DLN: 93493321042320

2019

OMB No. 1545-0047

Department of the Treasury

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

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

 \blacktriangleright Go to $\underline{\textit{www.irs.gov/Form990}}$ for instructions and the latest information.

Open to Public Inspection

| | | a 2019 c | | ning 01-01-2019 , and ending 12- | 31-2010 | | | | | |
|--------------------------------|----------|--------------------------|---|---|-----------|----------|----------------------|-----------|--------------------|----------|
| | | pplicable: | C Name of organization | ming of of 2015, and chang 12 | <u> </u> | | D Employ | er iden | tification numb | er |
| | | change | MDRC | | | | | | | |
| □ Na | me ch | ange | % JESUS AMADEO | | | | 23-737 | 94/3 | | |
| | tial ret | | Doing business as | | | | | | | |
| | | n/terminated d return | | ail is not delivered to street address) Room/ | suite | | E Telephoi | ne numb | er | |
| | | on pending | 200 Vocay Street 22rd Floor | an is not delivered to stroot address, Indon, | ource | | (212) 5 | 32-320 | 10 | |
| | | | City or town, state or province, cour | ntry, and ZIP or foreign postal code | | | () | | | |
| | | | NEW YORK, NY 102812103 | | | | G Gross re | ceipts \$ | 110,285,033 | |
| | | | F Name and address of principa | l officer: | H(a) | Is this | a group re | turn fo | <u> </u> | |
| | | | VIRGINIA KNOX AS OF 101519 200 Vesey Street 23rd Floor | | ` ′ | | linates? | | □ _{Yes} I | ✓No |
| | | | NEW YORK, NY 102812103 | | H(b) | Are all | subordina | tes | ☐Yes | |
| [Ta: | x-exer | npt status: | ✓ 501(c)(3) | (insert no.) 4947(a)(1) or 527 | | include | | list (se | e instructions | |
| ı w | ehsit | e: ww | w.mdrc.org | (misercine.) | H(c) | | exemption | • | | ' |
| • | 00010 | | a. c.o.g | | | | • | | | |
| K Forr | n of o | rganization | : 🗹 Corporation 🗌 Trust 🔲 Asso | ciation ☐ Other ▶ | L Year | of forma | tion: 1 974 | M Stat | e of legal domici | le: DE |
| | | | | | | | | | | |
| Pa | art I | Sum | mary | | | | | | | |
| | | | scribe the organization's mission o | r most significant activities: ling of low-income people. Through our | rocoarch | W0.50 | ak ta anha | aca tha | offoctivonoss | of coci- |
| eu | | | programs that affect the poor. | sing of low-income people. Through our | research, | , we se | ek to enna | nce the | enectiveness | OI SOCIA |
| <u>≃</u> | - | | | | | | | | | |
| Ĕ | - | | | | | | | | | |
| 8 | , | Chock thi | is boy • D if the organization dis | continued its operations or disposed of | more the | n 25% | of its not a | ccotc | | |
| 5 | | | | ig body (Part VI, line 1a) | | | or its fiet e | 33613. | : | 16 |
| νo yr | 4 | Number o | of independent voting members of | the governing body (Part VI, line 1b) | | | | 4 | , | 16 |
| 1 16 | l | | | lendar year 2019 (Part V, line 2a) | | | | 5 | ; | 354 |
| Activities & Governance | 6 | Total nun | nber of volunteers (estimate if neo | essary) | | | | 6 | i | 16 |
| Ř | 7a | Total unr | elated business revenue from Part | VIII, column (C), line 12 | | | | 7 | a | 82,159 |
| | Ь | Net unrel | lated business taxable income fror | n Form 990-T, line 39 | | | | 7 | b | |
| | | | | · · | | | r Year | | Current Ye | ar |
| | 8 | Contribut | tions and grants (Part VIII, line 1h) | | | | 65,542, | 515 | 67, | 945,66 |
| Rəvenue | | | - , , , , , | | | | 1,626, | | | 508,60 |
| ōΛċ | l | - | ent income (Part VIII, column (A), I | | | | 2,267, | | * | 213,94 |
| α | | | venue (Part VIII, column (A), lines | , , , | | | <u> </u> | 0 | <u> </u> | |
| | 12 | Total rev | enue—add lines 8 through 11 (mu | st equal Part VIII, column (A), line 12) | | | 69,436, | 374 | 71, | 668,21 |
| | 13 | Grants ar | nd similar amounts paid (Part IX, c | olumn (A), lines 1–3) | | | 6,654, | 796 | 3, | 843,02 |
| | 14 | Benefits | paid to or for members (Part IX, co | olumn (A), line 4) | | | | 0 | | |
| ç | 15 | Salaries, | other compensation, employee be | nefits (Part IX, column (A), lines 5-10) | | | 36,010, | 377 | 37, | 414,580 |
| ıse | 16a | Professio | onal fundraising fees (Part IX, colu | nn (A), line 11e) | | | | 0 | | |
| Expenses | l | | raising expenses (Part IX, column (D), | | | | | | | |
| Щ | 17 | Other exp | penses (Part IX, column (A), lines | 11a-11d, 11f-24e) | | | 29,696, | 759 | 31, | 830,250 |
| | 18 | Total exp | penses. Add lines 13–17 (must equ | ıal Part IX, column (A), line 25) | | | 72,361, | 932 | 73, | 087,85 |
| | 19 | Revenue | less expenses. Subtract line 18 fro | om line 12 | | | -2,925, | 558 | -1, | 419,639 |
| S & | | | | | Beg | inning o | of Current Y | 'ear | End of Yea | r |
| and and | | | | | | | | | | |
| Net Assets or Fund Balances | l | | ets (Part X, line 16) | | | | 101,779, | | | 554,34 |
| 2 E | l | | vilities (Part X, line 26) | | | | 26,403, | 556 | | 912,35 |
| Zű | 22 | Net asset | ts or fund balances. Subtract line 2 | 21 from line 20 | | | 75,376, | 423 | 80, | 641,98 |
| | rt II | | ature Block | in ad this wateron in all dina a sasanan wi | | | | | | |
| | | | | ined this return, including accompanyir . Declaration of preparer (other than of | | | | | | |
| any k | nowle | edge. | * | | | | | | | |
| | | ***** | * | | | 2020 |)-11-13 | | | |
| Sign | | Signati | ure of officer | | | Date | | | | |
| Here | | JESUS | AMADEO Sr. VP & CFO | | | | | | | |
| | | | r print name and title | | | | | | | |
| | | P | rint/Type preparer's name | Preparer's signature | Date | - C' | | PTIN | | |
| Paid | t | | | | | | ck LJ if employed | P007414 | 190 | |
| Pre | | er 🕝 | irm's name FGRANT THORNTON LLF | | | | 's EIN ▶ | | | |
| | On | <u> </u> | irm's address ► 757 THIRD AVENUE 3R | D FLOOR | | Phor | ne no. (212) | 599-010 |)n | |
| | | , | | | | LIIOI | ic iiu. (212) | JJ9-016 | ,,, | |
| | | | NEW YORK, NY 10017 | | | | | | | |
| May t | he IR | S discuss | this return with the preparer show | vn above? (see instructions) | | | | ✓ | Yes 🗆 No | |

| Form | 990 (2019) | | | | | Page 2 | | | | | | |
|--|--|---|--|---|--|---|--|--|--|--|--|--|
| Pa | rt III Statement | of Program Servi | e Accomplis | hments | | | | | | | | |
| | Check if Sched | dule O contains a resp | onse or note to a | any line in this Part III . | | 🗸 | | | | | | |
| 1 | Briefly describe the o | rganization's mission: | | | | | | | | | | |
| comr suffic highe interi pract | nitted to finding solution iency to improving pub est research standards, mediary, bringing toge itioners - all with the g | ons to some of the most plic education and colle and provide technical ther public and private loal of improving the li | st difficult proble ege graduation r assistance to bu funders to test ves of low-incon | ems facing the nation - f ates. We design promisi uild better programs and new policy-relevant idea ne individuals, families, | rganization that is driven by its rom reducing poverty and bols in new interventions, evaluate deliver effective interventions as, and communicate what we and children. MDRC is dedicate unication of our findings, we se | tering economic self- existing programs using the at scale. We work as an learn to policymakers and d to learning what works to | | | | | | |
| 2 | Did the organization the prior Form 990 or | | ant program ser | vices during the year wh | ich were not listed on | □Yes ☑No | | | | | | |
| | ' | se new services on Sc | hedule O | | | Li res Li No | | | | | | |
| 3 | • | | | changes in how it condu | cts any program | | | | | | | |
| _ | Did the organization cease conducting, or make significant changes in how it conducts, any program services? | | | | | | | | | | | |
| | If "Yes," describe these changes on Schedule O. | | | | | | | | | | | |
| 4 | Describe the organization 501(c)(3) and | ation's program service | accomplishmer | to report the amount of | argest program services, as me f grants and allocations to othe | | | | | | | |
| | (Code: |) (Expenses \$ | 18,147,427 | including grants of \$ | 1,180,505) (Revenue \$ | 593,509) | | | | | | |
| | See Additional Data |) (Expended ¢ | | | -// (| | | | | | | |
| 4b | (Code: |) (Expenses \$ | 10,245,836 | including grants of \$ | 850,304) (Revenue \$ | 392,846) | | | | | | |
| | See Additional Data | | | | | | | | | | | |
| 4c | (Code: |) (Expenses \$ | 9,113,811 | including grants of \$ | 1,098,931) (Revenue \$ | 169,243) | | | | | | |
| | See Additional Data | | | | | | | | | | | |
| | See Additional Data | Table | | | | | | | | | | |
| 4d | Other program service | ces (Describe in Sched | ule O.) | | | | | | | | | |
| | (Expenses \$ | 21,427,721 inc | luding grants of | \$ 713,2 | 81) (Revenue \$ | 353,008) | | | | | | |
| 4e | Total program serv | rice expenses ► | 58,934,7 | 95 | | | | | | | | |

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

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

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

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| orm 9 | 990 (2019) | | | Page 4 |
|------------|--|---------------|-----|---------------|
| Part | Checklist of Required Schedules (continued) | | | |
| | | | Yes | No |
| | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | No |
| | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> | 23 | Yes | |
| | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a | 24a | | No |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| | 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 | | No |
| | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> | 25b | | No |
| | Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II | 26 | | No |
| | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L,</i> Part III | 27 | | No |
| | 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): | | | |
| | A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV | 28a | | No |
| b | A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV | 28b | | No |
| С | A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV | 28c | | No |
| 9 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | | No |
| | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M | 30 | | No |
| 1 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | No |
| | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II | 32 | | No |
| | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> | 33 | | No |
| | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 | 34 | | No |
| 5a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | No |
| | If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | |
| | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> | 36 | | No |
| | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | No |
| | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O | 38 | Yes | |
| Par | Statements Regarding Other IRS Filings and Tax Compliance | | | |
| | Check if Schedule O contains a response or note to any line in this Part V | ; | | <u> Ш</u> |
| 1 a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 94 | | Yes | No |

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

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

1b

0

1c

Yes

| Par | Statements Regarding Other IRS Filings and Tax Compliance (continued) | | | |
|---------|--|--------------------|-----|----|
| 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 | 354 | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | 2b | Yes | |
| За | Did the organization have unrelated business gross income of \$1,000 or more during the year? | За | Yes | |
| b | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O | . 3b | Yes | |
| | At any time during the calendar year, did the organization have an interest in, or a signature or other authority financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: | | | No |
| b | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FB | AR). | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | No |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | No |
| С | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | 5c | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? | ation 6a | | No |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gift: not tax deductible? | s were 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | |
| | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and provided to the payor? | services 7a | | No |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required Form 8282? | to file 7c | | No |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | | | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | No |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . | . 7f | | No |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 required? | as 7g | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a 1098-C? | Form 7h | | |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? | . 8 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | |
| а | Did the sponsoring organization make any taxable distributions under section 4966? | . 9a | | |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter: | | | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 10a | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b | | | |
| 11 | Section 501(c)(12) organizations. Enter: | | | |
| а | Gross income from members or shareholders | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041 | ? 12 a | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year. | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | |
| | Is the organization licensed to issue qualified health plans in more than one state? | · 13a | | |
| | 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 | | | |
| | Enter the amount of reserves on hand | | | , |
| | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | No |
| ь 15 | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or | 14b | - | |
| | parachute payment(s) during the year? | . 15 | | No |
| 16 | Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. | 16 | | No |

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|----------|---|------------|------------|---------------|
| Par | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "Na 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI | o" respo | onse to i | lines |
| Se | ction A. Governing Body and Management | | | |
| 4 - | | | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing | - | | |
| | body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent 1b 16 | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | 2 | | No |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . | 3 | | No |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . | 4 | | No |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? • | 5 | | No |
| 6 | Did the organization have members or stockholders? | 6 | | No |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? | 7a | | No |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | 7b | | No |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | _ |
| а | The governing body? | 8a | Yes | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | Yes | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i> | 9 | | No |
| Se | ction B. Policies (This Section B requests information about policies not required by the Internal Revenu | e Code | | |
| 10- | Did the annualization have least should be about the second as a second | 10- | Yes | No |
| | Did the organization have local chapters, branches, or affiliates? 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? | 10a 10b | | No |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the | | ., | |
| | form? | 11a | Yes | |
| | | 12a | Yes | |
| | Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> | IZA | 165 | |
| | conflicts? | 12b | Yes | |
| | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done | 12c | Yes | |
| 13 | Did the organization have a written whistleblower policy? | 13 | Yes | |
| 14 15 | Did the organization have a written document retention and destruction policy? | 14 | Yes | |
| _ | persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | Vac | |
| a b | The organization's CEO, Executive Director, or top management official | 15a 15b | Yes Yes | |
| D | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). | 120 | res | |
| 165 | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a | | | |
| | taxable entity during the year? | 16a | | No |
| b | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? | 16b | | |
| Se | ction C. Disclosure | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed▶ | | | |
| 18 | Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s | | | |
| | only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Upon request Other (explain in Schedule O) | | | |
| 19 | Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. | | | |
| 20 | State the name, address, and telephone number of the person who possesses the organization's books and records: >JESUS AMADEO 200 VESEY STREET NEW YORK, NY 102812103 (212) 532-3200 | | | |
| | | | | |

Name and title

Part VII

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

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

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

 \checkmark

(F)

Estimated

amount of other

compensation

from the

Reportable

compensation

from related

organizations

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

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount

of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the

organization and any related organizations.

• List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the

organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (A) (C) (B) (D) (E)

Position (do not check more

than one box, unless person

is both an officer and a

director/trustee)

Reportable

compensation

from the

organization

Average

hours per

week (list

any hours

| for related | | | ,, | | | | | (14/ 2/1000 | (1)/ 2/1000 | organization and |
|---------------------------|---|-----------------------------------|-----------------------|---------|--------------|------------------------------|--------|---------------------|---------------------|--|
| | for related organizations below dotted line) | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | (W-2/1099- MISC) | (W-2/1099- MISC) | organization and related organizations |
| See Additional Data Table | | | | | | | | | | |
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Decision Information Resources Inc,

Teachers College Columbia Universi, 525 West 120th Street Box 21 NEW YORK, NY 10027

compensation from the organization ▶ 12

3900 Exxex Lane - Suite 900 HOUSTON, TX 77098

Part VII

| (A) Name and title | Ave hour week any l | rage s per c (list nours | than o | ne bo | οχ, ι n of | t che inles ficer | and a | son | (D Repor comper from organiz | table sation the zation | (E) Reportable compensatior from related organizations | , | (F) Estima mount o compens from | ated f other sation the |
|---|------------------------------|-----------------------------------|-----------------------------------|-----------------------|---------------|-------------------------|---------------------------------|--------|--|----------------------------------|--|--------|---|----------------------------------|
| | organi below | elated zations dotted e) | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | (W-2/: MIS | | (W-2/1099- MISC) | 0 | rganizati relati organiza | ed |
| See Additional Data Table | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
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| | | | | | | | | | | | | + | | |
| 4b Cob Total | | | | | | | <u> </u> | | | | | + | | |
| 1b Sub-Total c Total from continuation | | | | | | | • | | | | | | | |
| d Total (add lines 1b and | l 1c) | <u></u> | • | <u></u> | | | > | | 3,23 | 8,093 | | 0 | | 596,450 |
| 2 Total number of individ of reportable compensa | | | | e liste | ed al | bove | e) who | rece | eived more | than \$1 | 00,000 | | | |
| | | | | | | | | | | | | | Yes | No No |
| 3 Did the organization lis | | | | ee, ke | ey e | mplo | oyee, d | or hi | ghest comp | pensated | employee on | | | |
| line 1a? If "Yes," compi | | | | • | • | • | | • | | | | 3 | Yes | |
| 4 For any individual listed organization and relate | | | | | | | | | | | n the | | | |
| individual | | | | • | | • | | | | | | 4 | Yes | |
| 5 Did any person listed o services rendered to th | | | | | | | | | | on or indi | vidual for | | | |
| Section B. Independe | | compi | | | 3 70 | ,, 50 | cri per | 3011 | | | | 5 | | No |
| Complete this table for from the organization. | your five highest com | | | | | | | | | | | mpensa | ation | |
| | (A) Name and busin | | | , | | | | | | | (B) ription of services | | (C Compen | |
| mathematica policy research inc, 600 Alexander Park | Name and busin | ess addre | 33 | | | | | | RI | | SUBCONTRACT | | | ,326,405 |
| PRINCETON, NJ 08543 | | | | | | | | | | CEARCIL | CURCONTRACT | | | 022 274 |
| abt associates, 10 Fawcett Street CAMBRIDGE, MA 02138 | | | | | | | | | l ^{Ri} | ESEARCH S | SUBCONTRACT | | 2, | ,822,271 |
| MEF Associates, | | | | | | | | | RI | ESEARCH S | SUBCONTRACT | | 1 | ,295,953 |
| Canal Center Plaza ALEXANDRIA, VA 22314 | | | | | | | | | | | | | | 200.5:- |
| Decision Information Resources In | r | | | | | | | | IRI | -SEARCH 9 | SUBCONTRACT | | | 902 216 |

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

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

902,216

631,226

RESEARCH SUBCONTRACT

RESEARCH SUBCONTRACT

| orm 9 Part | | Statement | of E | Pavanua | | | | | | | Page 9 |
|--|------------|--|-------|---------------------------------------|------------|--------------------|----------|----------------------|--|---|--|
| Part | VIII | | | | respo | onse or note to a | ıny lin | e in this Part VIII | | | 🗆 |
| | | | | | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512 - 514 |
| 0 | 1 a | Federated campa | igns | s | 1 a | | | | revenue | | 312 - 314 |
| ants | ŀ | • Membership dues | 5. | . [| 1 b | | _ | | | | |
| , G | (| : Fundraising even | ts . | [| 1c | | _ | | | | |
| ifts ar / | | l Related organiza | | | 1d | | _ | | | | |
| is, Gimil | | Government grantsAll other contribution | | Ļ | 1e | 45,912,513 | <u>3</u> | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | ľ | and similar amounts above | | | 1 f | 22,033,15 | 1 | | | | |
| age 4 | ٥ | Noncash contributio | ns in | cluded in | | | | | | | |
| ont | ١. | h Total. Add lines | 1 - 1 | f [| 1 g | | _ | | | | |
| <u> </u> | | Total. Add lilles | La-I | | • | Business Code | . T | 67,945,664 | | | |
| | 2a | MANAGEMENT FEES | | | | 90009 | | 1,508,606 | 1,508,606 | | |
| e E | | | | | | 90009 | ,,, | | | | |
| Program Service Revenue | b | | | | | | | | | | |
| Se B | c | | | | | | | | | | |
| Şer vi | | - | | | | | | | | | |
| E C | d | | | | | | | | | | |
| ogra | е | | | | | | | | | | |
| ₹ | f | All other program | serv | rice revenue. | | | | | | | |
| | | Total. Add lines 2 | | | | 1,508,60 | 06 | | | | |
| | | Investment income | | | | nterest, and other | | 2,018,759 | | 82,159 | 1,936,600 |
| | | imilar amounts) . Income from invest | | · · · · · · · · · · · · · · · · · · · | | ond proceeds | ▶ | -,, | | 12,211 | _,,,,,,, |
| | 5 F | Royalties | | | | | ▶[| (| | | |
| | | | | (i) Rea | al | (ii) Personal | | | | | |
| | 6a | Gross rents | 6a | | | | | | | | |
| | b | Less: rental expenses | 6b | | | | | | | | |
| | С | Rental income | | | | | | | | | |
| | d | or (loss) Net rental income | 6c | | | | 0 | (| , | | |
| | | Tree remaining | | (i) Securi | | (ii) Other | <u> </u> | | | | |
| | 7a | Gross amount from sales of | 7a | 38.8 | 312,004 | 1 | | | | | |
| | | assets other than inventory | | 30,0 | 712,00 | | | | | | |
| | b | Less: cost or | 7b | 38 6 | 516,821 | | | | | | |
| | | other basis and sales expenses | | 30,0 | | | | | | | |
| | С | Gain or (loss) | 7с | 1 | 195,183 | 3 | | | | | |
| | | Net gain or (loss) | | | | | <u> </u> | 195,183 | | | 195,183 |
| e n | 8a | Gross income from fu (not including \$ | | of | | | | | | | |
| Other Revenue | | contributions reported See Part IV, line 18 | | line 1c). | 8a | | 0 | | | | |
| Re | b | Less: direct expen | ses | | 8b | | 0 | | | | |
| her | C | Net income or (los | s) fr | om fundrais | ing ev | ents | | C | | | |
| | 9a | Gross income from | gam | ing activities. | | | | | | | |
| | | See Part IV, line 19 | | | 9a | | 0 | | | | |
| | | Less: direct expen Net income or (los | | | 9b | iec . | 0 | C | | | |
| | Ĭ | Tree meanine or (100 | ٠, ١١ | om gaming | | les ▶ | | | | | |
| | 10a | Gross sales of inve returns and allowa | nto | ry, less | 10a | | 0 | | | | |
| | b | Less: cost of good | s so | ld | 10b | | 0 | | | | |
| | c | Net income or (los | | | invent | ory ► | | (| 1 | | |
| | 11 | Miscellaneo | us R | evenue | | Business Code | е | | | | |
| | | | | | | | | | | | |
| | b | | | | | | + | | | | |
| | | | | | | | | | | | |
| | C | | | | | | \top | | | | |
| | | | | | | | | | | | |
| | | All other revenue | | | | | | | | | |
| | | Total. Add lines 1 | | | | • | | C | | | |
| | 12 | Total revenue. S | ee ir | istructions | • • | • • • • | • | 71,668,212 | 1,508,606 | 82,159 | 2,131,783 |

| | Statement of Europianal Expanses | | | | Page 10 |
|----|---|----------------------|------------------------------|---|--------------------------------|
| Р | art IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must co | omplete all columns. | All other organizatio | ns must complete colu | mn (A). |
| | Check if Schedule O contains a response or note to an | | = | | |
| | not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 | Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 | 3,843,021 | 3,843,021 | | |
| 2 | Grants and other assistance to domestic individuals. See Part IV, line 22 | 0 | | | |
| 3 | Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16. | 0 | | | |
| 4 | Benefits paid to or for members | 0 | | | |
| 5 | Compensation of current officers, directors, trustees, and key employees | 2,843,332 | 2,139,518 | 700,955 | 2,859 |
| 6 | Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$ | 0 | | | |
| 7 | Other salaries and wages | 26,181,336 | 19,700,612 | 6,454,401 | 26,323 |
| 8 | Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) | 1,597,993 | 1,198,176 | 398,038 | 1,779 |
| 9 | Other employee benefits | 4,655,958 | 3,491,039 | 1,159,736 | 5,183 |
| 10 | Payroll taxes | 2,135,961 | 1,601,544 | 532,039 | 2,378 |
| 11 | Fees for services (non-employees): | | | | |
| a | Management | 0 | | | |
| ŀ | Legal | 400,245 | 36,066 | 364,179 | |
| • | Accounting | 536,385 | | 536,385 | _ |
| (| Lobbying | 0 | | | |
| • | Professional fundraising services. See Part IV, line 17 | 0 | | | |
| f | Investment management fees | 369,404 | | 369,404 | |
| g | Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) | 0 | | | |
| 12 | Advertising and promotion | 0 | | | |
| 13 | Office expenses | 128,388 | 101,829 | 26,559 | |
| 14 | Information technology | 3,082,098 | 2,495,855 | 586,573 | -330 |
| 15 | Royalties | 0 | | | |
| 16 | Occupancy | 3,668,792 | 2,902,942 | 766,490 | -640 |
| 17 | Travel | 942,422 | 863,185 | 79,237 | |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials . | 0 | | | |
| 19 | Conferences, conventions, and meetings | 99,084 | 65,581 | 33,503 | |
| | Interest | 2,580 | | 2,580 | |
| 21 | Payments to affiliates | 0 | | | |
| 22 | Depreciation, depletion, and amortization | 965,386 | 726,424 | 237,992 | 970 |
| 23 | Insurance | 367,704 | 276,685 | 90,649 | 370 |
| 24 | Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| | a SURVEY EXPENSES | 2,726,831 | 2,726,831 | | |
| | b SUBCONTRACTORS AND PROF. FEES | 16,624,566 | 15,333,754 | 1,284,216 | 6,596 |
| | c PARTICIPANT INCENTIVES | 127,105 | 127,105 | | |
| | d ALL OTHER EXPENSES | 1,789,260 | 1,304,628 | 484,335 | 297 |
| | e All other expenses | | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 73,087,851 | 58,934,795 | 14,107,271 | 45,785 |
| 26 | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. | | | | |
| | Check here ▶ ☐ if following SOP 98-2 (ASC 958-720). | | | | |

Form 990 (2019)

Assets

11

12

13

14

15

16

17

18

19

20

21

23

24

25

26

27

28

31

32

33

Liabilities 22

Fund Balances

ō 29

Assets 30 Page **11**

,171

0

0

0

1,130,699

8,734,549

49,341,495

12.184.790

2,407,940

112,554,344

10,212,247

12.320.784

0

0

0

0

0

0

0

9,379,326

31.912.357

56,017,118

24,624,869

80,641,987

112,554,344

Form 990 (2019)

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852,690

8,961,002

58,557,436

9,930,129

2,726,452

8,151,512

10.037.026

101,779,979

0

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0 21

0 22

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0 24

8,215,018

26.403.556

49,295,971

26,080,452

75,376,423

101,779,979

4

6 0

7

10c

11

12 0 13

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| Check if Schedule O contains a response or note to any line in t | his Part IX . | • |
|--|---------------|---|
| | | |

Accounts receivable, net

Notes and loans receivable, net

Inventories for sale or use Prepaid expenses and deferred charges .

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

Investments—publicly traded securities .

Other assets. See Part IV, line 11 . . .

Accounts payable and accrued expenses .

Tax-exempt bond liabilities . . .

Investments—other securities. See Part IV, line 11 .

Investments—program-related. See Part IV, line 11 .

Total assets. Add lines 1 through 15 (must equal line 34) . .

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

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

Organizations that follow FASB ASC 958, check here <a> \square and

Unsecured notes and loans payable to unrelated third parties .

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

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds .

Total liabilities and net assets/fund balances .

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

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

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

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

Retained earnings, endowment, accumulated income, or other funds

basis. Complete Part VI of Schedule D

b Less: accumulated depreciation

Intangible assets . . .

Deferred revenue . . .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

Grants payable .

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

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).

10a

10b

| | | Beginning of year | | End of year |
|---|--|-------------------|---|-------------|
| 1 | Cash-non-interest-bearing | 2,864,167 | 1 | 1,291,209 |
| 2 | Savings and temporary cash investments | 1.277.572 | 2 | 21.778.491 |

12,744,481

4,009,932

| 1 Cash-non-interest-bearing | 2,864,167 | 1 | 1,291 |
|--|------------|---|--------|
| 2 Savings and temporary cash investments | 1,277,572 | 2 | 21,778 |
| 3 Pledges and grants receivable, net | 16,610,531 | 3 | 15,685 |

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

3a Yes

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

3b Yes

Yes | Yes |

Additional Data

Software ID:

Software Version:

EIN: 23-7379473

Name: MDRC

Form 990 (2019)

Form 990, Part III, Line 4a: Family Well-Being and Childrens Development Children who grow up in poverty face much greater risks of academic failure, poor health, and emotional distress and, as adults, are more likely to be unemployed and poor. MDRCs studies on children and families are providing a new generation of reliable evidence for policymakers about strategies that benefit the social, emotional, and cognitive development of low-income children - some by improving the life prospects of parents and others by working directly with children. For more than two decades, MDRC has been a leader in an expanding field of research that examines how children are affected by welfare reform and other social policies that are primarily designed to affect the employment and income status of their parents. MDRC is studying several initiatives that seek to benefit children by building healthier family relationships, including federal Responsible Fatherhood programs. MDRC is the lead evaluator of the federal governments \$1.5 billion investment in home visiting programs, which provide preventive services to families with young children to prevent child maltreatment, improve maternal and child health outcomes, and increase school readiness. Our child care and early education studies aim to deepen policymakers understanding of the effects of early care environments, including Head Start. We have been a leader in developing and testing programs that bolster the emotional and behavioral development of preschoolers and the math skills of preschool children and kindergartners. Were leading the Expanding Childrens Early Learning (ExCEL) Network, a collaboration of local officials, preschool providers, and researchers as active participants in innovation and evidence-building.

Youth Development, Criminal Justice, and Employment MDRC was originally established to study programs for the "hard-to-employ", Americans who face serious obstacles to finding and keeping steady work. Our very first project, the National Supported Work Demonstration, tested the impact of paid work experience for long-term welfare recipients, ex-offenders, high school dropouts, and substance abusers, and it is still regarded as one of the most comprehensive sources of evidence on employment

Form 990, Part III, Line 4b:

recipients, ex-offenders, high school dropouts, and substance abusers, and it is still regarded as one of the most comprehensive sources of evidence on employment programs targeted to these groups. Today we are testing tailored interventions for specific hard-to-employ groups - young people disconnected from the worlds of school and work, young people and adults at risk of entering the criminal justice system, ex-prisoners reentering their communities, long-term welfare recipients, and people with work-limiting disabilities. The findings of our new studies as they emerge are intended to expand the body of knowledge about how to address particular barriers to employment - and how to implement effective programs in the different public assistance, enforcement, and service delivery systems that interact with the hard-to-employ population.

Low-Wage Workers and Communities Long regarded as the premier investigator of policies to improve the lives of families on welfare, MDRC has brought its program development skills and reputation for methodological rigor to the challenge of learning how best to improve the economic health of low-income workers and communities. In a focused portfolio of projects, we are investigating strategies to "make work pay" - providing financial supports that build a safety net around work while continuing to

Form 990, Part III, Line 4c:

encourage employment - and initiatives to help low-income people find more stable jobs, advance in the labor market, and achieve long-term self-sufficiency. Our studies are among the largest evaluations of such interventions in the country. The concentration of poverty - and associated lack of access to good jobs, affordable housing, quality goods and services, and economic and political resources - presents special challenges for improving the prospects of residents of low-income neighborhoods. MDRC has evaluated a number of place-based projects that addressed urban poverty and joblessness. Most notable of these was our Jobs-Plus initiative, an ambitious employment programs inside some of the nations poorest inner-city housing projects, Based on the positive findings from Jobs-Plus, the U.S. Department of Housing and Urban

Development (HUD) launched the program in nine locations across the country in 2015. We are also evaluating a number of Housing Choice Voucher reforms, helping to improve the nations principal housing assistance programs.

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) Describe the exempt purpose achievements for each of the organization's three largest program services by expenses

| 1 | beson be the exempt purpose demeterions for each of the organization's three largest program services by expenses |
|---|--|
| ı | Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to |
| ı | others, the total expenses, and revenue, if any, for each program service reported. |
| ı | |

| (Code: |) (Expenses \$ | 7 449 E01 | including grants of \$ | 653,981) (Revenue \$ | 51,340) |
|--------------------|--------------------------------|-----------|------------------------|-----------------------|----------|
| ` | ostsecondary edu. (see sch. o) | 7,446,501 | including grants or \$ | 655,961) (Nevenue \$ | 51,340) |
| roung addits and p | ostsecondary edu. (see sch. o) | | | | |

including grants of \$

59,050) (Revenue \$

127,679

| oung adults and postsecondary edu. (see sch. o) | (Code: |) (Expenses \$ | 7,448,501 | including grants of \$ | 653,981) (Revenue \$ | 51,340) |
|---|-----------------|---------------------------------|-----------|------------------------|-----------------------|----------|
| | oung adults and | postsecondary edu. (see sch. o) | | | | |

6,544,246

(Code:

K-12 education (see schedule o)

) (Expenses \$

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

) (Expenses \$

Center for Applied Behavioral Sciences(see sch. o)

(Code:

| Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to |
|--|
| others, the total expenses, and revenue, if any, for each program service reported. |
| |
| |

| (Code: |) (Expenses \$ | 3,645,546 | including grants of \$ | 0) (Revenue \$ | 0) |
|---------------------|--------------------------|-----------|------------------------|-----------------|----|
| Infor discemination | program day (see sch. o) | | | | |

| (Code: |) (Expenses \$ | 3,645,546 | including grants of \$ | 0) (Revenue \$ | 0) |
|----------------------|---------------------------|-----------|------------------------|-----------------|----|
| nfor. dissemination, | program dev. (see sch. o) | | | | |

| (Code: |) (Expenses \$ | 3,645,546 | including grants of \$ | 0) (Revenue \$ | 0) |
|--------------------------|-------------------------|-----------|------------------------|-----------------|----|
| nfor. dissemination, pro | ogram dev. (see sch. o) | | | | |

2,368,911

| (Code: |) (Expenses \$ | 3,645,546 | including grants of \$ | 0) (Revenue \$ | 0) |
|-------------------------|-------------------------|-----------|------------------------|-----------------|----|
| nfor. dissemination, pr | ogram dev. (see sch. o) | | | | |

including grants of \$

250) (Revenue \$

134,624

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

```
(Code: ) (Expenses $ 1,420,517 including grants of $ 0 ) (Revenue $ 39,365 )
Center for Data Insights (see sch. o)
```

(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other week (list person is both an officer from the from related compensation and a director/trustee) organization organizations from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

James A Riccio

Chief Economist

Carolyn Hill

Senior Fellow

Patricia Weiss

John Hutchins

Policy Area Director

Charles Michalopoulos

Human Resources Director

Communications Director

.......

| | any nours | and | a dir | ecto | or/tr | ustee, |) | organization | organizations | from the |
|--|---|-----------------------------------|-----------------------|------|--------------|------------------------------|--------|----------------------|----------------------|--|
| | for related organizations below dotted line) | Individual trustee or director | Institutional Trustee | ıv | Key employee | Highest compensated employee | Former | (W- 2/1099- MISC) | (W- 2/1099- MISC) | organization and related organizations |
| Gordon Berlin President (Thru 10/14/2019) | 40.0 | | | х | | | | 593,763 | 0 | 40,140 |
| Jesus M Amadeo Sr. Vice President & CFO | 40.0 | | | х | | | | 421,082 | 0 | 55,822 |
| Virginia W Knox | 40.0 | | | х | | | | 301,945 | 0 | 60,617 |

| | | | ΙX | 1 | | 421,082 | 0 | i |
|--------------------------------|------|--|----------|---|--|---------|---|---|
| Sr. Vice President & CFO | 0.0 | | <u> </u> | | | 121,002 | | l |
| Virginia W Knox | 40.0 | | x | | | 301,945 | 0 | |
| President (Effec. 10/15/2019) | 0.0 | | ^ | | | 301,543 | 0 | |
| Dan J Bloom | 40.0 | | v | | | 256,618 | 0 | |
| Sr. Vice President & Dir. PRED | 0.0 | | | | | 230,018 | 9 | |
| | 40.0 | | | | | | | |

40.0

0.0 40.0

0.0 40.0

0.0 40.0

0.0 40.0

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......

| President (Effec. 10/15/2019) | 0.0 | | | | | | |
|--------------------------------|------|--|---|--|---------|---|--|
| Dan J Bloom | 40.0 | | Y | | 256.618 | 0 | |
| Sr. Vice President & Dir. PRED | 0.0 | | ^ | | 230,010 | | |
| Sharon Rowser | 40.0 | | < | | 231,949 | 0 | |
| Vice President & Dep. Dir PRED | | | ^ | | 231,949 | 0 | |

| Virginia W Knox | 40.0 | | _ | | 301,945 | 0 | 60,617 |
|--------------------------------|------|---|---|---------|---------|--------|--------|
| President (Effec. 10/15/2019) | 0.0 | ^ | | 301,543 | 0 | 00,017 | |
| Dan J Bloom | 40.0 | | х | | 256,618 | 0 | 64,793 |
| Sr. Vice President & Dir. PRED | 0.0 | | ^ | | 250,018 | 0 | 04,733 |
| Sharon Rowser | 40.0 | | | | | | |

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234,327

242,166

188,614

195,947

201,165

46,233

40,991

32,356

71,171

58,385

47,281

0

0

0

0

0

(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Director

Director

Director

Director

Director

Director

Lawrence Katz

Bridget Terry Long

Richard J Murnane

Michael Roster

Cecilia Rouse

| | any hours | and | a dir | ecto | • | ustee) |) | organization | organizations | from the organization and related organizations | |
|--|---|-----------------------------------|-----------------------|------|--------------|---------------------|--------|----------------------|----------------------|--|--|
| | for related organizations below dotted line) | Individual trustee or director | Institutional Trustee | | Key employee | Highest compensated | Former | (W- 2/1099- MISC) | (W- 2/1099- MISC) | | |
| Barbara Goldman Vice President (Through 12/19) | 40.0 | | | х | | | | 216,199 | 0 | 28,898 | |
| | 0.0 | | | | | | | | | | |
| Frederick Doolittle Senior Fellow | 40.0 | | | | | | Х | 154,318 | 0 | 49,763 | |
| | 0.0 1.0 | | | | | | | | | | |
| Mary Jo Bane | | Х | | | | | | 0 | 0 | 0 | |

0

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| . , , | 0.0 | | | | | | |
|---------------------|-------|---|---|--|---|---------|--|
| Frederick Doolittle | 40.0 | | | | | | |
| | ••••• | | | | Х | 154,318 | |
| Senior Fellow | 0.0 | | | | | , , | |
| Mary Jo Bane | 1.0 | | | | | | |
| | ••••• | Χ | | | | 0 | |
| Chair | 0.0 | | | | | | |
| Ronald Haskins | 1.0 | | | | | | |
| | ••••• | Χ | | | | 0 | |
| Director | 0.0 | | | | | | |
| James H Johnson | 1.0 | | | | | | |
| | | X | l | | | 0 | |

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(A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless amount of other compensation compensation person is both an officer week (list from the from related compensation

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

| | any hours | and | a dir | ecto | | ustee) |) | organization | organizations | from the | |
|-------------------|---|-----------------------------------|-----------------------|---------|--------------|------------------------------|--------|----------------------|----------------------|--|--|
| | for related organizations below dotted line) | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | (W- 2/1099- MISC) | (Ŵ- 2/1099- MISC) | organization and related organizations | |
| Isabel Sawhill | 1.0 | Х | | | | | | 0 | 0 | 0 | |
| Director | 0.0 | | | | | | | | | | |
| Robert Solow | 1.0 | X | | | | | | 0 | C | 0 | |
| Chairman Emeritus | 0.0 | | | | | | | | 0 | 0 | |
| Jan Nicholson | 1.0 | X | | | | | | , | 0 | 0 | |
| Director | 0.0 | ^ | | | | | | | 0 | Ŭ | |
| Rudolph Penner | 1.0 | Х | | | | | | 0 | 0 | 0 | |
| Treasurer | 0.0 | ^ | | | | | | | 9 | | |
| Josh B McGee | 1.0 | Х | | | | | | 0 | 0 | 0 | |

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Director

Robert Denham

Rebecca Blank

Hilary Hoynes

John B King Jr

Director (AS OF 4/2019)

Director (As of 12/2019)

Director (As of 12/2019)

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Director

and Independent Contractors

| efil | e GR/ | APHIC pri | nt - DO NOT PROCESS | As Filed Data - | ed Data - DLN: 9349332104 | | | | |
|-------------|---------|---|---|--|---|-------------------------------------|---|---|--|
| SCI | | ULE A | Dublic (| Charity Statu | e and Dul | hlic Sunn | ort | OMB No. 1545-0047 | |
| | m 99 | | Complete if the or | rganization is a sect 4947(a)(1) nonexe ▶ Attach to Form | ion 501(c)(3) e mpt charitable 990 or Form 99 | organization or trust. 00-EZ. | · a section | 2019 | |
| • | | the Treasury | ► Go to <u>www.irs</u> | .gov/Form990 for i | nstructions and | I the latest info | ormation. | Open to Public Inspection | |
| Nam MDRC | e of th | ne organiza | tion | | | | Employer identific | ation number | |
| MDRC | | | | | | | 23-7379473 | | |
| | rt I | | for Public Charity Statual for Public Charity Statual foundation because | | | | See instructions. | | |
| 1 1 | rganiz | | onvention of churches, or as | • | | | (A)(i) | | |
| 2 | | • | escribed in section 170(b)(| | | , ,, , | . , . , | | |
| | | | | | , | , , | | | |
| 3 | | · | or a cooperative hospital serv | - | | | - | o ka o kla a la a a seka II a | |
| 4 | Ш | A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: | | | | | | | |
| 5 | | _ | ation operated for the benefit (iv). (Complete Part II.) | t of a college or unive | rsity owned or op | perated by a gov | ernmental unit descri | bed in section 170 | |
| 6 | | A federal, s | tate, or local government or | governmental unit de | scribed in sectio | on 170(b)(1)(A | ()(v). | | |
| 7 | ✓ | | ation that normally receives a 'O(b)(1)(A)(vi). (Complete | | s support from a | governmental u | init or from the genera | al public described in | |
| 8 | | A communi | ty trust described in section | 170(b)(1)(A)(vi). | (Complete Part I | I.) | | | |
| 9 | | | ural research organization de rant college of agriculture. Se | | | | | ege or university or a | |
| 10 | | An organization that normally receives: (1) more than 331/3% 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 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) | | | | | | | |
| 11 | | An organiza | ation organized and operated | exclusively to test fo | r public safety. S | See section 509 | (a)(4). | | |
| 12 | | more public | ation organized and operated cly supported organizations on through 12d that describes | lescribed in section 5 | 09(a)(1) or sec | ction 509(a)(2 |). See section 509(a | | |
| a | | Type I. A so | supporting organization opera n(s) the power to regularly a Part IV, Sections A and B. | ated, supervised, or co appoint or elect a majo | ontrolled by its s | upported organiz | zation(s), typically by | | |
| b | | Type II. A manageme | supporting organization sup nt of the supporting organiza plete Part IV, Sections A a | ervised or controlled i ation vested in the sar | | | | | |
| c | | Type III f | unctionally integrated. A sorganization(s) (see instructi | supporting organizatio | | | | ted with, its | |
| d | | Type III n | on-functionally integrated integrated. The organization in You must complete Par | d. A supporting organi n generally must satis | ization operated fy a distribution | in connection wi requirement and | th its supported orgar | | |
| e | | Check this | box if the organization received Type III non-functionally | ed a written determir | nation from the I | | pe I, Type II, Type II | I functionally | |
| f | Enter | | | · · · · · · · · · · · · | - | | <u></u> | | |
| g | Provi | de the follow | ing information about the su | pported organization(| s). | | | | |
| | (i) N | Name of supp organization | | (iii) Type of organization (described on lines 1- 10 above (see instructions)) | (iv) Is the organization listed in your governing document? | | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) | |
| | | Yes No | | No | | | | | |
| _ | | | | | | | | | |
| | | | | | | | | | |
| Tota | | | tion Act Notice, see the Ir | | Cat. No. 11285 | | Schedule A (Form 9 | | |

Page 2

If the organization failed to qualify under the tests listed below, please complete Part III.)

| | | | | | | / | |
|-----|---|------------------------|-----------------------|-----------------------|---------------------|---------------------|------------|
| | ection A. Public Support | | T | Т | | | |
| | Calendar year (or fiscal year beginning in) ▶ | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | | | |
| - | membership fees received. (Do not | 86,282,823 | 60,427,127 | 62,938,410 | 65,542,615 | 67,945,664 | 343,136,63 |
| | include any "unusual grant.") | | | | | | |
| 2 | Tax revenues levied for the | | | | | | |
| | organization's benefit and either | | | | | | |
| | paid to or expended on its behalf | | | | | | |
| 3 | The value of services or facilities | | | | | | |
| 3 | furnished by a governmental unit to | | | | | | |
| | the organization without charge | | | | | | |
| 4 | Total. Add lines 1 through 3 | 86,282,823 | 60,427,127 | 62,938,410 | 65,542,615 | 67,945,664 | 343,136,63 |
| | The portion of total contributions by | | | | | | |
| | each person (other than a | | | | | | |
| | governmental unit or publicly | | | | | | |
| | supported organization) included on | | | | | | 15,126,11 |
| | line 1 that exceeds 2% of the | | | | | | |
| | amount shown on line 11, column (f). | | | | | | |
| 6 | Public support. Subtract line 5 | | | | | | |
| • | from line 4. | | | | | | 328,010,52 |
| S | ection B. Total Support | | | | | | |
| | Calendar year | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total |
| _ | (or fiscal year beginning in) ▶ | | . , | | | | |
| 7 | Amounts from line 4. | 86,282,823 | 60,427,127 | 62,938,410 | 65,542,615 | 67,945,664 | 343,136,63 |
| 8 | Gross income from interest, | | | | | | |
| | dividends, payments received on securities loans, rents, royalties | 1,454,533 | 1,417,747 | 1,567,329 | 1,720,168 | 1,936,600 | 8,096,37 |
| | and income from similar sources | 1,151,555 | 1,117,717 | 1,507,525 | 1,720,100 | 1,550,000 | 0,050,57 |
| | | | | | | | |
| 9 | Net income from unrelated | | | | | | |
| | business activities, whether or not | 0 | 0 | 0 | 0 | 82,159 | 82,15 |
| | the business is regularly carried on | | | | | , | , |
| 10 | Other income. Do not include gain | | | | | | |
| 10 | Other income. Do not include gain or loss from the sale of capital | | | | | | |
| | assets (Explain in Part VI.). | | | | | | |
| 11 | Total support. Add lines 7 through | | | | | | 251 215 15 |
| | 10 | | | | | | 351,315,17 |
| 12 | Gross receipts from related activities, | etc. (see instruction | ons) | | | 12 | 8,531,53 |
| 13 | First five years. If the Form 990 is f | or the organization | n's first, second, th | ird, fourth, or fifth | ı tax year as a sed | tion 501(c)(3) orga | anization, |
| | check this box and stop here | | | | | . F | 1 ' |
| | ection C. Computation of Publi | ic Support Perc | entage | | | | <u>-</u> |
| 14 | | | | column (f)) | | 14 | 93.366 ° |
| | Public support percentage for 2018 Se | | | | | | |
| | | | | | | 15 | 98.087 |
| 16a | 33 1/3% support test—2019. If the | | | | | | |
| | and stop here. The organization qua | lifies as a publicly s | supported organiza | ation | | | ▶ ⊻ |
| b | 33 1/3% support test—2018. If the | - | | | | | |
| | box and stop here. The organization | n qualifies as a pub | olicly supported or | ganization | | | ▶ ⊔ |
| 17a | 10%-facts-and-circumstances tes | | | | | | |
| | is 10% or more, and if the organization | | | | | | |
| | in Part VI how the organization meets | | | - | | | . — |
| | organization | | | | | | ▶□ |
| b | 10%-facts-and-circumstances te | | | | | | |
| | 15 is 10% or more, and if the organi | | | | | | |
| | Explain in Part VI how the organizati | | | - | | | . 🗂 |
| | supported organization | | | | | | ▶⊔ |
| 18 | Private foundation. If the organizat | ion did not check a | a box on line 13, 1 | 6a, 16b, 17a, or 1 | /b, check this box | cand see | |

| Р | Part III Support Schedule for Organizations Described in Section 509(a)(2) | | | | | | | |
|-----------|---|--------------------|-----------------------|-----------------------|----------------------|----------------------|---------------------|--|
| | (Complete only if you cl | | | | | | er Part II. If | |
| S | the organization fails to ection A. Public Support | quality under | the tests listed i | pelow, please co | ompiete Part II.) | | | |
| 30 | Calendar year | () 2015 | (1) 2016 | () 2247 | (1) 2010 | () 2010 | (O.T.) | |
| | (or fiscal year beginning in) ▶ | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total | |
| 1 | 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 | | | | | | | |
| 4 | under section 513 Tax revenues levied for the | | | | | | | |
| • | organization's benefit and either paid | | | | | | | |
| _ | to or expended on its behalf | | | | | | | |
| 5 | The value of services or facilities furnished by a governmental unit to | | | | | | | |
| | the organization without charge | | | | | | | |
| 6 | Total. Add lines 1 through 5 | | | | | | | |
| 7a | Amounts included on lines 1, 2, and | | | | | | | |
| L | 3 received from disqualified persons Amounts included on lines 2 and 3 | | | | | | | |
| D | received from other than disqualified | | | | | | | |
| | persons that exceed the greater of | | | | | | | |
| | \$5,000 or 1% of the amount on line 13 for the year. | | | | | | | |
| c | Add lines 7a and 7b | | | | | | | |
| 8 | Public support. (Subtract line 7c | | | | | | | |
| | from line 6.) | | | | | | | |
| Se | ection B. Total Support | | 1 | | | | Г | |
| | Calendar year (or fiscal year beginning in) ▶ | (a) 2015 | (b) 2016 | (c) 2017 | (d) 2018 | (e) 2019 | (f) Total | |
| 9 | Amounts from line 6 | | | | | | | |
| 10a | Gross income from interest, | | | | | | | |
| | dividends, payments received on | | | | | | | |
| | securities loans, rents, royalties and income from similar sources. | | | | | | | |
| b | Unrelated business taxable income | | | | | | | |
| | (less section 511 taxes) from | | | | | | | |
| | businesses acquired after June 30, 1975. | | | | | | | |
| С | Add lines 10a and 10b. | | | | | | | |
| 11 | Net income from unrelated business | | | | | | | |
| | activities not included in line 10b, | | | | | | | |
| | whether or not the business is regularly carried on. | | | | | | | |
| 12 | Other income. Do not include gain or | | | | | | | |
| | loss from the sale of capital assets | | | | | | | |
| 12 | (Explain in Part VI.) Total support. (Add lines 9, 10c, | | | | | | | |
| 13 | 11, and 12.). | | | | | | | |
| 14 | First five years. If the Form 990 is for | the organization | n's first, second, th | nird, fourth, or fift | h tax year as a sec | tion 501(c)(3) o | ganization <u>,</u> | |
| | check this box and stop here | | | | | | ▶ ⊔ | |
| | ection C. Computation of Public S | | | ! (6)) | | 1 1 | | |
| 15 | Public support percentage for 2019 (lin | | • | | | 15 | | |
| 16 | Public support percentage from 2018 S | - | <u> </u> | | | 16 | | |
| | ection D. Computation of Investr Investment income percentage for 201 | | | line 13 column (f | :)) | 17 | | |
| 17 10 | Investment income percentage for 201 | - | | - | | 17 | | |
| 18 10- | 331/3% support tests—2019. If the | | • | | | 18 33 1/3% and lin | e 17 is not | |
| | more than 33 1/3%, check this box and s | | | | | | | |
| | more than 33 1/3%, check this box and s 33 1/3% support tests—2018. If the | | | | | | | |
| ט | not more than 33 1/3%, check this box | - | | | • | | _ | |
| 20 | Private foundation. If the organization | - | - | | | | | |
| | Frivate foundation. If the organization | ni ulu not check a | a DOX ON UNE 14, I | .a, or iad, check | , unis pox and see I | HSGRUCHONS | . 📂 📖 | |

Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete

10a

answer line 10b below.

the organization had excess business holdings).

Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2). 2

Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. 3a 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. 3b 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. 3с

Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below. 4a 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

4b supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and

(c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by 5a amendment to the organizing document).

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

5c 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 6

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. 6 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) . 7

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

8 complete Part I of Schedule L (Form 990 or 990-EZ). 8

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. 9a

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

than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its

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

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2019

9b

```
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.
```

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,"

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

| | edule A (101111 330 01 330 E2) 2013 | | | age 3 | |
|----|--|--------|---------|-------|--|
| Pa | rt IV Supporting Organizations (continued) | | | | |
| _ | | | Yes | No | |
| | Has the organization accepted a gift or contribution from any of the following persons? | | | | |
| а | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? | | | | |
| | | 11a | | | |
| | A family member of a person described in (a) above? | 11b | | | |
| | A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI . | 11c | | | |
| S | ection B. Type I Supporting Organizations | | | | |
| | | | Yes | No | |
| 1 | Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | 1 | | | |
| 2 | Did the organization operate for the benefit of any supported organization other than the supported organization(s) that | - | | | |
| 2 | 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 | 2 | | | |
| | organization. | | | | |
| S | ection C. Type II Supporting Organizations | | | | |
| _ | | | Yes | No | |
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the 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). | | | | |
| | 7, 5 | 1 | | | |
| S | ection D. All Type III Supporting Organizations | | v | | |
| _ | | | Yes | No | |
| 1 | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing | | | | |
| | documents in effect on the date of notification, to the extent not previously provided? | | | | |
| 2 | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). | | | | |
| _ | | 2 | | | |
| 3 | By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax | | | | |
| | year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. | 3 | | | |
| S | ection 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 instruct | ions): | | | |
| | The organization satisfied the Activities Test. Complete line 2 below. | | | | |
| | b | | | | |
| • | The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see | instru | ctions) | | |
| 2 | Activities Test. Answer (a) and (b) below. | ſ | Yes | No | |
| • | a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. | 2a | | | |
| ı | b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's | | | | |
| | involvement. | 2b | | | |
| 3 | Parent of Supported Organizations. Answer (a) and (b) below. | | | | |
| • | a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> . | 3a | | | |
| | b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard. | 3h | | | |

3b

| 1 | Type III Non-Functionally Integrated 509(a)(3) Supporting O Check here if the organization satisfied the Integral Part Test as a qualifying true. | | | . Part VIV See |
|---|--|------------|----------------|-------------------------------|
| | Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organization | | | |
| | Section A - Adjusted Net Income | | (A) Prior Year | (B) Current Yea (optional) |
| 1 | Net short-term capital gain | 1 | | |
| 2 | Recoveries of prior-year distributions | 2 | | |
| 3 | Other gross income (see instructions) | 3 | | |
| 4 | Add lines 1 through 3 | 4 | | |
| 5 | Depreciation and depletion | 5 | | |
| 6 | Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6 | | |
| 7 | Other expenses (see instructions) | 7 | | |
| 8 | Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) | 8 | | |
| | Section B - Minimum Asset Amount | | (A) Prior Year | (B) Current Yea (optional) |
| 1 | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): | 1 | | |
| а | Average monthly value of securities | 1a | | |
| b | Average monthly cash balances | 1 b | | |
| C | Fair market value of other non-exempt-use assets | 1c | | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | | |
| e | Discount claimed for blockage or other factors (explain in detail in Part VI): | | | |
| 2 | Acquisition indebtedness applicable to non-exempt use assets | 2 | | |
| 3 | Subtract line 2 from line 1d | 3 | | |
| 4 | Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). | 4 | | |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | |
| 6 | Multiply line 5 by .035 | 6 | | |
| 7 | Recoveries of prior-year distributions | 7 | | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | | |
| | Section C - Distributable Amount | | | Current Year |
| 1 | Adjusted net income for prior year (from Section A, line 8, Column A) | 1 | | |
| 2 | Enter 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 | | |

| | Amounts paid to supported organizations to accomplish exempt purposes | |
|---|---|--|
| 2 | Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity | |
| 3 | Administrative expenses paid to accomplish exempt purposes of supported organizations | |
| 4 | Amounts paid to acquire exempt-use assets | |
| 5 | Qualified set-aside amounts (prior IRS approval required) | |
| 6 | Other distributions (describe in Part VI). See instructions | |
| 7 | Total annual distributions. Add lines 1 through 6. | |
| 8 | Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions | |
| 9 | Distributable amount for 2019 from Section C, line 6 | |

| 7 Total annual distributions. Add lines 1 through 6. | Total annual distributions. Add lines 1 through 6. | | | | | | | |
|---|--|---|--|--|--|--|--|--|
| 8 Distributions to attentive supported organizations to who details in Part VI). See instructions | sive (provide | | | | | | | |
| Distributable amount for 2019 from Section C, line 6 | | | | | | | | |
| 10 Line 8 amount divided by Line 9 amount | | | | | | | | |
| Section E - Distribution Allocations (see instructions) | (ii) Underdistributions Pre-2019 | (iii) Distributable Amount for 2019 | | | | | | |
| 1 Distributable amount for 2019 from Section C, line 6 | | | | | | | | |
| 2 Underdistributions if any for years prior to 2019 | | | | | | | | |

| | *** | | | | | | |
|---|--|--|---|--|--|--|--|
| 7 Total annual distributions. Add lines 1 through 6. | Total annual distributions. Add lines 1 through 6. | | | | | | |
| Distributions to attentive supported organizations to who details in Part VI). See instructions | sive (provide | | | | | | |
| 9 Distributable amount for 2019 from Section C, line 6 | | | | | | | |
| 10 Line 8 amount divided by Line 9 amount | | | | | | | |
| Section E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions Pre-2019 | (iii) Distributable Amount for 2019 | | | | |
| 1 Distributable amount for 2019 from Section C, line 6 | | | | | | | |
| 2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions. | | | | | | | |
| 3 Excess distributions carryover, if any, to 2019: | | | | | | | |
| a From 2014 | | | | | | | |
| b From 2015 | | | | | | | |
| c From 2016 | | | | | | | |

| Section E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions Pre-2019 | (iii) Distributable Amount for 2019 |
|---|--|--|---|
| 1 Distributable amount for 2019 from Section C, line 6 | | | |
| 2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions. | | | |
| 3 Excess distributions carryover, if any, to 2019: | | | |
| a From 2014 | | | |
| b From 2015 | | | |
| c From 2016 | | | |
| d From 2017 | | | |
| e From 2018 | | | |
| f Total of lines 3a through e | | | |
| g Applied to underdistributions of prior years | | | |
| h Applied to 2019 distributable amount | | | |
| Carryover from 2014 not applied (see instructions) | | | |
| j Remainder. Subtract lines 3g, 3h, and 3i from 3f. | | | |
| | The state of the s | · | |

| c From 2016 | | |
|--|--|--|
| d From 2017 | | |
| e From 2018 | | |
| Total of lines 3a through e | | |
| g Applied to underdistributions of prior years | | |
| n Applied to 2019 distributable amount | | |
| Carryover from 2014 not applied (see instructions) | | |
| Remainder. Subtract lines 3g, 3h, and 3i from 3f. | | |
| Distributions for 2019 from Section D, line 7: | | |
| \$ | | |
| Applied to underdistributions of prior years | | |
| Applied to 2019 distributable amount | | |
| Remainder. Subtract lines 4a and 4b from 4. | | |

| instructions) | | |
|--|--|--|
| j Remainder. Subtract lines 3g, 3h, and 3i from 3f. | | |
| 4 Distributions for 2019 from Section D, line 7: | | |
| \$ | | |
| Applied to underdistributions of prior years | | |
| b Applied to 2019 distributable amount | | |
| c Remainder. Subtract lines 4a and 4b from 4. | | |
| 5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions. | | |
| 6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions | | |

| C Remainder. Subtract lines 4a and 4b from 4. | | |
|--|--|--|
| 5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI. See instructions. | | |
| 6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions. | | |
| 7 Excess distributions carryover to 2020. Add lines 3j and 4c. | | |
| 8 Breakdown of line 7: | | |
| a Excess from 2015 | | |
| b Excess from 2016 | | |
| c Excess from 2017 | | |

Schedule A (Form 990 or 990-EZ) (2019)

d Excess from 2018.

e Excess from 2019.

Additional Data

Software ID: Software Version: EIN: 23-7379473

Name: MDRC

Schedule A (Form 990 or 990-EZ) 2019

Part VI

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

Facts And Circumstances Test

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D**

As Filed Data -

DLN: 93493321042320

OMB No. 1545-0047

2019

(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.

Open to Public Inspection

| Nar MDR | ne of the organization C | | | | Em | oloyer identification number |
|-------------------|--|--|---------------|---|---------|---|
| | | | | | 23-7 | 7379473 |
| Pa | Organizations Maintaining Donor Adv Complete if the organization answered "Ye | | | | r Acc | counts. |
| | <u> </u> | (a) Donor | | | | (b) Funds and other accounts |
| | Total number at end of year | | | | | |
| 2 | Aggregate value of contributions to (during year) | | | | | |
| : | Aggregate value of grants from (during year) | | | | | |
| ļ | Aggregate value at end of year | | | | | |
| i | Did the organization inform all donors and donor advise organization's property, subject to the organization's ex | | | | | funds are the |
| • | Did the organization inform all grantees, donors, and d charitable purposes and not for the benefit of the dono private benefit? | r or donor advisor, or | for a | any other purpose o | | |
| Par | Conservation Easements. Complete if the organization answered "Ye | es" on Form 990 P | art | IV line 7 | | |
| | Purpose(s) of conservation easements held by the orga | | | | | |
| | | | | | histor | ically important land area |
| | Preservation of land for public use (e.g., recreation | on or education) | _ | | | rically important land area |
| | ☐ Protection of natural habitat | | | Preservation of a | ertifie | d historic structure |
| | Preservation of open space | | | | | |
| <u>!</u> | Complete lines 2a through 2d if the organization held a easement on the last day of the tax year. | a qualified conservatio | n co | ntribution in the for | m of a | conservation Held at the End of the Year |
| а | Total number of conservation easements | | | | 2a | |
| b | Total acreage restricted by conservation easements | | | | 2b | |
| С | Number of conservation easements on a certified histor | ric structure included i | n (a |) | 2c | |
| | Number of conservation easements included in (c) acquistructure listed in the National Register | | • | | 2d | |
| 1 | Number of conservation easements modified, transferred tax year ▶ | ed, released, extingui | shed | , or terminated by | the or | ganization during the |
| ļ | Number of states where property subject to conservation | on easement is locate | d ► | | | _ |
| i | Does the organization have a written policy regarding t and enforcement of the conservation easements it hold | | | | of viol | ations, |
| ; | Staff and volunteer hours devoted to monitoring, inspe \blacktriangleright | ecting, handling of viol | atio | ns, and enforcing co | onserv | ation easements during the year |
| , | Amount of expenses incurred in monitoring, inspecting | , handling of violation | s, ar | d enforcing conser | vation | easements during the year |
| 3 | Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(ii)? | | | | 70(h)(| 4)(B)(i) ☐ Y es ☐ N o |
|) | In Part XIII, describe how the organization reports con- balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemen | e footnote to the orga | | | | atement, and |
| ar | Organizations Maintaining Collections Complete if the organization answered "Ye | , | | • | er Si | milar Assets. |
| .a | If the organization elected, as permitted under SFAS 1 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its fina | 16 (ASC 958), not to r public exhibition, edu | repo ucati | rt in its revenue sta on, or research in f | | |
| b | If the organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held for put following amounts relating to these items: | 16 (ASC 958), to repo | rt in | its revenue statem | | |
| 7 | i) Revenue included on Form 990, Part VIII, line 1 | | | | | ▶ \$ |
| | | | | | | |
| (II |) Assets included in Form 990, Part X | | | | | |
| <u>!</u> | If the organization received or held works of art, histor following amounts required to be reported under SFAS | 116 (ASC 958) relatir | ng to | these items: | _ | |
| а | Revenue included on Form 990, Part VIII, line 1 | | | | | . ▶\$ |
| b | Assets included in Form 990, Part X | | | | | . ▶\$ |

d Equipment

| Sche | edule D (Form 990) 2019 | | | | | | | Page 2 |
|------------|---|-------------------------------------|------------------------------|--------------------------|-----------------------|---------------------|-------------------------|----------------------------------|
| Par | rt III Organizations Maintaini | ing Collections o | f Art, Histo | rical Treas | sures, or C | ther Similar | Assets (cc | ontinued) |
| 3 | Using the organization's acquisition, a items (check all that apply): | accession, and other | records, check | cany of the | following tha | t are a significan | t use of its o | collection |
| а | Public exhibition | | d | ☐ Loa | ın or exchan <u>ç</u> | ge programs | | |
| b | Scholarly research | | е | ☐ Oth | ner | | | |
| С | Preservation for future generat | ions | | | | | | |
| 4 | Provide a description of the organizat Part XIII. | cion's collections and | explain how th | ney further t | he organizati | on's exempt pur | pose in | |
| 5 | During the year, did the organization assets to be sold to raise funds rathe | | | | | | ☐ Yes | □ No |
| Pa | Escrow and Custodial A Complete if the organization X, line 21. | | on Form 99 | 0, Part IV, | line 9, or re | eported an am | ount on Fc | orm 990, Part |
| 1 a | Is the organization an agent, trustee, included on Form 990, Part X? | | | | | | ☐ Yes | □ No |
| b | If "Yes," explain the arrangement in | Part XIII and comple | te the followin | a table: | | | Amount | |
| c | , . | · | | - | . 1 | Lc | | |
| d | | | | | | .d | | |
| е | | | | | | .e | | |
| f | Ending balance | | | | 🔟 | Lf | | |
| 2a | Did the organization include an amou | int on Form 990, Parl | X, line 21, fo | r escrow or o | custodial acco | ount liability? | . 🗆 Yes | □ No |
| b | | | | | | | | |
| Pa | art V Endowment Funds. | | <u> </u> | | • | | | |
| | Complete if the organization | | | | | | | |
| 1. | Beginning of year balance | (a) Curren | t year (b) 338,197 | Prior year 37,465,989 | (c) Two year | | years back (431,905,254 | e) Four years back 32,931,824 |
| | Contributions | . 53, | 330,137 | 37,403,303 | 32,0 | 500,037 | 71,503,254 | 32,331,024 |
| | Net investment earnings, gains, and lo | 5, | 324,803 | -851,877 | 4,9 | 979,020 | 1,347,027 | -696,744 |
| | Grants or scholarships | | | · | | · | | |
| | Other expenditures for facilities and programs | 2, | 034,344 | 1,275,915 | 3 | 393,068 | 372,244 | 329,826 |
| f | Administrative expenses | | | | | | | |
| g | End of year balance | . 38, | 628,656 | 35,338,197 | 37,4 | 165,989 | 32,880,037 | 31,905,254 |
| 2 | Provide the estimated percentage of | the current year end | balance (line | 1g, column (| (a)) held as: | • | | |
| а | Board designated or quasi-endowmen | nt ▶ 40.480 % | | | | | | |
| b | Permanent endowment ► 23.170 | % | | | | | | |
| c | Temporarily restricted endowment ▶ | 36.350 % | | | | | | |
| | The percentages on lines 2a, 2b, and | 2c should equal 100 | %. | | | | | |
| 3а | organization by: | • | rganization th | at are held a | and administe | ered for the | | Yes No |
| | (i) unrelated organizations | | | | | | 3a(| |
| b | (ii) related organizationsIf "Yes" on 3a(ii), are the related organization | | aguired on Sch | odulo P2 | | | 3a(. 3l | - |
| 4 | Describe in Part XIII the intended use | | | | | | | |
| | art VI Land, Buildings, and Eq | | - Chaowinella | | | | | |
| | Complete if the organization | • | on Form 99 | 0, Part IV, | line 11a. S | ee Form 990, I | Part X, line | 10 |
| | | Cost or other basis (investment) | (b) Cost or other | er basis (other |) (c) Accum | ulated depreciation | (d |) Book value |
| | | (| | | | | | |
| | Land | | | | | | | |
| b | Buildings | | | | | | | |
| C | Leasehold improvements | 0 | | 11,970,23 | 0 | 3,362,48 | 7 | 8,607,743 |

0

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

774,251

126,806

8,734,549

647,445

| Part VII | Investments—Other Securities. Complete if the organization answered "Yes" on I | Form 000 Part IV lie | no 11h | Soo Form 000 | Dart V | line 12 |
|--------------------|---|---------------------------|--------------|----------------------------|-------------------|---|
| | (a) Description of security or category | (b) Book value | ile IID | (c) Metho | d of va | aluation: |
| (1) Financia | (including name of security) | | | Cost or end-of | -year r | market value |
| | held equity interests | | | | | |
| | MARKET LENDING | 4,330,105 | | | F | |
| (B) REAL AS | SETS (LIMITED PSHIPS) | 1,019,782 | | | F | |
| (C) EQUITY | LONG/SHORT | 5,676,338 | | | F | |
| (D) PRIVATE | EQUITY | 1,158,565 | | | F | |
| (E) | | | | | | |
| (F) | | | | | | |
| (G) | | | | | | |
| (H) | | | | | | |
| | n (b) must equal Form 990, Part X, col. (B) line 12.) | 12,184,790 | | | | |
| Part VIII | Investments—Program Related. Complete if the organization answered 'Yes' on I | Form 990, Part IV, lir | ne 11c | . See Form 990, | Part > | (, line 13. |
| | (a) Description of investment | | | (b) Book value | (c) | Method of valuation: or end-of-year market |
| | | | | | === | value |
| (1) | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| (5) | | | | | | |
| (6) | | | | | | |
| (7) | | | | | | |
| (8) | | | | | | |
| (9) | | | | | | |
| Total. (Colum | n (b) must equal Form 990, Part X, col.(B) line 13.) | | • | | | |
| Part IX | Other Assets. Complete if the organization answered 'Yes' on F | orm 990. Part IV. lin | e 11d. | See Form 990. Pa | rt X. lir | ne 15. |
| | (a) Descriptio | | | | | (b) Book value |
| (1) | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| (5) | | | | | | |
| (6) | | | | | | |
| (7) | | | | | | |
| (8) | | | | | | |
| (9) | | | | | | |
| | mn (b) must equal Form 990, Part X, col.(B) line 15.) | | | | • | |
| Part X | Other Liabilities. Complete if the organization answered 'Yes' on F | orm 990, Part IV, lin | <u>e</u> 11e | or 11f.See Form | <u>9</u> 90, | Part X, line 25. |
| 1. | (a) Description of I | | | | | (b) Book value |
| (1) Federal (3) | income taxes | | | | + | 0 |
| (4) | | | | | \vdash | |
| (5) | | | | | \vdash | |
| (6) | | | | | \vdash | |
| (7) | | | | | \vdash | |
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| (8) | | | | | ऻ | |
| (9) | - (h) | | | | ऻ | |
| | n (b) must equal Form 990, Part X, col.(B) line 25.) or uncertain tax positions. In Part XIII, provide the text o | of the footnote to the or | ganizat | • ion's financial state | <u> </u> ments | 9,379,326 that reports the |
| | 's liability for uncertain tax positions under FIN 48 (ASC | | - | | | • |

Part XI

2

b

Schedule D (Form 990) 2019

Schedule D (Form 990) 2019

1

Page 4

6,685,203

Recoveries of prior year grants . . . 2c d Other (Describe in Part XIII.) . . . 2d Add lines 2a through 2d .

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 .

2a

2b

2e 3

6,685,203

| 3 | Subtract line 2e from line 1 | 3 | 71,298,808 |
|-----|--|-------|------------|
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b . 4a 369,404 | | |
| b | Other (Describe in Part XIII.) 4b | | |
| С | Add lines 4a and 4b | 4c | 369,404 |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | 5 | 71,668,212 |
| Par | Reconciliation of Expenses per Audited Financial Statements With Expenses per F Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. | letur | n. |
| 1 | Total expenses and losses per audited financial statements | 1 | 72,718,447 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | |
| a | Donated services and use of facilities | | |

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

| | Complete if the organization answered Tes on Form 930, Fart IV, line 12a. | | |
|---|---|----|------------|
| 1 | Total expenses and losses per audited financial statements | 1 | 72,718,447 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | |
| а | Donated services and use of facilities 2a | | |
| b | Prior year adjustments | | |
| С | Other losses | | |
| d | Other (Describe in Part XIII.) | | |
| е | Add lines 2a through 2d | 2e | |
| 3 | Subtract line 2e from line 1 | 3 | 72,718,447 |

4 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 369,404 Other (Describe in Part XIII.) 4b b Add lines 4a and 4b . 4c 369,404 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 73.087.851 Part XIII Supplemental Information Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference Explanation

| chedule D (Form 990) 2019 | | |
|-----------------------------|----------------------|--|
| Part XIII Supplemental Info | ormation (continued) | |
| Return Reference | Explanation | |
| | | |
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| | | |

Schedule D (Form 990) 2019

Additional Data

Software ID: **Software Version:**

EIN: 23-7379473

Name: MDRC

Supplemental Information

| Return Reference | Explanation |
|------------------------------|---|
| Form 990, Schedule D, Part V | MDRC's Board of Directors created an endowment fund in 1999. The fund includes permanently restricted, temporarily restricted, and unrestricted contributions that have been designa ted to the fund for the purpose of matching a \$7 Million, five year challenge grant given by The Atlantic Philanthropies. Spending from the endowment fund is intended to support pr ogram development, information dissemination activities, and corporate strategic initiativ es. Spending from the endowment is approved by the Board of Directors based on the rules e stablished under MDRC's Endowment Spending Policy. |

| Supplemental Information | | | | |
|---|---|--|--|--|
| Return Reference | Explanation | | | |
| Form 990, Schedule D, Part X, Line 2 | MDRC follows guidance that clarifies the accounting for uncertainty in tax positions taken or expected to be taken in a tax return, including issues relating to financial statement recognition and measurement. This guidance provides that the tax effects from an uncertain tax position can only be recognized in the financial statements if the position is more-likely-than-not to be sustained if the position were to be challenged by a taxing authority. The assessment of the tax position is based solely on the technical merits of the position, without regard to the likelihood that the tax position may be challenged. MDRC is exempt from federal income tax under IRC section 501(c)(3), though it is subject to tax on in come unrelated to its exempt purpose, unless that income is otherwise excluded by the Code. MDRC has processes presently in place to ensure the maintenance of its tax-exempt status; to identify and report unrelated income; to determine its filling and tax obligations in jurisdictions for which it has nexus; and to identify and evaluate other matters that may be considered tax positions. MDRC has determined that there are no material uncertain tax positions that require recognition or disclosure in its financial statements. | | | |

| 00115011155 | _ | PROCESS | As Filed Data | • | | | OMB No. 1545-0047 |
|--|----------------|---|--|---|----------------|---|--|
| SCHEDULE F | State | ement of A | Activities (| Outside the Uni | ited S | tates 📙 | UMB NO. 1545-004/ |
| (Form 990) | ► Comp | omplete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. | | | | | 2019 |
| | | 6- t | | to Form 990. | . | | |
| Department of the Treasury Internal Revenue Service | • | Go to www.irs.gov/Form990 for instructions and the latest informati | | | | 1. | Open to Public Inspection |
| Name of the organization | | | | | | Employer ider | ntification number |
| MDRC | | | | | | 23-7379473 | |
| Part I General In Form 990, F | | | Outside the U | Jnited States. Comple | te if the | | inswered "Yes" on |
| • | • | | | | | | |
| _ | | • | | substantiate the amount | _ | | |
| , | • | • , | _ | stance, and the selection | | used | |
| to award the grants | or assistan | cer | | | | | ∐ Yes ∐ N |
| 2 For grantmakers. outside the United S | | Part V the orga | anization's proce | dures for monitoring the | use of it | s grants and ot | her assistance |
| 3 Activites per Region. | (The following | ng Part I, line 3 t | able can be dupli | cated if additional space is | needed. |) | |
| (a) Region | | (b) Number of offices in the region | (c) Number of employees, agents, and independent contractors in the region | (d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region) | program spe | rity listed in (d) is a service, describe ecific type of (s) in the region | (f) Total expenditures for and investments in the region |
| See Add'l Data | | | | regiony | | | |
| | | | | | | | |
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| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 3a Sub-total | | 0 | 0 | | | | 11,614,0 |
| 3a Sub-total . b Total from continuation Part I | | 0 | 0 | | | | 11,614,07 |

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

Cat. No. 50082W Schedule F (Form 990) 2019

| | uplicated if addit | (c) Number of | | (a) Mannay of as -1- | (f) Amount of | (a) Decembring | (h) Math |
|----------------------------|--------------------|---------------|-----------------------------|------------------------------------|--|---|---|
| ype of grant or assistance | (b) Region | recipients | (d) Amount of cash grant | (e) Manner of cash disbursement | (f) Amount of noncash assistance | (g) Description of noncash assistance | (h) Method of valuation (book, FMV, appraisal, other |
| | | | | | | | |
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| Sched | dule F (Form 990) 2019 | | Page 4 |
|-------|---|--------------|---------------|
| Par | TIV Foreign Forms | | |
| 1 | Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) | ✓ Yes | □No |
| 2 | Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990) | | |
| | | Yes | ✓ No |
| 3 | Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471) | | |
| | Corporations. (See Instructions for Form 3471) | ✓ Yes | □ № |
| 4 | Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621) . | ☑ Yes | □No |
| 5 | Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865) | | |
| | (See Instructions for Form 6865) | ✓ Yes | □ № |
| 6 | Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990). | ☐Yes | ☑ No |

| Schedule F (For | m 990) 2019 Page 5 | | | | | | |
|---|-------------------------------|--|--|--|--|--|--|
| Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting managements of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to part any additional information. See instructions. | | | | | | | |
| 990 Schedul | e F, Supplemental Information | | | | | | |
| Return Reference | Explanation | | | | | | |
| SCHEDULE | | | | | | | |

DIRECT INVESTMENTS INTO CORPORATIONS DOMICILED OUTSIDE THE UNITED STATES. NEVERTHELESS, MDRC'S

INVESTMENT ACTIVITIES MAY NOT REACH THE THRESHOLDS REQUIRED FOR FILING THE FORMS 926, 5471, 8621 OR 8865. TO THE EXTENT SUCH A FORM WAS COMPLETED. IT HAS BEEN FILED WITH THE ORGANIZATION'S FORM 990-T.

Additional Data

Europe (Including Iceland and

Greenland)

Software ID: Software Version:

EIN: 23-7379473

Name: MDRC

1,152,055

| Earm (| OOO Schodula | E Dart I - Act | tivitias Autoida | The United States |
|--------|--------------|----------------|------------------|---------------------|
| rom: | aan schednie | r Pari I = Aci | ivilles outside | : The United States |

| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region | (f) Total expenditures for region |
|--------------------------------------|-------------------------------------|--|--|--|--------------------------------------|
| Central America and the Caribbean | 0 | 0 | Investments | | 10,462,024 |

0 Investments

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule I

Grants and Other Assistance to Organizations, Governments and Individuals in the United States OMB No. 1545-0047

Open to Public

Schedule I (Form 990) 2019

DLN: 93493321042320

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

(Form 990)

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

| Name and address of or government Comparization Compariz | entification number |
|---|------------------------------|
| Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? | |
| Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? | ☑ Yes □ No |
| the selection criteria used to award the grants or assistance? | ☑ Yes ☐ No |
| Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV that received more than \$5,000. Part II can be duplicated if additional space is needed. (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash organization (if applicable) (if applicable) (d) Amount of cash organization (b) Method of valuation (b) Method of valuation (b) Method of valuation (b) Method of valuation (b) Description organization (b) Method of valuation (b) Description organization (c) Method of valuation (d) Amount of cash (e) Amount of non-organization (d) Amount of cash (d) Amount of cash (d) Amount of cash (d) Amount of non-organization (d) Amount of cash (| |
| that received more than \$5,000. Part II can be duplicated if additional space is needed. (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash organization (if applicable) (d) Amount of cash organization (e) Amount of non-ocash (b) Method of valuation (book, FMV, appraisal, noncash assistance) | |
| organization (if applicable) grant cash (book, FMV, appraisal, noncash assistanc | , line 21, for any recipient |
| | |
| (1) See Additional Data | |
| (2) | |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| (10) | |
| (11) | |
| (12) | |
| 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table | 56 |

Cat. No. 50055P

(2) (3) (4)

(5)

(6) (7)

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Explanation

MDRC MONITORS USE OF FUNDS AWARDED THROUGH A COMBINATION OF FINANCIAL REPORTING, PROGRAMMATIC REPORTING, SITE VISITS, AND AUDITS. EACH RECIPIENT SIGNS AN AGREEMENT WITH MDRC WHICH SPECIFIES THE RESTRICTED PURPOSE AND PERIOD OF THE AWARD, A PAYMENT SCHEDULE, AND A

Return Reference SCHEDULE I REPORTING SCHEDULE FOR FINANCIAL AND PROGRAMMATIC REPORTS. MDRC FINANCE AND PROGRAMMATIC STAFF PERFORM A COORDINATED REVIEW OF REPORTS SUBMITTED TO ENSURE COMPLIANCE WITH THE TERMS OF THE AWARD. PROGRAMMATIC STAFF COMMUNICATE FREQUENTLY WITH RECIPIENTS REGARDING THE

RECIPIENTS AND PERIODICALLY PERFORM ON-SITE FINANCIAL REVIEWS.

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Schedule I (Form 990) 2019

Part III

Schedule I (Form 990) 2019

Page 2

Additional Data

COLLEGE

AUTHORITY

700 Carneie Avenue Cleveland, OH 44115 HOUSTON HOUSING

2640 Fountain View Drive Houston, TX 77057

Software ID: **Software Version:**

EIN: 23-7379473 Name: MDRC

(g) Description of

non-cash assistance

(h) Purpose of grant

RESTRICTED PURPOSE

RESTRICTED PURPOSE

or assistance

laward

AWARD

74-6001238

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | r |
|--|----------------|-------------------------------|-----------------------------|--|---|---|
| | | | | | | |

CUYAHOGA COMMUNITY 34-0896630 501(c)(3) 19,550

564,442

501(c)(3)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 58-0566194 501(c)(3) 380.500 UNITED WAY OF GREATER RESTRICTED PURPOSE ATLANTA laward

IRESTRICTED PURPOSE

IAWARD

100 FDGEWOOD AVENUE NE ATLANTA, GA 30303 95-1641424 67.787

CHILDREN'S INSTITUTE INC. 2121 W TEMPLE STREET

LOS ANGELES, CA 90026

501(c)(3)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 51-0455278 501(c)(3) 127.310 PASSAGES CONNECTING RESTRICTED PURPOSE FATHERS & SONS INC laward

PO BOX 91831 CLEVELAND, OH 44114 RESEARCH FOUNDATION OF 13-1988190 501(c)(3) 33.224 RESTRICTED PURPOSE LAWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CUNY 3721 FILLMORE AVENUE

BROOKLYN, NY 11234

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) SEEDCO 13-2875743 501(c)(3) 66.291 RESTRICTED PURPOSE 22 CORLANDT STREET laward 33RD FLOOR NEW YORK, NY 10007 ANOKA-RAMSEY COMMUNITY 41-1687554 501(c)(3) 20.000 RESTRICTED PURPOSE

IAWARD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

COLLEGE

11200 Mississippi Blvd North Coon Rapids, MN 55433

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 41-1687554 501(c)(3) 10.000 CENTURY COLLEGE RESTRICTED PURPOSE 3300 Century Avenue North laward

RESTRICTED PURPOSE

laward

417 E Fayette Street Baltimore, MD 21202

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) MINNEAPOLIS COMMUITY AND 41-1687554 501(c)(3) 10.000 RESTRICTED PURPOSE TECHNICAL COLLEGE laward

1501 Hennepin Avenue Minneapolis, MN 55403 NORMANDALE COMMUNITY 41-1687554 501(c)(3) 20.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Bloomington, MN 55431

RESTRICTED PURPOSE COLLEGE IAWARD 9700 France Avenue South

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization if applicable grant cash or assistance assistance other) or government 34-1055865 501(c)(3) 50.000 RESTRICTED PURPOSE STARK STATE COLLEGE 6200 Frank Avenue NW laward

RESTRICTED PURPOSE

IAWARD

70.320

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

NMorth Canton, OH 44720
THE FORTUNE SOCIETY INC.

long Island City, NY 11101

29-76 Northern Blvd

13-2645436

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 91-6001088 501(C)(3) 95.967 WASHINGTON STATE DSHS RESTRICTED PURPOSE PO Box 45445 laward

RESTRICTED PURPOSE

laward

15.000l

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

Olympia, WA 98504

BANNING HIGH SCHOOL
ACADEMY

100 West Westward Banning, CA 92220 77-0468223

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) CHILD CARE RESOURCE 95-3081695 501(c)(3) 38.382 RESTRICTED PURPOSE laward

IAWARD

CENTER INC 20001 Praine Street Chatworth, CA 91311 CHILD360 22-3902958 501(c)(3) 257.558 RESTRICTED PURPOSE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Los Angeles Universal

Los Angeles, CA 90071

Preschool

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 20-3246676 501(c)(3) 100.000 COMMUNITY COLLEGE OF RESTRICTED PURPOSE BALTIMORE laward County Foundation Inc Baltimore, MD 21222

RESTRICTED PURPOSE

IAWARD

73.334

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

FAMILY DEVELOPMENT

3637 North Meridian Street Indianapolis, IL 46208

SERVICE INC

35-1990571

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 35-1738809 501(c)(3) 6.198 FAY BICCARD GLICK RESTRICTED PURPOSE NEIGHBORHOOD laward

IAWARD

2990 W 71st Street Indianapolis, IL 46268 36-3775696 501(c)(3) 17.000l IRESTRICTED PURPOSE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

HEARTLAND ALLIANCE HEALTH 208 S Lasalle Street

Chicago, IL 60604

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 93-1123958 501(c)(3) 6.198 JUST PLANE KIDS RESTRICTED PURPOSE

2555 East Avenue P laward Palmdale, CA 93550 LOS RIOS COMMUNITY 94-1575340 501(c)(3) 8.0001

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Sacramenta, CA 95825

RESTRICTED PURPOSE COLLEGE DISTRICT laward 1919 Spanos Court

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 43-0958608 501(c)(3) 6.316 LUME INSTITUTE LLC RESTRICTED PURPOSE laward

6646 Vernon Avenue
St Louis, MO 63130

MINNESOTA STATE COLLEGES 41-1687554 501(c)(3) 67,500

& UNIVERSITIES

30 7th Street East St Paul, MD 55101

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

RESTRICTED PURPOSE AWARD

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government RESTRICTED PURPOSE

RESTRICTED PURPOSE

IAWARD

ST MARTIN'S CHILD CENTER 42-1001293 501(c)(3) 8.330 6315 Garfield Avenue laward Berkeley, MO 63134

60.968

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

UNITED 4 CHILDREN

1310 Papin Street

St Louis, MO 63103

43-0953838

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 43-9653605 501(c)(3) 5.208 URBAN LEAGUE OF RESTRICTED PURPOSE METROPOLITAN ST LOUIS laward

Award

ROPOLITAN ST LOUIS
3701 Grandel Square
St Louis, MO 63108

CRYSTAL STAIRS INC 95-3510046 501(C)(3) 19,200

Restricted Purpose

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

5110 W Goldleaf Circle Ste 150

Los Angeles, CA 90056

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) 23-2676655 501(C)(3) 41.155 Restricted Purpose PEOPLE FOR PEOPLE INC 800 North Broad Street Suite Award 700 Philadelphia, PA 19130 MADISON AREA TECHNICAL 39-1086718 501(C)(3) 10.000 Restricted Purpose COLLEGE Award

PO Box 14316

Madison, WI 537080316

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) INDIANA ASSC EDUCATION OF 31-1000350 501(C)(3) 5.940 Restricted Purpose YOUNG CHILDREN Award 2955 N Meridian Street Ste

120 Indianapolis, IN 46208 501(C)(3) 150,000 IVY TECHNICAL COMMUNITY 35-1180631 Restricted Purpose COLLEGE OF INDIANA Award 50 W Fall Creek Parkway North

Driv

Indianapolis, IN 46208

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 52-1608039 501(C)(3) 141.407 TEACHING STRATEGIES LLC Restricted Purpose 3088 Momentum Place Award Chicago, IL 606895330 EAST TENTH UNITED 35-1976975 501(C)(3) 6.315 Restricted Purpose METHODIST CHILDREN Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2327 Easy 10th Street Indianapolis, IN 46201

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 38-6004191 501(C)(3) 67.000l TAYLOR SCHOOL DISTRICT Restricted Purpose 23033 Northline Road Award Taylor, MI 48180

Taylor, MI 48180

COASTAL HORIZONS CENTER 56-0950370 501(C)(3) 10,875

INC
615 Shipyard Blvd

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Wilmington, NC 28412

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 22-1821292 501(C)(3) 50.000 ESSEX COUNTY COLLEGE Restricted Purpose 303 University Avenue Award Newark, NJ 07102

BRIDGEPORT HOSPITAL 22-2908968 501(C)(3) 7.125 Restricted Purpose Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

FOUNDATION INC. 267 Grant Street

Bridgeport, CT 06610

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government

Award

| COLUMBUS EARLY LEARNING CENTERS 240 N Champion Avenue Columbus, OH 43203 | 31-4379619 | 501(C)(3) | 10,816 | | Restricted Purpose Award |
|---|------------|-----------|--------|--|-----------------------------|
| CREATIVE CHILD CHARE INC | 31-0795403 | 501(C)(3) | 18,816 | | Restriced Purpose |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

630 Morrison Road Suite 130

Gahanna, OH 43230

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 20-3431602 501(C)(3) 5.056 Restriced Purpose A CHILD'S WORLD 4010 Guion Lane Award Indianapolis, IN 46268 MEXICAN AMERICAN 95-2594166 501(C)(3) 6.656 Restricted Purpose OPPORTUNITY FOUNDATION Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

5657 E Washington Blvd Commerce, CA 90040

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 43-0652648 501(C)(3) 5.440 KINGDOM HOUSE Restricted Purpose 1321 S 11th Street Award St Louis, MO 63104

St Louis, MO 63104

LITTLE SCHOLARS CHILDCARE 27-1122413 501(C)(3) 5,056

& PRESCHOOL PO Box 53771

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Indianapolis, IN 462530771

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) YMCA OF CENTRAL OHIO 31-4379594 501(C)(3) 21.760 Restricted Purpose 1907 Leonard Avenue Suite Award 150 Columbus, OH 43219 ST LAWRENCE CATHOLIC 35-0919344 501(C)(3) 6.784 Restricted Purpose CHURCH - INDIANAPOLIS Award

6950 E 46th Street Indianapolis, IN 46226

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 45-3762044 501(C)(3) 6.784 Restricted Purpose FAMILY AND WORKFORCE CENTERS OF AMERICA Award 6347 Plymouth Avenue St Louis, MO 63133 PASSAIC COUNTY COMMUNITY 22-1907901 501(C)(3) 50.000 Restricted Purpose COLLEGE Award

1 College Blvd Paterson, NJ 07505

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 31-0820393 501(C)(3) 114.988 ACTION FOR CHILDREN Restricted Purpose 78 Jefferson Avenue Award

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Oak Creek, WI 53154

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) BAKERSFIELD COLLEGE 95-6006644 501(C)(3) 50.000 Restricted Purpose 2100 Chester Avenue Award Bakersfield, CA 93301 CHAFFEY COMMUNITY 95-6000558 501(C)(3) 50.000 Restricted Purpose Award

COLLEGE DISTRICT 5885 Haven Avenue Rancho Cucamonga, CA

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

917373002

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government CITY OF NEW YORK - PS 217 13-6400434 501(C)(3) 45.000l Restricted Purpose

1100 Newkirk Avenue Award Brooklyn, NY 11230

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Brooklyn, NY 11210

CITY OF NEW YORK - PS 197 13-6400434 501(C)(3) 45.000 Restricted Purpose 1599 Fast 22nd Street lAward

| efil | le GRAPHIC pr | rint - DO NOT PROCESS | As Filed Data | a - | DLN: 9349 | 9332 | 1042 | 320 | |
|------------|---|--|--------------------|---|----------------------|------------|----------------|----------|--|
| Sch | nedule J | C | ompensati | on Information | ОМЕ | 3 No. | 1545-(| 0047 | |
| (Form 990) | | 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. | | | | | 2019 | | |
| • | tment of the Treasury | ► Go to <u>www.irs.go</u> | | instructions and the latest information | | | o Pul ectio | | |
| | al Revenue Service ne of the organiz | Iation | | Emp | loyer identification | | | | |
| MDF | RC | | | 23-7: | 379473 | | | | |
| Pa | rt I Questi | ons Regarding Compensa | ntion | | | | | | |
| | | | | | | | Yes | No | |
| 1a | | | | the following to or for a person listed on F y relevant information regarding these iter | | | | | |
| | First-class | s or charter travel | | Housing allowance or residence for person | nal use | | | | |
| | | companions | 님 | Payments for business use of personal re- | | | | | |
| | | nification and gross-up paymen | _ | Health or social club dues or initiation fee | | | | | |
| | □ Discretion | nary spending account | Ш | Personal services (e.g., maid, chauffeur, | cner) | | | | |
| b | | | | follow a written policy regarding payment ve? If "No," complete Part III to explain | or | 1 b | | | |
| 2 | | | | or allowing expenses incurred by all | | 2 | | | |
| | directors, truste | ees, officers, including the CEO/ | executive Director | r, regarding the items checked on Line 1a? | | | | | |
| 3 | | | | d to establish the compensation of the | | | | | |
| | | | | not check any boxes for methods CEO/Executive Director, but explain in Part | : 111. | | | | |
| | , | - | | | | | | | |
| | | ation committee | □ | Written employment contract | | | | | |
| | | ent compensation consultant | ▽ | Compensation survey or study Approval by the board or compensation or | a ma ma itt a a | | | | |
| | E FOIM 990 | of other organizations | ₩ | Approval by the board of compensation c | ommittee | | | | |
| 4 | During the year related organiza | | 990, Part VII, Se | ction A, line 1a, with respect to the filing o | rganization or a | | | | |
| а | Receive a sever | ance payment or change-of-cor | ntrol payment? . | | , | 4a | | No | |
| b | Participate in, o | r receive payment from, a supp | lemental nonqual | ified retirement plan? | | 4b | | No | |
| С | | | | nsation arrangement? | | 4c | | No | |
| | If "Yes" to any o | of lines 4a-c, list the persons an | d provide the app | licable amounts for each item in Part III. | | | | | |
| | Only 501(c)(3 | s), 501(c)(4), and 501(c)(29 |) organizations | must complete lines 5-9 | | | | | |
| 5 | | | - | the organization pay or accrue any | | | | | |
| | compensation c | ontingent on the revenues of: | | , , , | | | | | |
| а | The organization | n? | | | | 5a | | No | |
| b | | | | | | 5b | | No | |
| | If "Yes," on line | 5a or 5b, describe in Part III. | | | | | | | |
| 6 | | ed on Form 990, Part VII, Section ontingent on the net earnings o | | the organization pay or accrue any | | | | | |
| а | The organization | n? | | | | 6a | | No | |
| b | , - | | | $\dots \dots \dots \dots \dots \dots \dots \dots \dots \dots $ | | 6b | | No | |
| | · · | 6a or 6b, describe in Part III. | | | | | | | |
| 7 | payments not d | escribed in lines 5 and 6? If "Ye | s," describe in Pa | the organization provide any nonfixed rt III | | 7 | Yes | <u> </u> | |
| 8 | subject to the ir | nitial contract exception describ | ed in Regulations | red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," describe · · · · · · · · · · | | 8 | | No | |
| 9 | | | | presumption procedure described in Regul | | 9 | | | |
| For F | Paperwork Redu | uction Act Notice, see the In | structions for Fo | rm 990. Cat. No. 50053 | T Schedule J (| Form | 990) | 2019 | |

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 are not listed on Form 990, Part VII. Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual. | | | | | | | | |
|--|-----|--|---|---|--------------------------|-------------------------|----------------------|--|
| (A) Name and Title | Jua | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Retirement and other | (D) Nontaxable benefits | (E) Total of columns | (F) Compensation in |
| | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | deferred compensation | | (B)(i)-(D) | column (B) reported as deferred on prior Form 990 |
| See Additional Data Table | | | | | | | | |
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| Schedule J (Form 990) 2019 | | | | | | |
|--|---|--|--|--|--|--|
| Part III Supplemental Inform | art III Supplemental Information | | | | | |
| Provide the information, explanation, or | rovide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. | | | | | |
| D 1 D 1 | Evelopation | | | | | |
| Return Reference | Explanation | | | | | |
| | The procedures used for determining bonus payouts to individuals listed in the Form 990, Part VII, are described in Schedule O, Part VI, Line 15 narrative. | | | | | |

(ii)

(i)

(ii)

(i)

(i)

(ii)

(i)

(ii)

(i)

(i)

(i)

|(ii)

(i)

(ii)

(ii)

359,986

208,494

149,485

222,620

233,026

276,226

246,724

220,645

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192,087

195,833

Software ID:

Software Version:

EIN: 23-7379473

Name: MDRC

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| Form 990, Scheaule . | J, H | Part II - Officers, D | irectors, i rustees, K | ey Employees, and I | lignest Compensate | a Employees | | | |
|-----------------------------------|--------|--|---|---|--------------------------------|------------------------|----------------------|---|--|
| (A) Name and Title | | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Retirement and | (D) Nontaxable | (E) Total of columns | (F) Compensation in | |
| | | (i) Base Compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | other deferred compensation | benefits | (B)(i)-(D) | column (B) reported as deferred on prior Form 990 | |
| 1Gordon Berlin President (Thru | (i) | 500,012 | 86,278 | 7,473 | 25,185 | 14,955 | 633,903 | 0 | |
| 10/14/2019) | الاننا | n | | | | | | | |

6,350

7,705

4,833

6,707

2,140

3,719

3,394

7,304

936

2,360

1,832

25,185

16,903

10,380

18,746

19,711

22,523

22,140

18,745

22,977

15,746

16,183

30,637

11,995

39,383

22,245

12,645

38,094

42,653

27,488

48,194

42,639

31,098

476,904

245,097

204,081

275,318

274,522

362,562

321,411

278,182

259,785

254,332

248,446

0

1Jesus M Amadeo

2Barbara Goldman

3Frederick Doolittle

Senior Fellow

4James A Riccio

Chief Economist

6Virginia W Knox

President (Effec. 10/15/2019) 7Dan J Bloom

8Sharon Rowser

Senior Fellow

10Patricia Weiss

11John Hutchins

PRED

PRED 9Carolyn Hill

Policy Area Director

5Charles Michalopoulos

Sr. Vice President & Dir.

Vice President & Dep. Dir

Human Resources Director

Communications Director

12/19)

Sr. Vice President & CFO

Vice President (Through

| efile GRAPH | IIC print - | DO NOT PROCESS | As Filed Data - | | DLN | : 93493321042320 |
|---|-------------|----------------------------|--|--|----------------------------------|------------------|
| SCHEDULE O (Form 990 or 990- EZ) Department of the Treasury | | Complete to pr Form 990 | ovide information fo or 990-EZ or to prov ▶ Attach to Forn | tion to Form 990 or 990-EZ of for responses to specific questions on rovide any additional information. form 990 or 990-EZ. open to P Inspection | | |
| Name l Bethe രളെ MDRC | gameation | lemental Informati | on | | Employer ident 23-7379473 | ification number |
| Return Reference | | | | Explanation | | |
| Form 990, Part VI - Policies & | Financial (| Officer and President as | well as external review | RC includes an internal review by Grant Thornton. The Form 99 vided with a copy of the Form 99 | 90 is then reviewe | d by the Audit |

The full board discusses the Form 990 post-filing at its scheduled annual meeting in December.

Procedures

990 Schedule O, Supplemental Information

Return

| Reference | · |
|-----------------------------------|---|
| PART VI, SECTION B LINE 12C | Conflict of Interest Policy Enforcement & Monitoring Directors and officers are required to complete and sign an annual conflict of interest disclosure statement. The statements are reviewed by the corporate Secretary and the President for actual or possible conflicts of interest. If any is disclosed, or inferred, these actual or possible conflicts of interest are brought to the attention of the Chairman of the Board. In response, the Chairman might convene a group of disinterested directors to discuss and address the conflict. All employees, including officers who are also staff members and key employees, are required to read and sign a code of ethics, which includes information about conflicts of interest. Annually, each employee must sign a statement disclosing the presence or absence of conflicts of interest on behalf of the employee and family members. Failure to do so can result in disciplinary action up to and including termination. These statements are reviewed by the Human Resources Department and, as appropriate, by counsel for determination regarding action that should follow the reporting of an actual or potential conflict of interest. In addition to the required annual report, all employees are instructed by the code of ethics that they have a responsibility to report a violation of the code. Employees can report any such violation to MDRC supervisory personnel, the Human Resources Department, or to an independent organization, Lighthouse Services, which hosts an online site and toll-free number which employees can use to make complaints anonymously or in identifiable form. |

Explanation

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|-----------------------------------|---|
| PART VI, SECTION B LINE 15A | Process for Determining Compensation The Finance and Compensation Committee ("The Committee") of MDRC's Board of Directors establishes each year the compensation and bonus payments, if any, for the top paid and next top paid officer of the organization based on survey information provided to them from both internal and external sources. The individuals at the end of 2019 are Dr. Knox and Mr. Amadeo. Each year MDRC's Human Resources function conducts a review of the Form 990's and other documents of research organizations that perform similar research as MDRC, to ascertain their pay structures for the top and second top paid officers, which is typically the CEO or President and the COO/CFO. Included in this survey is the base salary and bonus payments made to the top and second top paid executives of these other policy research firms, along with such comparable factors as size of the organization as measured by headcount and operating budgets. This survey information is supplemented by comparable information provided from an external, third party consulting firm called The National Think Tank Compensation Survey (NTTC) conducted by Akron Incorporated, a Washington DC based compensation consulting firm. The NTTC compiles the base salary and bonus payment information provided by survey participants and displays the information anonymously by quartile, location, and firm size (stated in terms of employees and budget). Survey participant include competing policy research organizations, as well as foundations, endowments, and universities. The results of both the in-house and external surveys and comparison of Form 990's for those comparable not-for-profit organizations are presented to The Committee, which then deliberates, and based on the information provided, establishes the pay level for MDRC's President and Chief Financial Officer. The compensation of the President and Chief Financial Officer is approved by the Board. |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|-----------------------------------|---|
| PART VI, SECTION B LINE 15B | Process for Determining Compensation The Committee establishes compensation levels for the Chief Financial Officer, as required by the California Nonprofit Integrity Act of 2004. Compensation for the rest of the officers and employees is based on a recommendation by the President to The Committee. The recommendation from the President establishes a merit and bonus pool for the coming year, based on the organization's standard pay practice as described below. The President sets and approves the salary level and bonus payments for officers other than the Chief Financial Officer, and for other key employees. Each year, MDRC's President recommends to the Board a salary pool for merit increases and discretionary bonuses to be paid to other officers and key employees in the organization. The merit increase and bonus pools are generally competitive within the two marketplaces in which the organization competes for Human Talent (New York and California). The President bases the recommendation on survey information provided by the organization's Human Resources Department, which in turn, obtains local labor market pay practices from external third party consulting firms such as Mercer Human Resources Consulting and Towers Perrin Compensation Consulting, as well as conducting a survey of pay practices from other policy research organizations. Typical merit increase pools in recent years have been in the four percent (4%) to five percent (5%) range. Once the merit increase pool has been established and approved by the Board, MDRC establishes each employee's salary based on two factors: performance on the job during the most recent calendar year (MDRC uses a four tier performance rating system), and where an employee's salary falls within the salary range established for their position (called a compa-ratio). Holding performance constant, MDRC's compensation system provides a greater increase in salary to those employees who are low in their salary ranges and provides smaller increases in salary to those employees who are |

Return Explanation

990 Schedule O, Supplemental Information

PART VI,
SECTION C
LINE 19

Availability of Documents MDRC's Financial Statements are made available to the public through the MDRC website and a hard copy is provided upon request. MDRC's governing documents and conflict of interest policy are generally available to the public upon request. Part VII-A Line 1 - Former Officer Senior Fellow, Frederick Doolittle, is reported as a former officer on the Form 990

as he is still currently employed by MDRC, but in a non-officer capacity.

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|--|--|
| FORM 990, PART III, LINE 4D - OTHER PROGRAMS | Postsecondary Education Access to higher education has been greatly expanded since the mid -1960s. Unfortunately, rates of persistence and credential completion in remain distressin gly low, particularly at community colleges - where only one third of all students who ent er with the intention of earning a degree or certificate actually meet this goal within si x years. The reasons behind this problem are myriad: a lack of adequate preparation in the K-12 system and the challenge of balancing work, family, and school responsibilities and others are the result of institutional or policy constraints (for instance, insufficient a dvising and financial aid, uncertainty over how to teach basic skills to adults, and const raints in course offerings and inflexible scheduling). Policymakers and the philanthropic sector have focused new efforts on increasing student persistence and achievement in posts econdary education. Since the launch of its Opening Doors Demonstration in the early 2000s, MDRC has been directly involved developing and evaluating strategies to help students su cceed, particularly students at community colleges and nonselective four-year institutions. Through our work, we have identified the most effective programs developed by others, he lped replicate those programs in new contexts, and assisted communities and institutions in developing new interventions based on evidence developed in studies available. Our curre nt centerpiece project, SUCCESS, focuses on helping states and higher education institution as adopt and scale the more successful interventions that have been developed and tested. K-12 Education For 25 years, MDRC has been learning what may be most effective to raise the academic achievement of young people who are at risk of failing. We collaborate with pub lic school systems, charter organizations, and national nonprofits to evaluate their programs and to use that information to help them develop evidence-based strategies for continu ous program improvement. At a time of growing nation |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|--|--|
| FORM 990, PART III, LINE 4D - OTHER PROGRAMS | No longer simply a stand-alone vocational class in high school or an occupational skills c ourse at a community college, CTE now encompasses a broad range of multi-faceted models - including career pathways, apprenticeships, sectoral training, and employer relationships - and services everyone from secondary and college students to at-risk youth and adult wor kers. Building on MDRCs 20-year history of studying CTE programs, the Center incubates new ideas, synthesizes findings and lessons learned, and disseminates this knowledge to polic ymakers, practitioners, and other researchers in order to help ensure that expansion of CT E programs is informed by a growing evidence base. The Center draws on knowledge across ed ucation and training systems and uses a broad lens to detect cross-cutting issues, develop a targeted research agenda, and share findings. Center for Criminal Justice Research The criminal justice system is emerging from decades of "get tough" policies that quadrupled the rate of incarceration nationally, to the point where the United States, with less than 5 percent of the worlds population, now holds more than 20 percent of the worlds prisoners. Driven by budget pressures, questions about the most effective way to respond to crime, and concerns about unequal treatment under the law, a growing number of states and localit ies are reforming their criminal justice systems. They seek to reduce incarceration and in crease fairness by changing the way cases are handled from the front end of the system (ar rest and pretrial) to the back end (incarceration and reentry). The MDRC Center for Crimin al Justice Research works with national and local criminal justice agencies, policymakers, courts, and community-based organizations to answer pressing questions and improve both the effectiveness of the criminal justice system and the outcomes of individuals involved in it. Center for Applied Behavioral Science (CABS) Too often, programs and policies do not consider the way people actually think and behave. It is |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|--|--|
| FORM 990, PART III, LINE 4D - OTHER PROGRAMS | roblems tackled by the Center address relevant policies in human services programs, educat ional settings, and employment training programs. Using a diagnostic methodology to identi fy opportunities most amenable to light-touch, high-impact interventions, CABS designs interventions and tests their impact through experimentation and provides technical assistance to social service agencies implementing such approaches. In 2019, we developed a dedicated CABS website that highlights the breadth of the centers work with 100 agencies, educati onal institutions, and nonprofits in 26 states using behavioral science to solve problems and improve outcomes. Center for Data Insights Across the social sector, government agencies, educational institutions, and nonprofit organizations are all benefiting from greater access both to more detailed and frequent data and to a variety of options for increased c omputing power. With data-science tools and guidance in applying them, practitioners can h arness multiple sources of data to gain new insights about the individuals they serve, the contexts in which they operate, their staff members, and their program features. When such tools are incorporated into daily operations in a responsible way, they can help practiti ioners improve their programs and the lives of those they serve. With the launch of the MD RC Center for Data Insights, MDRC is furthering its long-standing commitment to helping or ganizations with which we collaborate their programs and systems by harnessing the benefit so of operational data-science techniques - those that produce actionable insights that can affect daily practice. Ranging from simple descriptive summaries to advanced machine lear ning algorithms, the centers projects aim to use institutions increasingly rich data to provide new insights that can help them refine and target their services. The centerpiece of CDIs work is a major federal project the TANF Data Initiative which works with welfare ag encies in building long-term staff capacity at the lo |