less than \$10,000,000 \$250, if the NET WORTH is \$50,000,000 or more but less than \$10,000,000 \$250, if the NET WORTH is \$50,000,000 or more but less than \$10,000,000 \$250, if the NET WORTH is \$10,000,000 or more but less tha	\$0, if you checked the 7A exemption in Part 3a	74 filers are registered to colinit contributions in New York
For EPTL and DUAL filers, calculate the EPTL fee: \$\[\] \\$0, if you checked the EPTL exemption in Part 3b \\ \$\[\] \\$25, if the NET WORTH is less than \\$50,000 \\ \$\[\] \\$50, if the NET WORTH is \\$50,000 or more but less than \\$250,000 \\ \$\[\] \\$100, if the NET WORTH is \\$250,000 or more but less than \\$10,000,000 \\ \$\[\] \\$250, if the NET WORTH is \\$250,000 or more but less than \\$10,000,000 \\ \$\[\] \\$250, if the NET WORTH is \\$1,000,000 or more but less than \\$10,000,000 \\ \$\[\] \\$750, if the NET WORTH is \\$1,000,000 or more but less than \\$50,000,000 \\ \$\[\] \\$1500, if the NET WORTH is \\$50,000,000 or more but less than \\$50,000,000 \\ \$\[\] \\$1500, if the NET WORTH is \\$50,000,000 or more but less than \\$50,000,000 \\ \$\[\] \\$1500, if the NET WORTH is \\$50,000,000 or more but less than \\$50,000,000 \\ \$\[\] \\$1500, if the NET WORTH is \\$50,000,000 or more but less than \\$50,000,000 \\ \$\[\] \\$1500, if the NET WORTH is \\$50,000,000 or more but less than \\$50,000,000 \\ \$\[\] \\$1500, if the NET WORTH is \\$50,000,000 or more but less than \\$50,000,000 \\ \$\[\] \\$1500, if the NET WORTH is \\$50,000,000 or more but less than \\$50,000,000 \\ \$\[\] \\$1500, if the NET WORTH is \\$50,000,000 or more but less than \\$50,000,000 \\ \$\[\] \\$1500, if the NET WORTH is \\$50,000,000 or more but less than \\$50,000,000 \\ \$\[\] \\$1500, if the NET WORTH is \\$50,000,000 or more but less than \\$50,000,000 \\ \$\[\] \\$1500, if the NET WORTH is \\$50,000,000 or more but less than \\$50,000,000 \\ \$\[\] \\$1500, if the NET WORTH is \\$50,000,000 or more but less than \\$50,000,000 \\ \$\[\] \\$1500, if the NET WORTH is \\$50,000,000 or more but less than \\$50,000,000 \\ \$\[\] \\$1500, if the NET WORTH is \\$50,000,000 or more but less than \\$50,000,000 \\ \$\[\] \\$1500, if the NET WORTH is \\$50,000,000 or more but less than \\$50,000,000 \\ \$\[\] \\$1500, if the NET WORTH is \\$50,000,000 or more but less than \\$50,000,000 \\ \$\[\] \\$1500, if the NET WORTH is \\$50,000,000 or more but less than \\$50,000,000 \\ \$\[\] \[X \$25, if you did not check the 7A exemption in Part 3a	•
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Confirm your Registration Category and learn more about NY law at www.CharitiesNYS.com . Send Your Filing Send your CHAR500, all schedules and attachments, and total fee to: Where do I find my organization's NET WORTH? NET WORTH for fee purposes is calculated on: - IRS Form 990 Part I, line 22 - IRS Form 990 EZ Part I, line 21 - IRS Form 990 PF, calculate the difference between Total Assets at Fair Market Value (Part II, line 16(c)) and		but may do so voluntarily.
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NYS Office of the Attorney General - IRS Form 990 EZ Part I, line 21 - IRS Form 990 PF, calculate the difference between the dif	Send your CHAR500, all schedules and attachments, and total fee to:	, -
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28 Liberty Street Total Assets at Fair Market Value (Part II, line 16(c)) and	•	
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Need Assistance?

Visit: www.CharitiesNYS.com

Call: (212) 416-8401

Email: Charities.Bureau@ag.nv.gov

1019 CHARGOO Annual Hiring for Charitable Organizations (Updated Ganeary 2021)

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Financial Statements for year ended December 31, 2020

Condon O'Meara McGinty & Donnelly llp

Certified Public Accountants

One Battery Park Plaza New York, NY 10004-1405 Te1: (212) 661 - 7777 Fax: (212) 661 - 4010

Independent Auditor's Report

To the Board of Directors The TEAK Fellowship, Inc.

We have audited the accompanying financial statements of The TEAK Fellowship, Inc. (the "Fellowship") which comprise the statement of financial position as of December 31, 2020 and the related statements of activities, functional expenses and cash flows for the year then ended and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.



Opinion

In our opinion, the financial statements referred to in the first paragraph on the previous page present fairly, in all material respects, the financial position of The TEAK Fellowship, Inc. as of December 31, 2020 and the results of its activities and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Summarized Comparative Information

We have previously audited The TEAK Fellowship's 2019 financial statements, and our report dated August 25, 2020, expressed an unmodified opinion on those audited financial statements. In our opinion, the summarized comparative information presented herein as of and for the year ended December 31, 2019, is consistent, in all material respects, with the audited financial statements from which it has been derived.

Statement of Financial Position

Assets

	Decei	nber 31
	2020	2019
Cash and cash equivalents	\$ 735,245	\$ 1,108,665
Investments, at fair value	14,527,029	12,097,389
Contributions receivable	172,196	133,859
Prepaid expenses	80,562	30,474
Leasehold improvements, equipment, and website, net	287,602	301,404
Total assets	\$15,802,634	<u>\$13,671,791</u>
Liabilities and Net Assets		
Accounts payable and accrued expenses	\$ 66,175	\$ 67,670
Paycheck protection program loan payable	313,700	_
Total liabilities	379,875	67,670
Net assets Without donor restrictions		
Operating Depart designed at	10,060,767	8,342,129
Board designated Total without donor restrictions	4,156,166	4,156,166
With donor restrictions	14,216,933	12,498,295
Total net assets	1,205,826 15,422,759	1,105,826 13,604,121
Total liabilities and net assets	<u>\$ 15,802,634</u>	\$13,671,791

(with Summarized Comparative Information for the Year Ended December 31, 2019) For the Year Ended December 31, 2020 Statement of Activities

			2020			2019
^	Witho	Without Donor Restrictions	rictions			
		D	Total Without	With		
evenue and support	Operating	board <u>Designated</u>	Donor Restrictions	Donor Restrictions	Total	Total
Grants and contributions						
Foundations and corporations	\$ 1,312,643	• >	\$ 1,312,643	\$ 200,000	\$ 1,512,643	\$ 842,594
Individuals	1,767,268	1	1,767,268	•	1,767,268	1,507,008
Capital campaign	336,042	i	336,042	ı	336,042	305,141
Special event, net of direct donor					•	`
benefits of \$11,000 and \$336,679	4,724	1	4,724	ı	4,724	1,120,539
Donated goods and services	009	1	009	1	009	4,023
Investment return, net	1,141,075	ı	1,141,075	1	1,141,075	1.476,499
Net assets released from restrictions	100,000		100,000	(100,000)		1
Total revenue and support	4,662,352	1	4,662,352	100,000	4,762,352	5,255,804
Expenses						
Program services	2,479,245	1	2,479,245	t	2,479,245	2,393,993
Supporting services						
Administrative and general	226,441	ı	226,441	1	226,441	217,988
Fundraising	238,028	1	238,028	1	238,028	244,433
Total supporting services	7 043 714	ī	464,469	1	464,469	462,421
Total Capatibos	4,743,714		2,943,/14	1	2,943,714	7,856,414
Increase in net assets	1,718,638	•	1,718,638	100,000	1,818,638	2,399,390
Met assets, beginning of year	8,342,129	4,156,166	12,498,295	1,105,826	13,604,121	11,204,731
Net assets, end of year	\$10,060,767	\$ 4,156,166	\$14,216,933	\$ 1,205,826	\$ 15,422,759	\$13,604,121

See notes to financial statements.

(with Summarized Comparative Information for the Year Ended December 31, 2019) For the Year Ended December 31, 2020 Statement of Functional Expenses

		2(2020		2019
		Administrative			
	Program	and	Fund-		
	Services	General	raising	Total	Total
Salaries and wages	\$1,264,679	\$ 140,520	\$ 156,133	\$1,561,332	\$1.582.292
Payroll taxes and employee benefits	327,947	36,439	40,487	404,873	413,370
Professional fees	86,237	13,672	5,258	105,167	30,675
Supplies	23,392	2,448	1,360	27,200	8,328
Student services and supplies	349,673	ı	ı	349,673	350,225
Computers	23,784	2,798	1,400	27,982	31,756
Telephone	10,202	089	454	11,336	11,749
Postage and shipping	3,429	386	471.	4,286	4,573
Occupancy	293,379	19,559	13,039	325,977	255,552
Printing and publications	35,730	4,204	2,102	42,036	86,611
Travel	268	32	32	632	6,342
Depreciation and amortization	37,982	3,975	2,208	44,165	29,659
Fundraising	1	I	14,344	14,344	23,345
Other	22,243	1,728	740	24,711	21,937
Total functional expenses	\$2,479,245	\$ 226,441	\$ 238,028	\$2,943,714	\$2,856,414

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See notes to financial statements.

Statement of Cash Flows

	Year E Decemb	
	2020	2019
Cash flows from operating activities		
Increase in net assets	\$1,818,638	\$2,399,390
Adjustments to reconcile increase in net assets		
to net cash provided by operating activities		
Depreciation and amortization	44,165	29,659
Realized (gain) on investments	(639,891)	(75,884)
Change in fair value of investments	(272,265)	(1,152,792)
Donated stock	(110,414)	(321,445)
Proceeds from sale of donated stock	110,414	321,445
(Increase) decrease in assets		
Contributions receivable	(38,337)	(57,946)
Prepaid expenses	(50,088)	(333)
Increase (decrease) in accounts payable and accrued		
expenses	(1,495)	13,355
Net cash provided by operating activities	860,727	1,155,449
Cash flows from investing activities		
Purchase of property and equipment	(30,363)	(297,989)
Purchase of investments	(1,874,435)	(1,200,243)
Proceeds from sales of investments	<u>356,951</u>	281,653
Net cash (used in) investing activities	(1,547,847)	<u>(1,216,579</u>)
Cash flows from financing activities		
Paycheck protection program loan payable	313,700	-
Net (decrease) in cash and cash equivalents	(373,420)	(61,130)
Cash and cash equivalents, beginning of year	_1,108,665	1,169,795
• • • • • •		
Cash and cash equivalents, end of year	<u>\$ 735,245</u>	<u>\$1,108,665</u>

Notes to Financial Statements December 31, 2020

Note 1 – Nature of organization

The TEAK Fellowship, Inc. (the "Fellowship") was incorporated on May 14, 1998 under the New York State Not-for-Profit Corporation Law. The TEAK Fellowship believes that motivation and potential, not economic circumstances, should determine a student's future. TEAK unlocks access to outstanding education and transformative experiences for exceptional NYC students, who use these opportunities to change their lives and the world around them.

Note 2 – Summary of significant accounting policies

Financial reporting

The Fellowship recognizes all unconditional grants and contributions as support on the statement of activities. Any grants or contributions that are without donor restrictions are recognized as such. Any grants or contributions that are with donor restrictions or pertain to future periods are reflected as net assets with temporary donor restrictions. Any grants or contributions, the corpus of which must be kept in perpetuity, are reflected as net assets with perpetual donor restrictions. The following is a summary of the Fellowship's net assets:

Without donor restrictions

Net assets without donor restrictions are not subject to donor-imposed restrictions and may be expendable for any purpose in performing the primary objectives of the Fellowship.

Operating

Operating net assets are used to account for the general activity of the Fellowship.

Board designated

Represents funds to be used to expand and continue the growth of the Fellowship's programs. The funds will be used at the discretion of the Board to accomplish the aforementioned.

With donor restrictions

Temporary donor restrictions

Net assets, if any, consist of expendable grants and contributions that relate to future periods. When the time restriction ends or the purpose of the restriction is accomplished, temporary donor restricted net assets will be reclassified to net assets without donor restrictions and reported in the statement of activities as net assets released from restriction.

Perpetual donor restrictions

Net assets consist of contributions that are resulted, by the donor in that the principal must remain in be petulty but the investment revenue extract on such funds may be spent in accordance with the corpor's terms.

Notes to Financial Statements (continued) December 31, 2020

Note 2 – Summary of significant accounting policies (continued)

Donated goods and services

The Fellowship receives donated goods and services in connection with its program. Such donated goods and services are estimated at their fair value and reported as support and expenses in the period in which they are used.

For the years ended December 31, 2020 and December 31, 2019, the Fellowship received donated goods and services totaling \$600 and \$4,023, respectively.

Cash and cash equivalents

The Fellowship considers highly liquid assets with a maturity of ninety days or less to be cash equivalents.

Investments

Investments are recorded at fair value based on publicly quoted prices. Realized and unrealized gains and losses on the investments are recognized as revenue in the statement of activities.

Contributions receivable

All contributions are expected to be collected during 2021.

Allowance for doubtful accounts

The Fellowship deems all receivables to be collectible and, accordingly, does not have an allowance for doubtful accounts. Such estimate is based on management's experience, the aging of the receivables, subsequent receipts and current economic conditions.

Leasehold improvements, equipment and website

Expenditures for leasehold improvements, equipment and website above a nominal value and having an estimated useful life of one year or longer are capitalized. Leasehold improvements, equipment and website are recorded at cost. Amortization and depreciation are provided on the straight-line method over a 5-year period, which is the estimated useful life of the assets.

Comparative financial information

The financial statements include certain prior-year summarized comparative information in total but not by net asset class and functional classification. Such information does not include sufficient detail to constitute a presentation in conformity with accounting principles generally accepted in the United States of America. Accordingly, such information should be read in conjunction with the Fellon ship's financial statements for the year ended Detember 31,72019, from which the stammarized information was defined.

Notes to Financial Statements (continued) December 31, 2020

Note 2 – Summary of significant accounting policies (continued)

Concentrations of credit risk

The Fellowship's financial instruments that are potentially exposed to concentrations of credit risk consist primarily of cash and cash equivalents, investments and receivables. The Fellowship places its cash and cash equivalents with what it believes to be quality financial institutions and the Fellowship has not experienced any losses in such accounts to date. Investments are exposed to various risks such as interest rate, market volatility, liquidity and credit risk. Due to the uncertainty related to the foregoing risks, it is reasonably possible that changes in these risks could materially affect the fair value of the investments reported in the statement of financial position at December 31, 2020. The Fellowship routinely assesses the financial strength of its holdings in its investment portfolio. The Fellowship deems its receivables to be collectible. Accordingly, the Fellowship believes no significant concentrations of credit risk exist with respect to its cash and cash equivalents, investments and contributions receivable.

Functional allocation expenses

The costs of providing the various programs and other activities have been summarized on a functional basis in the statement of functional expenses. Accordingly, certain common costs have been allocated among the programs and supporting services benefited.

Use of estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the amounts reported in the financial statements. Actual results could differ from these estimates.

Risks and uncertainties

On March 13, 2020, a national emergency was declared due to the extraordinary circumstances resulting from the coronavirus. The economic impact of the coronavirus on the Fellowship's future financial operations is not readily determinable.

Subsequent events

The Fellowship has evaluated events and transactions for potential recognition or disclosure through July 21, 2021, which is the date the financial statements were available to be issued.

Notes to Financial Statements (continued) December 31, 2020

Note 3 – Liquidity and availability of financial assets

As of December 31, 2020 and December 31, 2019, financial assets and liquidity resources available within one year for general expenditure are as follows:

	2020	2019
Cash and cash equivalents	\$ 735,245	\$ 1,108,665
Investments, at fair value	14,527,029	12,097,389
Contributions receivable	172,196	133,859
Sub-total	15,434,470	13,339,913
Less: assets with donor restrictions	1,205,826	1,105,826
Total financial assets	\$ 14,228,644	\$ 12,234,087

Note 4 – Investments

At December 31, 2020 and December 31, 2019, investments consist of the following:

	20)20	20	19
	Cost	Fair Value	Cost	Fair Value
Money market	\$ 900,683	\$ 900,683	\$ 192,884	\$ 192,884
Mutual funds				
Fixed income	7,223,605	7,574,737	6,720,697	6,974,777
Equities	4,923,320	6,013,313	3,977,113	4,891,893
Certificate of Deposit	38,296	38,296	37,835	37,835
Total	<u>\$13,085,904</u>	\$14,527,029	\$10,928,529	\$12,097,389

The following is a summary of investment revenue:

	2020	2019
Interest and dividend revenue	\$ 278,177	\$ 301,880
Realized gain on disposition of investments	639,891	75,884
Change in fair value of investments	272,265	1,152,792
Investment fees	<u>(49,258)</u>	(54,057)
Total investment return	\$1,141,075	\$1,476,499

Fair value measurements

Fair value refers to the price that would be received to sell an asset in an orderly transaction between market participants at the measurement date. The fair value hierarchy gives the highest priority to quoted market prices in active markets (Level 1) and the lowest priority to unobservable data (Level 3). Fair value measurements are required to be separately disclosed by level within the fair value hierarchy. The three levels of inputs used to measure fair value are as follows:

the fair value hierarchy. The three levels of inputs used to measure fair value are as follows.

Notes to Financial Statements (continued) December 31, 2020

Note 4 – Investments (continued)

Fair value measurements (continued)

- Level 1 Quoted prices in active markets for identical assets.
- Lével 2 Observable inputs other than Level 1 prices, such as quoted prices of similar assets; quoted prices in markets with insufficient volume or infrequent transactions (less active markets).
- Level 3 Unobservable inputs to the valuation methodology that are significant to the measurement of fair value of the assets.

At December 31, 2020 and December 31, 2019, the Fellowship's investments are deemed to be Level 1 investments.

Note 5 – Endowment

The Fellowship's endowment consists of various funds established for a variety of purposes. Its endowment includes both donor-restricted endowment funds and funds designated by the Fellowship. As required by accounting principles generally accepted in the United States of America, net assets associated with endowment funds, including funds designated by the Fellowship to function as endowments, are classified and reported based on the existence or absence of donor-imposed restrictions.

Interpretation of relevant law

Under New York State's Prudent Management of Institutional Funds Act (NYPMIFA), the Fellowship is required to act prudently when making decisions to spend or accumulate donor restricted endowment assets and in doing so to consider a number of factors including the duration and preservation of its donor restricted endowment funds (as outlined below). The Fellowship preserves the fair value of the original gift as the gift date of the donor-restricted endowment funds absent explicit donor stipulations to the contrary. The Fellowship considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds:

- (1) The duration and preservation of the fund
- (2) The purposes of the Fellowship and the donor-restricted endowment fund
- (3) General economic conditions
- (4) The possible effect of inflation and deflation
- (5) The expected total return from income and the appreciation of investments
- (6) Other resources of the Fellowship.
- (7) If appropriate and circumstances warrant, alternatives to endowment expenditures
- (8) The investment policies of the Fellowship.

Notes to Financial Statements (continued) December 31, 2020

Note 5 – Endowment (continued)

Strategies Employed for Achieving Objectives

The Fellowship's primary investment objectives of the endowment shall be to maximize returns, conserve assets, and maintain diversification.

For 2020, the Fellowship spent \$52,601 on its public interest internship program, the Morgan McKinzie Endowment. The Endowment allows each fellow to perform a public service internship and receive a stipend in their summer after ninth grade.

At December 31, 2020, the Fellowship's net asset composition by type of fund is as follows:

	With Dor		With Donor	
	<u>Restri</u>	<u>ctions</u>	Restrictions	Total
Donor-restricted				
endowment funds	\$	-	\$1,205,826	\$1,205,826
Board-designated				
endowment fund	4,15	<u>6,166</u>		4,156,166
Total funds	<u>\$4,15</u>	6,166	\$1,205,826	\$5,361,992

At December 31, 2020, assets with donor restrictions consisted of \$1,105,826 of assets with perpetual donor restrictions and \$100,000 of assets with temporary donor restrictions.

Note 6 - Leasehold improvements, equipment and website

The following is a summary of leasehold improvements, equipment and website at December 31, 2020 and 2019:

	2020	2019
Leasehold improvements Equipment and website Total	\$ 297,224 <u>193,497</u> 490,721	\$ 266,861
Less: accumulated depreciation and amortization	203,119	<u>158,954</u>
Net leasehold improvements, equipment and website	\$ 287,602	\$ 301,404

Notes to Financial Statements (continued) December 31, 2020

Note 7 – Commitments

During 2019, the Fellowship extended and modified its existing lease for office space which now expires September 31, 2029. The annual base rent was \$288,528 in the first year of the agreement, increasing to \$380,237 in the final year of the agreement. As of December 31, 2020, the required annual minimum payments under the lease are as follows:

Year	_Amount	
2021	\$ 301,161	
2022	305,661	
2023	313,302	
2024	327,146	
2025	347,347	
2026 and thereafter	_1,095,016	
Total	\$ 2,689,633	

Rent expense in connection with these agreements, which is recorded as occupancy in the statement of functional expenses, totaled \$295,762 and \$224,543 for 2020 and 2019, respectively.

Note 8 – Retirement plan

The Fellowship has a 403(b) plan whereby eligible employees can contribute up to 20% of their gross wages within Internal Revenue Code limits and the Fellowship will contribute 6% of an eligible employee's salary after his/her second and third year of service, 7% after the fourth and fifth year of service and 9% for those with six or more years of service. Plan contributions are fully vested and non-forfeitable. The Fellowship's contribution for the years ended December 31, 2020 and 2019 totaled \$96,253 and \$82,938, respectively.

Note 9 - Paycheck protection program loan payable

During 2020, the Fellowship applied for and received \$313,700 under the Paycheck Protection Program ("PPP") which is a business loan program established under the Coronavirus Aid, Relief, and Economic Security Act. The Fellowship has elected to record the proceeds as a liability until the loan is, in part or wholly, forgiven and the Fellowship is legally released. The Fellowship has spent all of the proceeds in accordance with the terms of PPP loan program and received loan forgiveness in its entirety during May 2021.

Note 10 - Tax status

The Fellowship is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code. In addition, the Fellowship has been determined by the Internal Revenue Service to be a publicly supported organization, and not a private foundation under the meaning of Section 509(a)(1) of the Code. The Fellowship qualifies for the maximum charitable contribution deductions for Anors