Form	990
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Return of Organization Exempt From Income Tax

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

Department of the Treasury

► Do not enter Social Security numbers on this form as it may be made public.

2020 Open to Public

OMB No. 1545-0047

				0		inspec				
A F	or th	$\begin{array}{c} \textbf{e 2020 calendar year, or tax year beginning}} \\ 09/01, 2020, \end{array}$	and ending			/31,20 21				
B o	heck if ap	C Name of organization		D Employer	identific	ation number				
_	_	SPONSORS FOR EDUCATIONAL OPPORTUNITY, INC.								
	Addre chang	Doing Business As SEO, SETZING EVERI OPPORTUNITI, GOLD								
	Name	e change Number and street (or P.O. box if mail is not delivered to street address) F	Room/suite	E Telephone	E Telephone number					
	Initial	return 55 EXCHANGE PLACE		(212) 9						
	Term	inated City or town, state or province, country, and ZIP or foreign postal code								
	Amer returr			G Gross rece	eipts \$	49,109),382.			
		cation F Name and address of principal officer: WTLLTAM A GOODLOF		H(a) Is this a g subordina		rn for Yes	XN			
		55 EXCHANGE PLACE, NEW YORK, NY 10005		H(b) Are all sub		icluded? Yes				
I	Tax-ex	empt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or	or 527	If "No," af	ttach a list.	. (see instructions)				
J	Websi	te: ▶ WWW.SEO-USA.ORG		H(c) Group exe	emption nu	umber 🕨				
к	Form	of organization: X Corporation Trust Association Other ►	L Year of fo	ormation: 1965	VI State	of legal domicile	: NY			
Ρ	art I	Summary		I						
		Briefly describe the organization's mission or most significant activities: SEE SCI	HEDULE O							
e										
and										
Governance	2	Check this box	d of more than	25% of its net ass	ets.					
ĝ	3						28.			
	4	Number of independent voting members of the governing body (Part VI, line 1b)					28.			
ties	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)					410.			
Activities &	6	Total number of volunteers (estimate if necessary)				1	,111.			
Ac	-	Total unrelated business revenue from Part VIII, column (C), line 12			-		0			
		Net unrelated business taxable income from Form 990-T, line 34					0			
				Prior Year		Current	Year			
	8	Contributions and grants (Part VIII, line 1h)	34,898,8	301.	48,13	8,339				
nue	9	Program service revenue (Part VIII, line 2g) PUBLIC INS PUBLIC INS		0.		0				
Revenue	10	PUBLIC INS	SPECTION	285,2	115.	24	3,680			
Å	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	 _	-386,9			7,318			
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		34,796,9		48,11				
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		2,409,4			7,404			
	14	Benefits paid to or for members (Part IX, column (A), line 4)			0.		0			
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		17,585,1	156.	22,14	5,963			
see	162	Professional fundraising fees (Part IX, column (A), line 11e)	•••••	, ,	0.	(
Expenses	h	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) ► 2,218,932.					-			
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		6,950,6	539.	9.68	2,205			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	•••••	26,945,2		32,925,572				
	19	Revenue less expenses. Subtract line 18 from line 12	•••••	7,851,6		15,18				
es				Beginning of Curren		End of Ye				
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		51,696,2		70,51				
Ass Bal	21	Total liabilities (Part X, line 26)	•••••	5,147,3			8,779			
und.	22	Net assets or fund balances. Subtract line 21 from line 20	••••+	46,548,8		64,83				
	art II	Signature Block								
		nalties of perjury, I declare that I have examined this return, including accompanying schedule	es and stateme	ents, and to the best	of mv k	nowledge and h	belief, it is			
tru	e, corre	ect, and complete. Declaration of preparer (other than officer) is based on all information of which	h preparer has a	any knowledge.						
				07/	11/20	022				
Sig	jn	Signature of officer		Date		<u>-</u>				
Не	re	WILLIAM A. GOODLOE PRESID	ENT & CE	0						
		Type or print name and title								
		Print/Type preparer's name Rreparer's signature	Date	Check	if P	PTIN				
Paio	ł	PAUL HAMMERSCHMIDT	7/12/2	2022 self-empl		P01384178	8			
Pre	parer				- 1 - 1	5381590	-			
Use	Only		1	Firm's EIN		-885-8000)			
Max	/ tho I	Firm's address ► 100 PARK AVENUE NEW YORK, NY 10017-5001 RS discuss this return with the preparer shown above? (see instructions)		Phone no.						
			<u></u>	<u></u>	<u></u>	<u>. X</u> Yes Form 99				
ror	rape	rwork Reduction Act Notice, see the separate instructions.				Form 99	v (2020			

Fo	rm 990 (2020) Page 2
Ρ	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: SEE SCHEDULE O
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes X No If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4	(Code:

4a	(0000.) $(1,097,404.)$ $(1,097,404.)$	
	SEO SCHOLARS IS SEO'S FOUNDING PROGRAM AND IS A FREE, EIGHT-YEAR,	
	ACADEMIC PROGRAM THAT TRANSFORMS PUBLIC HIGH SCHOOL STUDENTS INTO	_
	COLLEGE GRADUATES. SEO SCHOLARS SUCCESSFULLY EDUCATES, AND MENTORS	_
	JNDERSERVED, LOW- INCOME PUBLIC HIGH SCHOOL STUDENT TO AND THROUGH	_
	COLLEGEWITH A 90% COLLEGE GRADUATION RATE. SEO SCHOLARS EXCEED	_
	OR MATCH THE SAT SCORES OF ALL COLLEGE BOUND SENIORS NATIONALLY,	_
	ELIMINATING THE ACHIEVEMENT GAP AND 100% ARE ACCEPTED TO FOUR-YEAR	_
	COLLEGES. SEO SCHOLARS CURRENTLY SERVES OVER 2100 STUDENTS	_
	VATIONWIDE - ~1000 NYC HIGH SCHOOL STUDENTS, ~150 SF HIGH SCHOOL	_
	STUDENTS AND OVER 1100 COLLEGE STUDENTS AT 150+ CAMPUSES IN MORE	_
	THAN 25 STATES.	_

4b	(Code:) (Expenses \$ 6,756,183. including grants of \$ 0.) (Revenue \$ 0.)
	SINCE 1980 SEO CAREER HAS PREPARES HIGH ACHIEVING AND
	UNDERREPRESENTED COLLEGE STUDENTS, INCLUDING BLACK,
	HISPANIC/LATINO, LATINX, AND NATIVE AMERICAN COLLEGE STUDENTS FOR
	CHALLENGING SUMMER INTERNSHIPS THAT LEAD TO COVETED FULL-TIME
	JOBS. SEO CAREER CLOSES THE OPPORTUNITY GAP BY PROVIDING ENTRY TO
	HIGH-GROWTH PROFESSIONAL OPPORTUNITIES AND BEST -IN-CLASS TRAINING
	FOR STUDENTS TO SUCCEED. IN THE CURRENT YEAR, SEO CAREER RECRUITED
	AND TRAINED 970+ SUMMER INTERNS FOR 150+ CORPORATE PARTNERS
	NATIONWIDE. OVER 88% OF THE ELIGIBLE INTERNS HAVE EARNED FULL-TIME
	JOB OFFERS THE PAST TWO YEARS.

 4c (Code: _____) (Expenses \$____1,575,324. including grants of \$_____0.) (Revenue \$_____0.)

 SEO ALTERNATIVE INVESTMENTS PROVIDES EDUCATION, ACCESS, AND CAREER

 DEVELOPMENT TO BOTH YOUNG AND EXPERIENCED PROFESSIONALS WHO ARE

 TRADITIONALLY UNDERREPRESENTED IN THE ALTERNATIVE INVESTMENTS

 SECTOR. THE INITIATIVE INCLUDES: THE SEO ALTERNATIVE INVESTMENTS

 FELLOWSHIP PROGRAM (AIFP); INTERNSHIPS WITH ALTERNATIVE

 INVESTMENTS FIRMS; AND THE SEO ALTERNATIVE INVESTMENTS CONFERENCE.

 MORE THAN 550 INDIVIDUALS ATTENDED SEO'S 2021 ALTERNATIVE

 INVESTMENTS CONFERENCE. SINCE INCEPTION 90% OF ELIGIBLE AIFP

 FELLOWS HAVE EARNED FULL-TIME JOB OFFERS IN THE ALTERNATIVE

 INVESTMENTS SECTOR.

 4d Other program services (Describe on Schedule O.)

 (Expenses \$ 1,798,266. including grants of \$ 0.) (Revenue \$ 0.)

 4e Total program service expenses ▶ 27,406,351.

 JSA 0E1020 1.000 9943SK 702V 7/11/2022 1:50:20 PM V 20-7.24 0429133

 SPONSORS FOR EDUCATIONAL OPPORTUNITY, INC. 13-2578670

Part IV Checklist of Required Schedules 1 Is the organization described in section 501(c)(3) or 497(a)(1) (other than a private foundation)? If "Yes," complete Schedule A Schedule A Contributors See instructions? 1 2 Is the organization engage in index or influence on point and the organization engage in lobbying activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I. 1 3 Section 501(c)(3) organization solution comparison on that receives membership dues, assessments, or similar and/our adviced funds or any winniar funds or accounts for which dorors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? 5 7 Did the organization maintain collections of works of an, historical treasures, or other similar asset? If "Yes," complete Schedule D, Part I. 6 X 9 Did the organization maintain collections of works of an, historical treasures, or other similar asset? If "Yes," complete Schedule D, Part I. 6 X 9 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part I. 10 X 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V. 10 X 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V. 11 X 11 If the organization r	-	90 (2020)		F	Page 3
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A, the approximation regiment to imdired political campaign activities on behalf of or in opposition to candidates for public Other (1) Yes," complete Schedule C, Part II. 1 1 3 Did the organization required to complete Schedule C, Part II. 3 X 4 Schedule A, the approximation required to complete Schedule C, Part II. 3 X 5 Is the organization maintain any donor adveed funds or any similar funds or accounts for which donors have the replanziation resounds as defined in Revenue Proceedule B-197 II "Yes," complete Schedule D, Part II. 5 4 X Schedule C, Part II. 5 5 Did the organization resounds as defined in Revenue Processounds TI 'S's, "complete Schedule D, Part II. 5 6 X 7 X 7 Did the organization resounds or hid account in Part X, line 21, for escrow or custodial account liability, serve as a custodial for amount in Part X, line 21, for escrow or custodial account liability, serve as a custodial resounds. TI 'Yes," complete Schedule D, Part II. 9 10 Line organization resport an amount for land, buildings, and equipment in Part X, line 12, that is 5% or more if the xestodial account liability, serve as a custodial resounds. TI 'Yes," complete Schedule D, Part X II. 10 X	Part	V Checklist of Required Schedules			
complete Schedule A. 1 1 1 1 1 1 1 1 2 1 1 1 1 2 1 1 1 1 2 1 1 1 1 1 2 1				Yes	No
2 Is the organization required to complete Schedule A Schedule of Contributors See instructors? in the organization required to complete Schedule C Part I is the organization and the avgarit I "rest" complete Schedule C Part I is the organization maintain any doner advised funds or any similar funds or accounts? If "rest" complete Schedule C Part I is the organization maintain any doner advised funds or any similar funds or accounts? If "rest" complete Schedule C Part II is the organization maintain any doner advised funds or any similar funds or accounts? If "rest" complete Schedule D, Part II is the organization regione or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "rest" complete Schedule D, Part II is the organization regione or hold a conservation easement, including easements, credit repair, or dottinegoliation services? If "rest" complete Schedule D, Part II. 10 Did the organization regione and mount in Part X, line 11, for escrow or custodal account liability, serve as a custodian for amounts not listed in Part X, or provide conduct accounts and liability. Serve as a custodian for amount for Investments-order securities in Part X, line 10, If "Yes," complete Schedule D, Part II.	1			v	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for policy office? If "Yes," complete Schedule C, Part I. 3 X 4 Section 501(c)(3) organizations. Do the organization engage in lobbying activities, or have a section 501(n) is bit organization anisotro 501(c)(4). 501(c)(6), or 501(c)(6) organization that receives membership dues, assessments, or similar anounts so defined in Revenue Procedure 94-197 If "Yes," complete Schedule C, Part I. 4 X 4 Did the organization anisotro 501(c)(4). 501(c)(6), or 501(c)(6) organization that receives membership dues, assessments, or similar anounts so the distribution or investment of amounts in such funds or accounts for which denors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which denors the environment, histori land areas, or historic attrutures 2/1 Wrs," complete Schedule D, Part II. 7 X 9 Did the organization maintain collections of works of an, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part V 8 X 9 Did the organization secure to an amount for law the resolution and secure the schedule D, Part V 9 X 10 Did the organization report an amount for lawstments-orbor securitios in Part X, line 107. If "Yes," complete Schedule D, Part V 11 X 11 H organization report an amount for lawstments-orbor securitios in Part X, line 107. If "Yes," complete Schedule D, Part VI 11 <td< td=""><td>2</td><td></td><td></td><td></td><td></td></td<>	2				
candidate for public office? // "Yes" complete Schedule C, Part I. 3 X 4 Section Sol1(c)(3) organization again (noblying activities, or have a socion Sol1(n) 4 X 5 Is the organization astetion Sol1(c)(4), Sol1(c)(5), or Sol1(c)(6) organization interaction astetion Sol1(c)(4), Sol1(c)(5), or Sol1(c)(6) organization interaction astetion Sol1(c)(4), Sol1(c)(5), or Sol1(c)(6) organization interactions in such hunds or accounts? If "Yes" complete Schedule D, Part II. 5 X 7 Did the organization cases or historic structures? If "Yes," complete Schedule D, Part II. 7 X 8 Did the organization cases or historic structures? If "Yes," complete Schedule D, Part II. 7 X 9 Did the organization maintain collections of vorks of art. Instorical trassumes, or withs of maintain asset? If "Yes," complete Schedule D, Part II. 7 X 9 Did the organization maintain collections or vorks of art. Instorical trassumes, or withor any and the following questions is "Yes," There part is a complete Schedule D, Part II. 8 X 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V. 9 X 11 If the organization report an amount for investments-order securities in Part X, line 10? If "Yes," complete Schedule D, Part V. 10 X 11 Did the organization			2		
 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(n) election in effect during the tax year // "Ves" complete Schedule C, Part //	5		3		Х
election in effect during the fax year? If "Yes," complete Schedule C, Part II. 4 X 5 Is the organization ascentro 5011(c)(4), or 5011(c)(6), or 5011(c	4				
5 Is the organization a section 501(c)(4), 501(c)(5) or 501(c)(6) organization that receives membership dues, assessments, or similar anounts as defined in Revnue, Procedure 98-191 ("Yes," complete Schedule D, Part I. 5 X 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I. 6 X 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historical traceures? If "Yes," complete Schedule D, Part II. 8 X 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts on listed in Part X, ico provide cardit counseling, debt management, credit repart, or debt negonization, related organization, hold assets in donor-restricted endowments? If "yes," complete Schedule D, Part V. 9 X 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 107 III "yes," complete Schedule D, Part V. 11 It a X 11 B dr organization report an amount for line states sector line Schedule D, Part V. 11 X 12 Did the organization report an amount for line X, line 15, that is 5% or more of its total assets reported in Part X, line 167 III "yes," complete Schedule D, Part V. 11 X 13 Did the organization report an amount for theretassets in Part X, line 12, Part VI. <td< td=""><td>-</td><td></td><td>4</td><td></td><td>Х</td></td<>	-		4		Х
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advised on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II. 6 X 6 X 6 X 6 X 6 X 6 X 6 X 6 X 6 X 6 X 6 X 6 X 6 X 6 X 6 X 6 X 7 X X X <	5				
have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If is Y Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II. is Y Did the organization receive or 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 II. is Y Did the organization factory or through a related organization, including sease in donor-restricted endowments? is x If the organization amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI. iiii X iiii X If the organization report an amount for line structures? If 'Yes,' complete Schedule D, Part VI. iiiiii X iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii		assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
"Yes," complete Schedule D, Part I, 6 X 7 Did the organization reserve or historic structures? If "Yes," complete Schedule D, Part II, 7 X 8 Did the organization reserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II, 7 X 9 Did the organization report an amount in Part X, line 21, for escrew or custodial account liability, serve as 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 VI, 8 X 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part VI, 10 X 11 the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 10 X 11 bid 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 VI 1116 X 12 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 X 116 X 13 Did the organization report an amount for investments-program related i	6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
7 Did the organization receive or hold a conservation easement, including easements to preserve peen space, the environment, historic structures? If "yes," complete Schedule D, Part II. 7 X 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "yes," complete Schedule D, Part II. 8 X 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, ior provide credit counseling, debt management, credit repair, or debt neganization, answer to any of the following questions in "Yes," complete Schedule D, Part VI. 9 X 10 Did the organization saves to any of the following questions in "Yes," complete Schedule D, Part VI. 9 X 11 If 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 VI. 111 X 12 Did the organization report an amount for investments-other securities 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 XI. 114 X 13 Lit de organization report an amount for investments-orber securities 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 XI. 114 X 14 Did the organization report an amount for in					
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 X 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 X 9 Did the organization report an amount in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, for escrew or custodial account liability, serve as a custodian tor amounts not listed in Part X, line 21, for escrew or custodial account liability, serve as a custodian tor amounts not listed in Part X, line 21, for escrew or custodial account liability, serve as a custodian tor amounts? If "Yes," complete Schedule D, Part V 8 X 10 Did the organization, answer to any of the following questions is "Yes," then complete Schedule D, Part V, VII, VIII, VIII, VII, VII, VII, VII			6		X
 Bold the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III. 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 V. Did the organization famounts in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, ince 21, for escrow or custodian donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V. 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 V. Did the organization report an amount for other assets 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 V. 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 X. Did the organization report an amount for other asset in Part X, line 13, that is 5% or more of its total assets reported in consolidated financial statements for the tax year? If "Kes," complete Schedule D, Part X. Did the organization included in consolidated financial statements for the tax year? If "Kes," complete Schedule D, Part X. Did the organization report on Part IX, column (A), line 3, more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States?. Did the organiza	7				
complete Schedule D, Part II 8 X 9 Did the organization report an amount in Part X, line 21, for serow 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 negonization services? If "ves," complete Schedule D, Part V 9 X 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "ves," complete Schedule D, Part V. 9 X 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "ves," complete Schedule D, Part V. 10 X 11 If the organization report an amount for investments-orber securities in Part X, line 10? If "ves," complete Schedule D, Part VI. 11a X 11 Did the organization report an amount for investments-rooram 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 X 11a X 11 Did the organization report an amount for other tassets 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 X 11a X 11 X Did the organization separate or consolidated financial statements for the tax year in the advesse the organization separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X 11a X </td <td></td> <td></td> <td>7</td> <td></td> <td>X</td>			7		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V 9 X 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V 10 X 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 11a X 12 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 11a X 13 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 VII 11c X 14 X 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 X 11c X 14 X Did the organization other insultines in Part X, line 25? If "Yes," complete Schedule D, Part X 11d X 110 the organization other asset in donor-ther liability or uncertain tax positions under FIA 48 (ASC 740)?	8				37
custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 9 X 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V 10 X 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IV, or X as applicable. 10 X 12 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, 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 V VII. 11a X 13 Did the organization report an amount for other tabelities 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 V VII. 11c X 14 X 11d X 11d X 15 Did the organization report an amount for other tabelities in Part X, line 13? Int is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X 11d X 16 Did the organization asparate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X 11d X 12a Did the organization included in escot	•		8		
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19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 X 19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 19 X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 1	18		10	x	
If "Yes," complete Schedule G, Part III. 19 X 20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or X	10		10	27	
20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 a X b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20 b 20 b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or X X	19		19		х
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 20b	20 a				
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or					
ISA		domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

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Part	Checklist of Required Schedules (continued)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		res	
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	x	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J.	23	X	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?			
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	0.5		v
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I.	25b		х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	230		
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV			X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
C	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		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	200		X
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	23		
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			1
	or IV, and Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	254		
26	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	35b		
36	related organization? If "Yes," complete Schedule R, Part V, line 2.	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	50		
57	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Part				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	<u></u>	
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 73			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	-		
JSA	reportable gaming (gambling) winnings to prize winners?	1c	X	(0000)
0E1030	^{1.000} 9943SK 702V 7/11/2022 1:50:20 PM V 20-7.24 0429133	⊢orm	990 PZ	(2020) AGE 4
	$\sum \sum \left(\sum $		E F	· ند ن٠

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return. 2a 410			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	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.	-		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter: 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).			
40-		12a		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes." enter the amount of tax-exempt interest received or accrued during the year 12b	120		
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		
a	Note: See the instructions for additional information the organization must report on Schedule O.	Tou		
h	Enter the amount of reserves the organization is required to maintain by the states in which			
U U	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		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
-	If "Yes," complete Form 4720, Schedule O.			

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SPONSORS FOR EDUCATIONAL OPPORTUNITY, INC.

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Part VI	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.
	Check if Schedule O contains a response or note to any line in this Part VI

Sect	ion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	28			
	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					
h	committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent	1b	28			
	-		hin with			
2	Did any officer, director, trustee, or key employee have a family relationship or a business rel		-	2		х
2	any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or ur			_		
3				3		x
4	supervision of officers, directors, trustees, or key employees to a management company or other p			4		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was fi			5		x
5	Did the organization become aware during the year of a significant diversion of the organization's a			6		X
6 7-	Did the organization have members or stockholders?			-		
7a	Did the organization have members, stockholders, or other persons who had the power to el			7a		x
ь	one or more members of the governing body?			14		
a	Are any governance decisions of the organization reserved to (or subject to approval			7b		x
0	stockholders, or persons other than the governing body?			. ~		
8	Did the organization contemporaneously document the meetings held or written actions under the veer by the following:	ыаке	ar during			
~	the year by the following: The governing body?			8a	Х	
a h	Each committee with authority to act on behalf of the governing body?			8b	Х	
ь 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot					
9	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		х
Secti	on B. Policies (This Section B requests information about policies not required by the Inte			Code	.)	<u> </u>
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of a					
	affiliates, and branches to ensure their operations are consistent with the organization's exempt pu		-	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before fi	•		11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	3				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests t					
	rise to conflicts?		-	12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the p	olicv?	If "Yes."			
	describe in Schedule O how this was done	-		12c	Х	
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review an	d ap	oroval by			
а	independent persons, comparability data, and contemporaneous substantiation of the deliberation The organization's CEO, Executive Director, or top management official			15a		х
a b	Other officers or key employees of the organization			15b		X
D.	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or simila	r arra	naement			
ivu	with a taxable entity during the year?		-	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization					
-	participation in joint venture arrangements under applicable federal tax law, and take steps to					
	organization's exempt status with respect to such arrangements?			16b		
Secti	on C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ATTACHMENT	_				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), (3)s only) available for public inspection. Indicate how you made these available. Check all that ap	990, ply.		(Sec	tion 5	601(c)
	X Own website Another's website X Upon request Other (explain on Sc	hedul	∋ O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing docum and financial statements available to the public during the tax year.	nents,	conflict o	f inter	est p	oolicy,

State the name, address, and telephone number of the person who possesses the organization's books and records ► VIJAY SANDHU, VP FINANCE 55 EXCHANGE PLACE NEW YORK, NY 10005 212-979-2040 20

JSA

Part VII	Compensation	of	Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	an
	Independent Co	ontra	actors								

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

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

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

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

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

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Former individual trustee or director rustee			an :ee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations		
			Û			ted				
(1) WILLIAM GOODLOE PRESIDENT & CEO	50.00			X				591,112.	0.	38,012.
(2) JULIAN JOHNSON	50.00	-							0	06.146
EXECUTIVE VP	0.			Х				307,151.	0.	26,146.
(3) MINDY DAVIS MANAGING DIR., CAREER GENERAL	50.00	-			x			229,237.	0.	39,860.
(4)MICHELLE DEFOSSETT	50.00							229,231.	0.	39,000.
VP OF FINANCE THRU 4/6/21	0.			x				203,582.	0.	52,884.
(5) NICOLE MCRAE	50.00							20373021		52,001
VP OF CAREER GENERAL	0.				x			196,347.	0.	42,696.
(6)MILLIE HAU	50.00									
VP OF HIGH SCHOOL	0.				X			198,539.	0.	26,350.
(7) TRICIA DALEY, DIRECTOR OF FINA	50.00									
INTERIM VP, FINANCE, EFF 3/21	0.					Х		146,961.	0.	56,870.
(8) AYSEGOL NECIOGLU	50.00									
VP OF CLINICAL COACHING	0.					Х		152,359.	0.	50,138.
(9) RAINA SINGH	50.00									
DIR. OF ALTERNATIVE INVESTMENT	0.					Х		150,444.	0.	40,061.
(10) COLIN SHAY	50.00									
DIR. OF EXECUTIVE INITIATIVES	0.					Х		149,172.	0.	40,043.
(11) CATHERINE FINNERAN	50.00									
VP OF COLLEGE SCHOLARS	0.				Х			156,226.	0.	24,772.
(12) SARAH LEVIN-GOODSTINE	50.00	-								
CHIEF ADMINISTRATIVE OFFICER	0.			Х				146,228.	0.	14,409.
(13) LESLEY STAVITSKY	50.00	-						140 -0-	_	
DIRECTOR OF CORP. & FDTN. REL.	0.					X		140,526.	0.	16,305.
(14) HENRY KRAVIS	2.00			37				~	<u>^</u>	
CHAIRMAN	0.	X		Х				0.	0.	0.

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(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles er and	s pe	ition more rson	e than of is both or/trust employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
15) AMY ELLIS-SIMON	2.00									
VICE CHAIR	0.	Х		Х				0.	0.	
16) RAMSEY SMITH	2.00									
VICE CHAIR	0.	Х		Х				0.	0.	
17) MARK BIELER	2.00									
SECRETARY	0.	Х		Х				0.	0.	
18) GILBERT GARCIA	2.00									
TREASURER	0.	Х		Х				0.	0.	
19) HARA AMDERMARIAM	2.00									
BOARD MEMBER	0.	Х						0.	0.	
20) JAMES ATTWOOD	2.00									
BOARD MEMBER	0.	Х						0.	0.	
21) FRANK BAKER	2.00									
BOARD MEMBER	0.	Х						0.	0.	
22) ORLANDO BRAVO	2.00									
BOARD MEMBER	0.	Х						0.	0.	
23) JOHN CIVANTOS	2.00									
BOARD MEMBER	0.	Х						0.	0.	
24) JOSHUA FINK	2.00									
BOARD MEMBER	0.	Х						0.	0.	
25) CARLA HARRIS	2.00									
BOARD MEMBER	0.	X						0.	0.	
1b Sub-total					_			2,767,884.	0.	468,54
c Total from continuation sheets to Part V	II, Section A				•••		►	0.	0.	
d Total (add lines 1b and 1c)							►	2,767,884.	0.	468,54
2 Total number of individuals (including but reportable compensation from the organiz		hose 33		d al	bove	e) who	o re	ceived more than	\$100,000 of	
										Yes
3 Did the organization list any former										

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual.
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 2		
2 Total number of independent contractors (including but not limited to those more than \$100,000 in compensation from the organization ► 11	e listed above) who received	
		000

Х

Х

4

5

10	rt VII Section A. Officers, Directors,	Trustees, Re	ey ⊏п	рю	yee	es,	and r	ligi	nest Compensat	ed Employees (c	ontinuea)
	(A) Name and title	(B) Average hours per week (list any hours for	box, office	not ch unles er and	s per l a di	ition more rson irect	e than o is both or/trust	an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
26)	CHRIS LEE	2.00									
	BOARD MEMBER	0.	Х						0	. 0.	
27)	NINON MARAPACHI	2.00									
	BOARD MEMBER	0.	Х						0	. 0.	
28)	MAYBEL MARTE	2.00									
	BOARD MEMBER	0.	Х						0	. 0.	
29)	KENNETH MEHLMAN	2.00									
	BOARD MEMBER	0.	Х						0	. 0.	
30)	KAMMY MOALEMZADEH	2.00									
	BOARD MEMBER	0.	Х						0	. 0.	
31)	VERDUN PERRY	2.00									
	BOARD MEMBER	0.	Х						0	. 0.	
32)	JOSEPH PLUMERI II	2.00									
	BOARD MEMBER	0.	Х						0	. 0.	
33)	OSCAR SALAZAR	2.00									
	BOARD MEMBER	0.	Х						0	. 0.	
34)	EDWARD TAM	2.00									
	BOARD MEMBER	0.	Х						0	. 0.	
35)	KATHRYN WYLDE	2.00									
	BOARD MEMBER	0.	Х						0	. 0.	
36)	MAYA CHORENGEL	2.00									
	BOARD MEMBER EFF. 10/1/20	0.	Х						0	. 0.	
c d	Sub-total Total from continuation sheets to Part VII Total (add lines 1b and 1c)			 			· · ·		0.	0.	(
2	Total number of individuals (including but n reportable compensation from the organiza		hose 33		d ab	DOVe	e) who	o re	ceived more than	\$100,000 of	Yes No
3	Did the organization list any former o employee on line 1a? If "Yes," complete Sch										3 X
4	For any individual listed on line 1a, is th organization and related organizations <i>individual</i>	greater than	\$15	50,00)0? [`]	lf	"Yes	;," (complete Schedu	le J for such	4 X
5	Did any person listed on line 1a receive for services rendered to the organization? If	or accrue col	mpen	satio	on fi	rom	n any	uni	related organizati	on or individual	5 X

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

	(A) Name and business address	(B) Description of services	(C) Compensation
2	Total number of independent contractors (including but not limited to those more than \$100,000 in compensation from the organization ►		

	(A) Name and title	(B) Average hours per week (list any hours for	box, office	not ch unles r and	s per La di	tion more rson i	than o is both or/trust	an ee)	(D) Reportable compensation from the	(E) Reporta compensatio related organizat	on from	an com	(F) stimated nount o other pensati	of
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-	MISC)	org and	om the anizatio d related anizatio	on ed
37) HYTHEM T. EL-NAZER BOARD MEMBER EFF. 10/1/20	2.00	x						0		0.			
38) JULIAN SALISBURY	2.00								·				
39	BOARD MEMBER EFF. 10/1/20) MILTON BERLINSKI	0. 2.00	X						0		0.			
4.0	BOARD MEMBER EFF. 4/8/21	0.	Х						0		0.			
40) KEITH WOFFORD BOARD MEMBER EFF. 7/29/21	2.00 0.	Х						0		Ο.			
41) NICHOLAS HUMPHRIES BOARD MEMBER EFF. 7/29/21	2.00	x						0		0.			
	b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)	ection A	· · ·	 					0.		0.			(
2	Total number of individuals (including but not reportable compensation from the organization		nose I 33		d ab	ove	e) who	o re	ceived more than	\$100,000 c	of			
3	Did the organization list any former offic	er, directo	r. or	tru	stee	ə. k	(ev e	emp	lovee, or highes	compens	ated		Yes	No
	employee on line 1a? If "Yes," complete Schedu											3		Х
4	organization and related organizations gre	eater than	\$15	0,00	00?	lf	"Yes	s," (complete Schedu	sation from <i>le J for s</i>	the such			
5	<i>individual</i> Did any person listed on line 1a receive or									on or indivi	dual	4	X	
6	for services rendered to the organization? If "Ye ection B. Independent Contractors	es," comple	te Sch	nedu	le J	for	such	per	son	<u></u>		5		Х
	Complete this table for your five highest com compensation from the organization. Report c year.													
	(A) Name and business add	ress							(B) Description of se	rvices	C	(C) ompens		
_														
								-						

Form 990 (2020)

Part VIII Statement of Revenue

		Check if Schedule O contains a respon	se or note to ar	ny line in this Part ∖	/111		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ដ	1a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues					
٥Ĕ	с	Fundraising events	12,616,864.				
ifts ir A	d	Related organizations					
ji g	е	Government grants (contributions) 1e	2,758,311.				
Sin	f	All other contributions, gifts, grants,					
erio		and similar amounts not included above 1 1f	32,763,164.				
Ęż	g	Noncash contributions included in					
df		lines 1a-1f					
ရှိပိ	h	Total. Add lines 1a-1f		48,138,339.			
			Business Code				
e	2a						
Program Service Revenue	b						
s nu	c						
eve	d						
ogr R	e						
Ĩ.	f	All other program service revenue					
	g	Total. Add lines 2a-2f	►	0.			
	3	Investment income (including dividends,					
		other similar amounts)		237,357.			237,357.
	4	Income from investment of tax-exempt bond		0.			
	5	Royalties		0.			
		(i) Real	(ii) Personal				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	с	Rental income or (loss) 6c					
	d	Net rental income or (loss)	• • • • • •	0.			
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets					
		other than inventory 7a 664,516.					
P	b	Less: cost or other basis					
Revenue		and sales expenses 7b 659,193.					
ev	с	Gain or (loss) 7c 5,323.					
	d	Net gain or (loss)	<u></u> ▶	6,323.			6,323.
Other	8a	Gross income from fundraising					
0		events (not including \$12,616,864.					
		of contributions reported on line					
		1c). See Part IV, line 18	68,170.				
	b	Less: direct expenses	335,488.				
	с	Net income or (loss) from fundraising events.		-267,318.			-267,318.
	9a	Gross income from gaming					
		activities. See Part IV, line 19 9a	0.				
	b	Less: direct expenses	0.				
	c	Net income or (loss) from gaming activities.	<u></u>	0.			
	10a	Gross sales of inventory, less					
		returns and allowances 10a	0.				
	b	Less: cost of goods sold	0.				
	С	Net income or (loss) from sales of inventory		0.			
ns		ļ	Business Code				
leo ue	11a						
Miscellaneous Revenue	b						
Sev	с						
Mis	d	All other revenue					
		Total. Add lines 11a-11d		0.			
JSA	12	Total revenue. See instructions	🕨	48,114,701.			-23,638.
JSA							Form 990 (2020)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX Х (C) Management and (A) Total expenses (B) Program service (D) Fundraising Do not include amounts reported on lines 6b. 7b. 8b. 9b. and 10b of Part VIII. general expenses expenses expenses 1 Grants and other assistance to domestic organizations 11,110 11,110 and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic 1,086,294 1,086,294. individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and 0 foreign individuals. See Part IV, lines 15 and 16 Ο 4 Benefits paid to or for members 5 Compensation of current officers, directors, 2,407,404. 2,002,541. 219,845 185,018. trustees, and key employees 6 Compensation not included above to disgualified persons (as defined under section 4958(f)(1)) and 0 persons described in section 4958(c)(3)(B) 15,229,964. 12,856,698. 1,187,159 1,186,107. 7 Other salaries and wages 8 Pension plan accruals and contributions (include 626,017 489,526. 90,975 45,516. section 401(k) and 403(b) employer contributions) 1,943,725. 361,228 180,728. 2,485,681 9 Other employee benefits 101,565. 1,396,897. 1,092,330. 203,002. Payroll taxes 10 11 Fees for services (nonemployees): 0 a Management 271,665. 271,665 **b** Legal 72,214. 72,214. c Accounting 0 d Lobbying 0 e Professional fundraising services. See Part IV, line 17. 0 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column 4,980,525 4,477,328. 207,554 295,643. (A) amount, list line 11g expenses on Schedule O.) $\ensuremath{ATCH}\xspace{-3}$ 0 12 Advertising and promotion 441,790. 27,498. 344,695 69,597. 13 Office expenses 1,461,433. 1,228,929. 151,356. 81,148. 14 Information technology 0 15 Royalties 750,060. 584,891. 120,360 44,809. Occupancy 16 54,289. 60,569. 3,025 3,255. 17 Travel Payments of travel or entertainment expenses 18 0 for any federal, state, or local public officials 45,718 40,977. 2,284 2,457. 19 Conferences, conventions, and meetings 0 20 0 21 Payments to affiliates 563,828. 413,590. 120,547 29,691. 22 Depreciation, depletion, and amortization 91,378. 46,804. 34,730. 9,844. Insurance 23 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a EQUIPMENT MAINTENANCE 397,594. 295,971. 80,868. 20,755. **b**PROGRAM SUPPLIES 284,134. 268,566. 12,304 3,264. cMISCELLANEOUS EXPENSES 261,297. 168,087. 91,576 1,634. d e All other expenses 32,925,572. 27,406,351. 3,300,289 2,218,932. 25 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the 26 organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if

0

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following SOP 98-2 (ASC 958-720)

Form **990** (2020)

SPONSORS FOR EDUCATIONAL OPPORTUNITY, INC. 13-2578670

_	n 990 (Page 11
P	art X		ort V		
		Check if Schedule O contains a response or note to any line in this P			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	1,995.	1	1,995.
	2	Savings and temporary cash investments.	14,543,715.	2	28,868,062.
	3	Pledges and grants receivable, net	12,713,614.	3	14,224,562.
	4	Accounts receivable, net	0.	4	0.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	0.	5	0.
	6	Loans and other receivables from other disqualified persons (as defined			
	Ŭ	under section $4958(f)(1)$, and persons described in section $4958(c)(3)(B)$.	0.	6	0.
s	7	Notes and loans receivable, net	0.	7	0.
Assets	8	Inventories for sale or use	0.	8	0.
As	9	Prepaid expenses and deferred charges	422,640.	9	355,568.
	_	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 13,759,112.			
	b	Less: accumulated depreciation 10b 6,763,998.	7,335,409.	10c	6,995,114.
	11	Investments - publicly traded securities.	15,351,925.	11	17,464,085.
	12	Investments - other securities. See Part IV, line 11	0.	12	0.
	13	Investments - program-related. See Part IV, line 11	0.	13	0.
	14	Intangible assets	0.	14	0.
	15	Other assets. See Part IV, line 11	1,326,957.	15	2,605,197.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	51,696,255.	16	70,514,583.
	17	Accounts payable and accrued expenses	973,958.	17	2,509,414.
	18	Grants payable	0.	18	0.
	19	Deferred revenue	0.	19	0.
	20	Tax-exempt bond liabilities	0.	20	0.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0.	21	0.
es	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
iab		controlled entity or family member of any of these persons	0.	22	0.
-	23	Secured mortgages and notes payable to unrelated third parties	0.	23	0.
	24	Unsecured notes and loans payable to unrelated third parties	2,758,311.	24	0.
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	1,415,098.	25	3,169,365.
	26	Total liabilities. Add lines 17 through 25	5,147,367.	26	5,678,779.
ces		Organizations that follow FASB ASC 958, check here ► X and complete lines 27, 28, 32, and 33.			
alaı	27	Net assets without donor restrictions	32,574,909.	27	49,906,906.
ñ	28	Net assets with donor restrictions.	13,973,979.	28	14,928,898.
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here ► and complete lines 29 through 33.			
000	29	Capital stock or trust principal, or current funds		29	
sets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Ass	31	Retained earnings, endowment, accumulated income, or other funds		31	
et	32	Total net assets or fund balances	46,548,888.	32	64,835,804.
z	33	Total liabilities and net assets/fund balances	51,696,255.	33	70,514,583.

Form 990 (2020)

JSA

SPONSORS FOR EDUCATIONAL OPPORTUNITY, INC. 13-2578670

Form 99	90 (2020)				Pa	ge 12
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					_
1	Total revenue (must equal Part VIII, column (A), line 12)	1			14,7	
2	Total expenses (must equal Part IX, column (A), line 25)	2			25,5	
3	Revenue less expenses. Subtract line 2 from line 1	3				L29.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4				388.
5	Net unrealized gains (losses) on investments	5		3,0	97,	787.
6	Donated services and use of facilities	6				0.
7	Investment expenses	7				0.
8	Prior period adjustments	8				0.
9	Other changes in net assets or fund balances (explain on Schedule O).	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line		_			
	32, column (B))	10	6	4,8	35,8	304.
Part						
	Check if Schedule O contains a response or note to any line in this Part XII					
-			Г		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		<u> </u>			
	If the organization changed its method of accounting from a prior year or checked "Other," ex	kpiain	in			
-	Schedule O.			0-		x
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?.			2a		
	If "Yes," check a box below to indicate whether the financial statements for the year were com reviewed on a separate basis, consolidated basis, or both:	piled	or			
_				2b	х	
b	Were the organization's financial statements audited by an independent accountant?			20	21	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit separate basis, consolidated basis, or both:	ea or	na			
	X Separate basis Consolidated basis Both consolidated and separate basis					
-			. af			
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ove the audit, review, or compilation of its financial statements and selection of an independent accounta	-		2c	x	
	If the organization changed either its oversight process or selection process during the tax year, ex		· · -			
	Schedule O.	piairi				
2 ~	As a result of a federal award, was the organization required to undergo an audit or audits as set for	th in t	ho			
Ja	Single Audit Act and OMB Circular A-133?			3a		х
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	erao	· · ⊢			
, N	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such au	•		3b		
				F	000	(0000)

Form **990** (2020)

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SCHEDU	LE A
(Form 990	or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047 20

		nt of the Treasury evenue Service	1	Go to www.irs.go	v/Form990 for instruction	ons and t	he latest i	nformation.	Open to Public Inspection
Nam	e of t	he organization						Employer identifi	cation number
1				OPPORTUNITY,				13-25786	
	rt I				<u> </u>			art.) See instructions	3
	org	1	-		t is: (For lines 1 through	-	-		
1					tion of churches desc				
2		í			. (Attach Schedule E				
3		-	-		rganization described				(III) Enter the
4		hospital's nan	-	-	conjunction with a no:	spital de	Scribed II	n section 170(b)(1)(A)	(III). Enter the
5					a college or universit		d or one	vrated by a governme	ntal unit described in
Ŭ		-	-	Complete Part II.)	a concept of aniveron	.y owno		aloa by a governine	
6		-			rnmental unit describe	d in sect	tion 170(b)(1)(A)(v).	
7	Х	1	-	-			-		om the general public
		-		(1)(A)(vi). (Compl		••	0		0 1
8		1			b)(1)(A)(vi). (Complete	Part II.)			
9		An agricultura	I research or	ganization describe	ed in section 170(b)(1)(A)(ix)	operated	I in conjunction with a	land-grant college
		or university of	or a non-land-	grant college of ag	griculture (see instruct	ions). E	nter the	name, city, and state o	f the college or
		university:							
10 11		receipts from support from acquired by th	activities rela gross investm ne organizatio	ted to its exempt f ient income and u n after June 30, 1	functions, subject to c	ertain ex able inco (a)(2). (0	xceptions ome (les: Complete		n 331/3 % of its
12		0	0	•					arry out the purposes
		of one or mo	re publicly su	pported organizati	ions described in sec	tion 509	(a)(1) or	• section 509(a)(2). S	ee section 509(a)(3).
		Check the box	t in lines 12a t	hrough 12d that d	escribes the type of s	upporting	g organiz	zation and complete lir	nes 12e, 12f, and 12g.
а		Type I. A ຣເ	upporting orga	anization operated	, supervised, or contr	olled by	its supp	orted organization(s),	typically by giving
		the supporte	ed organizatio	on(s) the power to	regularly appoint or e	lect a m	ajority of	the directors or truste	es of the
	_	supporting of	organization.	You must complet	te Part IV, Sections A	and B.			
b								supported organization	
			-		-	the sam	le persor	ns that control or man	age the supported
-		-		-	, Sections A and C.			n	ha inte enete el acitle
С				- · ·	·			n with, and functional	ly integrated with,
d			-		ns). You must comple			ection with its suppor	tod organization(s)
u								oution requirement and	
			-		omplete Part IV, Sect				
е		-	-		-			hat it is a Type I, Type I	I. Type III
			-		ionally integrated sup				·, ·, ·, ·, · · · · ·
f	En		•	••			•		
g	Pro	ovide the follow	ving information	on about the suppo	orted organization(s).				
	(i) N	lame of supported	organization	(ii) EIN	(iii) Type of organization		organization	(v) Amount of monetary	(vi) Amount of
					(described on lines 1-10 above (see instructions))		ur governing ment?	support (see instructions)	other support (see instructions)
						Yes	No	,	,
(A)									
(B)									
(C)									
(D)									
(E)									
Tota	al								
For	Panei	rwork Reduction A	Act Notice, see th	e Instructions for Form	990 or 990-EZ.			Schedule A	(Form 990 or 990-EZ) 2020

0429133

Schedule A (Form 990 or 990-EZ) 2020

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	19,148,581.	19,771,155.	26,046,060.	34,898,801.	48,138,339.	148,002,936.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	19,148,581.	19,771,155.	26,046,060.	34,898,801.	48,138,339.	148,002,936.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
~	shown on line 11, column (f)						12,294,422.
$\frac{6}{2}$	Public support. Subtract line 5 from line 4						135,708,514.
	tion B. Total Support	(-) 0040	(1-) 0047	(-) 0040	(-1) 0040	(-) 0000	(0) T-+-1
	ndar year (or fiscal year beginning in) >	(a) 2016	(b) 2017	(c) 2018 26,046,060.	(d) 2019 34,898,801.	(e) 2020 48,138,339.	(f) Total
7 8	Amounts from line 4. Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from	223,745.	267,898.	323,991.	281,675.	237,357.	1,334,666.
9	similar sources Net income from unrelated business activities, whether or not the business is regularly carried on	22077101		525,7721	20170701	207,0011	0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
11	Total support. Add lines 7 through 10						149,337,602.
12	Gross receipts from related activities, etc. (s	ee instructions) .				12	
13	First 5 years. If the Form 990 is for organization, check this box and stop here.	the organizatio	on's first, second	, third, fourth,	or fifth tax yea	r as a section	501(c)(3) ▶
Sec	tion C. Computation of Public Supp	port Percenta	ge				
14	Public support percentage for 2020 (lin	ne 6, column (f)	, divided by line	11, column (f))			90.87 %
15	Public support percentage from 2019					15	89.01 %
16a	331/3% support test - 2020. If the org						
	box and stop here. The organization qu						
b	331/3% support test - 2019. If the org						
	this box and stop here. The organization	•		-			
17a	10%-facts-and-circumstances test - 2						
	10% or more, and if the organization					-	-
	Part VI how the organization meets t			-	-		
	organization						
b	10%-facts-and-circumstances test - 2	-	•				
	15 is 10% or more, and if the organiz					-	
	in Part VI how the organization meets			•	•		
	organization						
18	Private foundation. If the organization						
	instructions						<u> ► ∟</u>

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020

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

 (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.

 If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support								
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e)	2020	(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 under section 513								
4	Tax revenues levied for the								
	organization's benefit and either paid to								
	or expended on its behalf								
5	The value of services or facilities								
	furnished by a governmental unit to the								
	organization without charge								
6	Total. Add lines 1 through 5								
	Amounts included on lines 1, 2, and 3								
10	received from disqualified persons								
b	Amounts included on lines 2 and 3								
	received from other than disqualified								
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year								
~	Add lines 7a and 7b.								
8	Public support. (Subtract line 7c from								
-	line 6.)								
Sec	tion B. Total Support								
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e)	2020	(f) Total	
9	Amounts from line 6.	.,					,	.,	
	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								
c	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 (Explain in Part VI.)								
13	Total support. (Add lines 9, 10c, 11,								
15	and 12.)								
14	First 5 years. If the Form 990 is for	the organizat	ion's first secon	d third fourth	or fifth tax vo	ar as	a section	501(c)(3)	
.4	organization, check this box and stop here	-			•				
Sec	tion C. Computation of Public Sup			<u></u>		<u></u>			
15	Public support percentage for 2020 (line 8	•		ımn (f))		15			%
16	Public support percentage from 2019 Sche					16			%
	tion D. Computation of Investmen					10			/0
17	Investment income percentage for 2020 (li			13 column (f))		17			%
									<u>%</u>
18	Investment income percentage from 2019 331/3% support tests - 2020. If the or						n 334/20/		70
199									
ь.	17 is not more than 331/3%, check this		-				-		
b	331/3% support tests - 2019. If the org								
	line 18 is not more than 331/3%, check		•	•		•••	0	F	-
20 JSA	Private foundation. If the organization of	and HOL CHECK	a bux on line 1	4, 19a, of 19b,					2020
0E122	^{21 1.000} 9943SK 702V 7/11/2022 1	:50:20 PM	V 20-7 24	ſ	429133	Sheuul	5 A (I UIII 9	90 or 990-EZ) : PAGE	

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in Part VI.*
- **10 a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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 Schedule A (Form 990 or 990-EZ) 2020

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
с	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No

1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

Section 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).	1		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1		
2	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported nization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how</i>			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's</i>			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).						
а	The organization satisfied the Activities Test. Complete line 2 below.						
b	The organization is the parent of each of its supported organizations. Complete line 3 below.						
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (se	e instru	uctions	s).			
2	Activities Test. Answer lines 2a and 2b below.		Yes	No			
2	Activities Test. Answer lines za and zo below.						

а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify
	those supported organizations and explain how these activities directly furthered their exempt purposes,
	how the organization was responsive to those supported organizations, and how the organization determined
	that these activities constituted substantially all of its activities.

- b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in 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.
- Parent of Supported Organizations. Answer lines 3a and 3b below. 3
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

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2a

2b

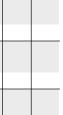
3a

3b

13-2578670

1

2



(B) Current Year

SPONSORS FOR EDUCATIONAL OPPO	DRTUNITY,	INC. 13-	-2578670
Schedule A (Form 990 or 990-EZ) 2020			Pa
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting	Organizatio	ns	
1 Check here if the organization satisfied the Integral Part Test as a que instructions. All other Type III non-functionally integrated supporting			,
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Ye (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 gross income or for management, conservation, or maintenance of proper held for production of income (see instructions)			
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 Ye (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			

	neid for production of income (see instructions)	0		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount			(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):	1e		
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Se	ction C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2020

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Part	V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizat	t ions (continued)		
Sect	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish ex	kempt purposes		1	
2	Amounts paid to perform activity that directly furthers exer	npt purposes of support	ed		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpo	zations	3		
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - p	rovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which	the organization is resp	onsive		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2020	าร	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020				
	(reasonable cause required - <i>explain in Part VI)</i> . See				
	instructions.				
3	Excess distributions carryover, if any, to 2020				
a	From 2015				
b	From 2016				
C	From 2017				
d	From 2018				
e	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
<u>h</u>	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from				
	Section D, line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2020 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if				
	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, <i>explain in Part VI.</i> See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, <i>explain in</i>				
_	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
 	Excess from 2016				
	Excess from 2017				
<u>م</u>	Excess from 2018				
	Excess from 2019				
e	Excess from 2020		Caba	dula	A (Form 990 or 990-E7) 2020

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020

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

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

Name of the organization

SPONSORS FOR EDUCATIONAL OPPORTUNITY, INC.

Employer identification number

13-2578670

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year * \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	N/A	\$3,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2	N/A	\$2,758,311.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3	N/A	\$1,800,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
4	N/A	\$1,674,457.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
5	N/A	\$1,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
6	N/A	\$1,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

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

Name of organization SPONSORS FOR EDUCATIONAL OPPORTUNITY, INC. Employer identification number

13-2578670

Part II	Noncash Property (see instructions). Use duplicate copies	of Part II if additional space is ne	eded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

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

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Schedule B (Form 990, 9	990-EZ, or 990-PF) (2020))			Page	; 4
Name of organization	SPONSORS	FOR	EDUCATIONAL	OPPORTUNITY,	INC.	Employer identification number	_
						13-2578670	

				13-25/86/0	
Part III	Exclusively religious, charitable, etc. (10) that total more than \$1,000 for the following line entry. For organizati contributions of \$1,000 or less for the Use duplicate copies of Part III if additi	the year from any ons completing Par e year. (Enter this in	one contributor, t III, enter the tota formation once.	. Complete columns (a) through (e) a al of <i>exclusively</i> religious, charitable, e	
(a) No. from	(b) Purpose of gift	(c) Use		(d) Description of how gift is held	
Part I			- <u>g</u>		
				· · ·	
		(e) Transf	er of gift		
	Transferee's name, address, ar	nd ZIP + 4	Relat	ionship of transferor to transferee	
(a) No. from					
Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held	
		(a) T ran at	an of ailt		
	Transferee's name, address, ar	(e) Transf		ionship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held	
		(e) Transf	-		
	Transferee's name, address, ar	nd ZIP + 4	Relat	ionship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held	
				·	
				· · · · · · · · · · · · · · · · · · ·	
	Transformale name address or	(e) Transf	-	in align of the set of	
	Transferee's name, address, ar	iu 2IF + 4	Relat	ionship of transferor to transferee	
JSA				Schedule B (Form 990, 990-EZ, or 990-PF) (2	:020)

	IEDULE D rm 990)	Supplem	ental Financia	I Statements	6	OMB No. 1545-0047
(FUI	iii 990)		the organization answere			2020
		Part IV, line 6, 7,	8, 9, 10, 11a, 11b, 11c, 1		2b.	
	rtment of the Treasury al Revenue Service	Go to www.irs.gov	Attach to Form 99 /Form990 for instructions		ation	Open to Public Inspection
	e of the organization				Employer identificat	
SPC	NSORS FOR EDU	JCATIONAL OPPORTUNITY,	INC.		13-257867	70
		tions Maintaining Donor Adv		Similar Funds or	Accounts.	
		e if the organization answered				
		<u>_</u>	(a) Donor advis	sed funds	(b) Funds and	other accounts
1	Total number at e	nd of year				
2		of contributions to (during year)				
3		of grants from (during year)				
4		at end of year				
5	Did the organizati	ion inform all donors and donor	advisors in writing the	at the assets held i	in donor advised	
	funds are the orga	inization's property, subject to the	e organization's exclusiv	ve legal control?		Yes No
6	Did the organizati	on inform all grantees, donors, a	and donor advisors in v	vriting that grant fu	nds can be used	
		e purposes and not for the bene				
		issible private benefit?				Yes No
Pa		tion Easements.	") /			
		e if the organization answered				
1		servation easements held by the				
		n of land for public use (for example	, recreation or education)		of a historically imp	
		of natural habitat		Preservation of	of a certified histor	ic structure
2		n of open space I through 2d if the organization h	ald a qualified concerv	tion contribution in	the form of a cons	orvation
2	-	ast day of the tax year.	elu a quaimeu conserva			End of the Tax Year
а		onservation easements		-	2a	
a b		tricted by conservation easements			2b	
c	-	vation easements on a certified			2c	
d		rvation easements included in (c				
u		isted in the National Register			2d	
3		rvation easements modified, tra			nated by the orga	nization during the
	tax year ►		, , , ,	<u>J</u>		5
4	•	where property subject to conse	rvation easement is loca	ated ►		
5		ation have a written policy reg			on, handling of	
	violations, and enf	orcement of the conservation ea	sements it holds?			Yes No
6	Staff and volunteer	hours devoted to monitoring, insp	ecting, handling of violat	ions, and enforcing	conservation easeme	ents during the year
	▶					
7		es incurred in monitoring, inspec	ting, handling of violatio	ns, and enforcing co	onservation easem	ents during the year
	▶\$					
8		vation easement reported on line 2				
•)(4)(B)(ii)?				
9		be how the organization reports			•	
		d include, if applicable, the text of counting for conservation easeme		ganization's financia		lescribes the
Pa		tions Maintaining Collections		easures or Other	Similar Assets	
i a		if the organization answered				
1.2	•	· · · · · · · · · · · · · · · · · · ·			statement and b	alanco shoot works
1a	of art, historical 1	n elected, as permitted under FA treasures, or other similar asse	ts held for public exh	ibition, education,	or research in fu	rtherance of public
_	service, provide in	Part XIII the text of the footnote	to its financial stateme	nts that describes th	ese items.	
b		n elected, as permitted under FA				
		sures, or other similar assets he ing amounts relating to these iter		equivation, or rese	arch in furtherand	e or public service,
		ded on Form 990, Part VIII, line 1			▶ \$	
		d in Form 990, Part X.				
2		n received or held works of a				
	•	s required to be reported under F				
а	•	on Form 990. Part VIII. line 1.	•		▶ \$	

	Assets inc	luded ir	Form	990,	, Part	Х.								<u></u>					 	
For	Paperwork R	eductior	n Act N	otice	, see t	the l	ns	tru	ctic	ons	fo	r F	or	m 9	990	0.				

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▶ \$

SPONSORS FOR EDUCATIONAL OPPORTUNITY, INC. 13-2578670

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use collection items (check all that apply): a Public exhibition d Loan or exchange program b Scholarly research e Other	
collection items (check all that apply): a Public exhibition d Loan or exchange program	
a Public exhibition d Loan or exchange program	Part
	n Part
	Part
	Part
	Fail
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in XIII.	
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	No
Part IV Escrow and Custodial Arrangements.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form	
990, Part X, line 21.	
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not	٦
included on Form 990, Part X?	No
b If "Yes," explain the arrangement in Part XIII and complete the following table:	
Amount	
c Beginning balance	
d Additions during the year	
e Distributions during the year	
f Ending balance	
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	No
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII	
Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.	
	hook
	, 550.
b Contributions	
c Net investment earnings, gains, and losses 3,001,061. 1,944,852. 557,958. 1,130,231. 802	,849
	,049
d Grants or scholarships	
e Other expenditures for facilities	
and programs	
f Administrative expenses	105
	, 105.
 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ 90.7500 % 	
b Permanent endowment ▶ 4.8600 % c Term endowment ▶ 4.3900 %	
The percentages on lines 2a, 2b, and 2c should equal 100%.	
3a Are there endowment funds not in the possession of the organization that are held and administered for the	
organization by:	No
(i) Unrelated organizations	X
(i) Related organizations	X
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	
4 Describe in Part XIII the intended uses of the organization's endowment funds.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 1).
Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value (investment) (other)	
1a Land Land Content Content	
b Buildings 10,426,111. 5,278,133. 5,147,	978.
c Leasehold improvements 14,920. 14,920.	
d Equipment. 3,318,081. 1,470,945. 1,847,	136.
e Other	
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 6,995,	114.

Schedule D (Form 990) 2020

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Schedule D (Form 990	33012	
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Schedule D (Form 990) 2020			Page 3
Part VII Investments - Other Securities. Complete if the organization answered	"Yes" on Form 990	, Part IV, line 11b. See Form 990, I	Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuatio Cost or end-of-year market	
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F) (G)			
(H)			
(1) Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) . ►			
Part VIII Investments - Program Related. Complete if the organization answered	"Yes" on Form 990	, Part IV, line 11c. See Form 990, I	Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuatio	
		Cost or end-of-year market	value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets. Complete if the organization answered		, Part IV, line 11d. See Form 990, I	
	scription		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8) (9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) li	ine 15.)	•	
Part X Other Liabilities.			
Complete if the organization answered line 25.	"Yes" on Form 990	, Part IV, line 11e or 11f. See Form	ı 990, Part X,
1. (a) Descrip	tion of liability		(b) Book value
(1) Federal income taxes			
(2) RETIREMENT PLAN LIABILITY			1,719,664.
(3) OTHER LIABILITIES			1,449,701.
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)		· · · · · ·	3,169,365.
2. Liability for uncertain tax positions. In Part XIII, provide the			
organization's liability for uncertain tax positions under FASB A	ASC 740. Check here if	the text of the footnote has been provide	d in Part XIII . X

Schedu	le D (Form 990) 2020		Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	51,315,111.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
2 a	Net unrealized gains (losses) on investments		
a b	Donated services and use of facilities		
	Recoveries of prior year grants.		
ب م	Other (Describe in Part XIII.)		
d	Add lines 2a through 2d	2e	3,200,410.
e	Subtract line 2e from line 1	3	48,114,701.
3	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
4			
a		-	
b	Other (Describe in Part XIII.) 4b Add lines 4a and 4b	4c	
с 5	Total revenue. Add lines 3 and 4c . (<i>This must equal Form 990, Part I, line 12.</i>)	5	48,114,701.
Part		-	
i art	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	33,028,195.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
с	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	102,623.
3	Subtract line 2e from line 1	3	32,925,572.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
с	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).	5	32,925,572.
	XIII Supplemental Information.		
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; F		
z; Par	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform	nation.	

SEE PAGE 5

Schedule D (Form 990) 2020

Part XIII Supplemental Information (continued)

PART V, LINE 4:

THE PERMANENT ENDOWMENT REFLECTS THE WISHES OF THE DONORS TO PROVIDE GENERAL SUPPORT WHILE LEAVING THE CORPUS INTACT. THE BOARD DESIGNATED ENDOWMENT SERVES AS THE ACCUMULATED BUDGET SURPLUSES SERVING AS A GENERAL RESERVE.

PART X, LINE 2:

SEO IS A NOT-FOR-PROFIT ORGANIZATION EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC) AND, THEREFORE, HAS MADE NO PROVISIONS FOR INCOME TAXES IN THE ACCOMPANYING FINANCIAL STATEMENTS. IN ADDITION, SEO HAS BEEN CLASSIFIED AS A PUBLIC CHARITY UNDER SECTIONS 509(A)(1) AND 170(B)(1)(A)(VI) OF THE IRC.

SEO HAS ANALYZED THE TAX POSITION TAKEN IN ITS FILINGS WITH THE INTERNAL REVENUE SERVICE (IRS) AND STATE JURISDICTION WHERE IT OPERATES. SEO BELIEVES THAT ITS INCOME TAX FILING POSITION WILL BE SUSTAINED UPON EXAMINATION AND DOES NOT ANTICIPATE ANY ADJUSTMENTS THAT WOULD RESULT IN A MATERIAL ADVERSE EFFECT ON SEO'S FINANCIAL CONDITION, RESULTS OF OPERATION OR CASH FLOWS. ACCORDINGLY, SEO HAS NOT RECORDED ANY RESERVES, OR RELATED ACCRUALS FOR INTEREST AND PENALTIES FOR UNCERTAIN TAX POSITIONS AT AUGUST 31, 2021 AND 2020.

Schedule D (Form 990) 2020

SCHEDULE G (Form 990 or 990-EZ)	Complete if t	Information Re he organization answer organization entered n	red "Yes" on nore than \$1	Form 990, F 5,000 on Fo	Part IV, line 17, 18, or 1 rm 990-EZ, line 6a.		OMB No. 1545-0047
Department of the Treasury	G	► Attach o to www.irs.gov/Form	to Form 990 990 for instr				Open to Public Inspection
Internal Revenue Service Name of the organization	, ,	• •• •• •• •• •• •• ••				Employer identification	
SPONSORS FOR EDU	JCATIONAL OPPO	RTUNITY, INC.				13-2578670	
	g Activities. Comp EZ filers are not re	-			Yes" on Form 99	90, Part IV, line 1	7.
1 Indicate whether	the organization rais	sed funds through		•			
a Mail solicita		е			non-government g	•	
	email solicitations	f			government grant	S	
c Phone solici		g		siai tunura	ising events		
2a Did the organiza		r oral agreement w	vith any ind	tividual (ir	ocluding officers d	lirectors trustees	
or key employee b If "Yes," list the	is listed in Form 990 10 highest paid individent to the second se	, Part VII) or entity viduals or entities	in connec	tion with p	professional fundra	ising services?	Yes No fundraiser is to be
(i) Name and addr or entity (fu		(ii) Activity	custody o	draiser have r control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total				►			
3 List all states in registration or lic	which the organizat	tion is registered c	or licensed	to solicit	contributions or	has been notified	it is exempt from

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Schedule G (Form 990 or 990-EZ) 2020

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

			(a) Event #1 AWARDS DINNER	(b) Event #2 SF ACHIEVEMENT	(c) Other events 2.	(d) Total events (add col. (a) through
ъ			(event type)	(event type)	(total number)	col. (c))
Kevenue	1	Gross receipts	8,922,506.	3,117,587.	644,941.	12,685,034
Ž	2	Less: Contributions Gross income (line 1 minus	8,901,506.	3,117,137.	598,221.	12,616,864
	5	line 2)	21,000.	450.	46,720.	68,170
	4	Cash prizes				
,	5	Noncash prizes				
	6	Rent/facility costs				
חוופרו בעהפוופפס	7	Food and beverages	26.	6,416.		6,442
ב ב	8	Entertainment	51,300.	52,737.	48,957.	152,994
	9	Other direct expenses	54,712.	75,913.	45,427.	176,052
	11	Direct expense summary. Add lin Net income summary. Subtract li Gaming. Complete if the org \$15,000 on Form 990-EZ, lin	ne 10 from line 3, colu anization answered "	umn (d)	<u> </u>	-267,318
			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
<u>אַ</u>	1					
		Gross revenue				
2020		Gross revenue Cash prizes				
cacijadyj	2					
חופתו בעליפווספס	2 3	Cash prizes				
	2 3 4	Cash prizes				
	2 3 4 5	Cash prizes Noncash prizes Rent/facility costs			Yes% No	
	2 3 4 5 6	Cash prizes	Yes %	oYes% No	<u> </u>	
	2 3 4 5 6 7	Cash prizes	Yes %	bYes% No 	No►	
2	2 3 4 5 6 7 8	Cash prizes	Yes % No % ubtract line 7 from line anization conducts ga duct gaming activities	Mo Mo Mo Mo Mo Mo Mo Mo Mo Mo	No ►	
5 9 a	2 3 4 5 6 7 8	Cash prizes	Yes % No es 2 through 5 in colu ubtract line 7 from line anization conducts ga	Mo Mo Mo Mo Mo Mo Mo Mo Mo Mo	No ►	

Schedule G (Form 990 or 990-EZ) 2020

SPONSORS	FOR	EDUCATIONAL	OPPORTUNITY,	INC.
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13-2578670

Sched	ule G (Form 990 or 990-EZ) 2020 Page 3
11	Does the organization conduct gaming activities with nonmembers?
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming? No
13	Indicate the percentage of gaming activity conducted in:
а	The organization's facility 13a %
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name ►
	Address ►
15 a	Does the organization have a contract with a third party from whom the organization receives gaming
	revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the
	amount of gaming revenue retained by the third party ► \$
С	If "Yes," enter name and address of the third party:
	Name
	Address ►
16	Gaming manager information:
	Name
	Gaming manager compensation ► \$
	Description of services provided ►
	Director/officer Employee Independent contractor
17	Mandatory distributions:
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations
	or spent in the organization's own exempt activities during the tax year 🕨 \$
Par	Supplemental Information. Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

Schedule G (Form 990 or 990-EZ) 2020

SCHEDULE I				ssistance t			ŀ	OMB No. 1545-0047
(Form 990)			•	ndividuals in				2020
	Complete if t	the orga		wered "Yes" on F		line 21 or 22.		Open to Public
Department of the Treasury Internal Revenue Service		Go to		tach to Form 990 <i>Form990</i> for the I	-			Inspection
Name of the organization		0010	www.ii3.gov/		atest mormation	•	Employer identit	
SPONSORS FOR EDUCATIO	NAL OPPORTUNITY, I	NC.					13-257	8670
Part I General Informat	ion on Grants and Assis	tance						
1 Does the organization ma	aintain records to substanti	ate the	amount of the	grants or assista	nce, the grantees	eligibility for the grant	s or assistance, a	
	I to award the grants or ass							X Yes No
2 Describe in Part IV the or	ganization's procedures fo	r monito	oring the use	of grant funds in the	United States.			
Part II Grants and Other	Assistance to Domesti	c Orga	anizations an	d Domestic Gov	ernments. Com	plete if the organiz	ation answered	"Yes" on Form 990,
Part IV, line 21, fo	or any recipient that rece	eived m	nore than \$5,	000. Part II can b	e duplicated if a	additional space is r	needed.	
1 (a) Name and address of or government		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)	(g) Description of noncash assistant	
_(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
	tion 501(c)(3) and governm		•					•
3 Enter total number of othe For Paperwork Reduction Act No	er organizations listed in th tice, see the Instructions for F							Schedule I (Form 990) 2020

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Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SCHOLARSHIPS	115.	1,086,294.			
3					
l .					
5					
6					
,					
art IV Supplemental Information. Provide the information.	information re	equired in Part I,	line 2, Part III, o	column (b); and any c	other additional

PART I, LINE 2:

THE ORGANIZATION ISSUES GRANTS WITH LETTER CONTRACTS, THE CONDITIONS OF

WHICH THE ORGANIZATION MONITORS.

Page 2

(Forn	EDULE J n 990) nent of the Treasury Revenue Service	For certain Officers, Dire Cor ► Complete if the organizatio	Asation Information ectors, Trustees, Key Employees, and Highest mpensated Employees on answered "Yes" on Form 990, Part IV, line 2 Attach to Form 990. 990 for instructions and the latest information.	3	^{IB No. 2} 20 pen to	20 Puk	olic
	of the organization	,		Employer identification			
SPO	NSORS FOR	EDUCATIONAL OPPORTUNITY, IN	NC.	13-2578670			
Part	Question	ns Regarding Compensation					
						Yes	No
1a	990, Part VII, First-cla Travel fe		by by ided any of the following to or for a pers provide any relevant information regarding Housing allowance or residence for Payments for business use of persor Health or social club dues or initiation	these items. personal use nal residence			
	Discreti	onary spending account	Personal services (such as maid, cha	auffeur, chef)			
b 2	If any of the or reimburse explain	boxes on line 1a are checked, did th ment or provision of all of the ex	ne organization follow a written policy re penses described above? If "No," com	garding payment plete Part III to	1b	x	
	-		D/Executive Director, regarding the items	-			
3	1a? Indicate whicl organization's related organ	h, if any, of the following the organizations CEO/Executive Director. Check all the ization to establish compensation of the	on used to establish the compensation of t at apply. Do not check any boxes for metho e CEO/Executive Director, but explain in Pa	he ds used by a	2	X	
	Indepen	nsation committee dent compensation consultant 90 of other organizations	Written employment contract Compensation survey or study X Approval by the board or compensation	tion committee			
4	organization of	or a related organization:	Part VII, Section A, line 1a, with respect to	-			
а			ayment?		4a		X
b			tal nonqualified retirement plan?		4b		X
С	If "Yes" to an	y of lines 4a-c, list the persons and pr	sed compensation arrangement?		4c		X
5	For persons compensation	listed on Form 990, Part VII, Sectin contingent on the revenues of:	rganizations must complete lines 5-9. ion A, line 1a, did the organization pa	-			
а					5a		X
b	If "Yes" on lin	e 5a or 5b, describe in Part III.			5b		X
6	compensation	n contingent on the net earnings of:	on A, line 1a, did the organization pa				
а					6a		X
b	-	rganization?			6b		X
7			n A, line 1a, did the organization provies		7		x
8	Were any am	ounts reported on Form 990, Part VII,	paid or accrued pursuant to a contract tha Regulations section 53.4958-4(a)(3)? If	t was subject			
9			low the rebuttable presumption proced		8		X
	Regulations s	ection 53.4958-6(c)?		<u></u>	9		
For Pa		ction Act Notice, see the Instructions for Fo		Schedu	le J (Fo	orm 990	J) 2020

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

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

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

		(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
WILLIAM GOODLOE	(i)	578,211.	0.	12,901.	23,094.	14,918.	629,124.	0.
1 ^{PRESIDENT & CEO}	(ii)	0.	0.	0.	0.	0.	0.	0.
JULIAN JOHNSON	(i)	307,151.	0.	0.	16,026.	10,120.	333,297.	0.
2 ^{EXECUTIVE VP}	(ii)	0.	0.	0.	0.	0.	0.	0.
SARAH LEVIN-GOODSTINE	(i)	146,228.	0.	0.	0.	14,409.	160,637.	0.
CHIEF ADMINISTRATIVE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
CATHERINE FINNERAN	(i)	156,226.	0.	0.	1,987.	22,785.	180,998.	0.
VP OF COLLEGE SCHOLARS	(ii)	0.	0.	0.	0.	0.	0.	0.
MINDY DAVIS	(i)	229,237.	0.	0.	14,675.	25,185.	269,097.	0.
MANAGING DIR., CAREER GENERAL	(ii)	0.	0.	0.	0.	0.	0.	0.
NICOLE MCRAE	(i)	196,347.	0.	0.	14,810.	27,886.	239,043.	0.
6 OF CAREER GENERAL	(ii)	0.	0.	0.	0.	0.	0.	0.
MILLIE HAU	(i)	198,539.	0.	0.	13,534.	12,816.	224,889.	0.
7 ^{VP OF HIGH SCHOOL}	(ii)	0.	0.	0.	0.	0.	0.	0.
TRICIA DALEY, DIRECTOR	(i)	146,961.	0.	0.	12,921.	43,949.	203,831.	0.
8 INTERIM VP, FINANCE, EFF 3/21	(ii)	0.	0.	0.	0.	0.	0.	0.
COLIN SHAY	(i)	149,172.	0.	0.	3,989.	36,054.	189,215.	0.
9 DIR. OF EXECUTIVE INITIATIVES	(ii)	0.	0.	0.	0.	0.	0.	0.
AYSEGOL NECIOGLU	(i)	152,359.	0.	0.	9,468.	40,670.	202,497.	0.
10 ^{VP OF CLINICAL COACHING}	(ii)	0.	0.	0.	0.	0.	0.	0.
RAINA SINGH	(i)	150,444.	0.	0.	4,007.	36,054.	190,505.	0.
11 ^{DIR. OF ALTERNATIVE INVESTMENT}	(ii)	0.	0.	0.	0.	0.	0.	0.
LESLEY STAVITSKY	(i)	140,526.	0.	0.	3,489.	12,816.	156,831.	0.
12 ^{DIRECTOR OF CORP. & FDTN. REL.}	(ii)	0.	0.	0.	0.	0.	0.	0.
MICHELLE DEFOSSETT	(i)	203,582.	0.	0.	14,127.	38,757.	256,466.	0.
13 ^{VP OF FINANCE THRU 4/6/21}	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

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Schedule J (Form 990) 2020

JSA

Schedule J (Form 990) 2020

Part III Supplemental Information

Provide 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.

PART I, LINE 1A:

THE ORGANIZATION PROVIDED TAX INDEMNIFICATION AND GROSS-UP PAYMENTS TO

THE PRESIDENT & CEO, WILLIAM GOODLOE, IN THE AMOUNT OF \$12,901. THE

AMOUNT IS TAXABLE AND INCLUDED ON SCHEDULE J, PART II, COLUMN B, III.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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



	Department of the Treasury nternal Revenue Service	Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irr	s.gov/form990.	Inspection
N	Name of the organization		Employer identif	fication number
	SPONSORS FOR EDUCA	TIONAL OPPORTUNITY, INC.	13-2578	670

FORM 990, PART I, LINE 1:

SEO PREPARES UNDERSERVED YOUNG PEOPLE TO LEAD BY EXAMPLE IN THEIR FAMILIES' COMMUNITIES AND CAREER AND PROVIDES SUPERIOR EDUCATIONAL AND CAREER PROGRAMS TO YOUNG PEOPLE WHO ARE UNDERSERVED AND/OR UNDERREPRESENTED.

FORM 990, PART III, LINE 1:

SEO'S MISSION IS TO CREATE A MORE EQUITABLE SOCIETY BY DELIVERING SUPERIOR PROGRAMS FOR CLOSING THE ACADEMIC AND CAREER OPPORTUNITY GAPS FOR YOUNG PEOPLE FROM UNDERSERVED AND/OR UNDERREPRESENTED BACKGROUNDS. WE DO THIS BY PROVIDING HIGH SCHOOL AND COLLEGE STUDENTS WITH THE ACADEMIC SKILLS AND PERSONAL TOOLS TO TAKE FULL OWNERSHIP OF THEIR EDUCATION, AND NAVIGATE AND GRADUATE COLLEGE. WE ALSO RECRUIT AND PREPARE COLLEGE STUDENTS AND YOUNG PROFESSIONAL TO ENTER LEADING COMPANIES AND ADVANCE IN THEIR CAREERS.

FORM 990, PART III, LINE 4D:

SEO LAW HELPS UNDERREPRESENTED FUTURE LAWYERS IN LAW SCHOOL EXCEL IN THEIR LEGAL CAREERS. SEO'S LAW CATALYST PROGRAM SUPPORTS STUDENTS IN GAINING ADMISSION TO LAW SCHOOL THROUGH A COMBINATION OF LSAT PREPARATION, ADMISSIONS CONSULTATION, AND ATTORNEY MENTORSHIP. SEO'S LAW FELLOWSHIP IS A PREMIER TRAINING PROGRAM THAT OFFERS INCOMING LAW STUDENTS ACCESS TO PAID INTERNSHIPS AT TOP LAW FIRMS, IMMERSIVE MENTORSHIP, NETWORKING, AND LAW SCHOOL PREPARATION AND TRAINING, GIVING

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THEM THE BEST CHANCE FOR EXCELLING LAW SCHOOL. IN 2021, 150 SEO FELLOWS JOINED 45 SEO LAW PARTNERS NATIONWIDE. APPROXIMATELY 1700 SEO'S LAW ALUMNI HAVE GONE ON TO HOLD POSITIONS RANGING FROM LAW PARTNERSHIP TO LEADERSHIP IN CIVIL SERVICE AND BUSINESS. THE SEO CATALYST PROVIDES SELECTED CATALYST SCHOLARS INTENSIVE LAW SCHOOL APPLICATION ASSISTANCE BY PROVIDING FREE LSAT PREPARATION CLASSES, WORKSHOPS, PERSONALIZED REVIEW OF APPLICATION MATERIALS, EXCLUSIVE DISCUSSION WITH LAW SCHOOL ADMISSIONS OFFICE, AND MENTORSHIP WITH A PRACTICING ATTORNEY. IN 2021, 44 SEO CATALYST PARTICIPATED IN THE PROGRAM.

EXPENSES : \$1,120,503 GRANTS : \$0 REVENUE : \$0

THE SEO LEADERSHIP INSTITUTE SUPPORTS THE CAREER ADVANCEMENT AND MOBILITY OF SEO ALUMNI BY PROVIDING ONGOING, CUSTOMIZED PROFESSIONAL DEVELOPMENT, INCLUDING ACCESS TO ONLINE CAREER MANAGEMENT AND SKILL-BUILDING TRAINING PLATFORMS, WEBINARS, IN-PERSON EVENTS, EXECUTIVE COACHING, CULTURAL EXPERIENCES AND BOARD SERVICE AND MORE TO ENSURE THEIR FUTURE SUCCESS. SEO ALUMNI WILL LEVERAGE THEIR SUCCESS AND CREATE TANGIBLE PLANS TO AFFECT POSITIVE CHANGE IN VULNERABLE COMMUNITIES.

EXPENSES : \$677,763 GRANTS : \$0 REVENUE : \$0

FORM 990, PART VI, SECTION B, LINE 11B: FORM 990 WAS PREPARED BY A NATIONAL ACCOUNTING FIRM IN CONJUNCTION WITH THE ORGANIZATION'S FINANCIAL DEPARTMENT. IT IS REVIEWED BY THE ORGANIZATION'S BOARD MEMBERS AND A COMPLETE COPY IS PROVIDED TO ALL

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MEMBERS OF THE ORGANIZATION'S BOARD PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, SECTION B, LINE 12C: THE MANAGER OF THE EXECUTIVE OFFICE SENDS THE CONFLICT OF INTEREST QUESTIONNAIRE TO EACH BOARD MEMBER AND KEY EMPLOYEE ANNUALLY AND UPON APPOINTMENT OR HIRE FOR COMPLETION.

FORM 990, PART VI, SECTION B, LINE 15A: DURING CALENDAR 2020 THE BOARD REVIEWED AND VOTED ANY SALARY ADJUSTMENT FOR THE PRESIDENT & CEO. THIS IS DOCUMENTED VIA BOARD MINUTES.

FORM 990, PART VI, SECTION B, LINE 15B: DURING CALENDAR 2020 THE PRESIDENT & CEO AND CHIEF ADMINISTRATIVE OFFICER DETERMINED THE EXECUTIVE LEADERSHIP TEAM'S SALARY ADJUSTMENTS.

FORM 990, PART VI, SECTION C, LINE 19: SEO MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS (WHETHER OR NOT AUDITED) AVAILABLE TO THE GENERAL PUBLIC UPON REQUEST AND ON SEO'S WEBSITE.

PART VII, SECTION A, LINE 7 COMPENSATION REPORTED ON PART VII FOR TRICIA DALEY IS ONLY FOR HER POSITION AS DIRECTOR OF FINANCE. SHE BECAME THE INTERIM VP OF FINANCE IN MARCH 2021.

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	ATTACHMENT 1
FORM 990, PART VI, LINE 17 - STATES	
AL, AK, AZ, AR, CA, CO, CT, DE,	
DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI,	
MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA,	

RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

ATTACHMENT 2

990, PART VII- COMPENSATION OF THE FIVE HIGHEST	PAID IND. CONTRACTORS	
NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
BLACKBOARD P.O BOX 200154 PITTSBURGH, PA 15251-0154	SOFTWARE SUBSCRIPT'N	277,334.
AVISAN YOUNG SOUTHERN CA LTD 556 FLOWER STREET LOS ANGELES, CA 90072	PROPERTY MANAGEMENT	271,903.
WGA BUSINESS SERVICES 26 AMBASSADOR WAY JACKSON, NJ 08527	ACCOUNTING	190,238.
UPPERLINE LLC P.O.BOX 999 NEW YORK, NY 10272	EDUCATIONAL SOLUTION	167,700.
CHRONUS LLC 15395 SE 30TH PLACE BELLEVUE, WA 98007	MENTORSHIP SUBSCRIP.	133,925.

			ATTACHMENT	3
FORM 990, PART IX - OTHER FEES				
	(A) TOTAL	(B) PROGRAM	(C) MANAGEMENT	(D) FUNDRAISING
DESCRIPTION	FEES	SERVICE EXP.	AND GENERAL	EXPENSES
CONSULTANCY AND PROF FEES	4,980,525.	4,477,328.	207,554.	295,643.

Schedule O (Form 990 or 990-EZ) 2020

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Name of the organization			Employer identific	Employer identification number	
SPONSORS FOR EDUCATIONAL OPPORTUNITY, INC.			13-2578	13-2578670	
		-	ATTACHMENT	3 (CONT'D)	
FORM 990, PART IX - OTHER FEES					
	(A)	(B)	(C)	(D)	
	TOTAL	PROGRAM	MANAGEMENT	FUNDRAISING	
DESCRIPTION	FEES	SERVICE EXP.	AND GENERAL	EXPENSES	
TOTALS	4,980,525.	4,477,328.	207,554.	295,643.	