29493	27	505	707
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		_ <u>*</u>	-	Return of		TO MAY 17, 2 tion Exempt		ncome Tax	OMB No 1545-0047
	Forr	n gg	0					ept private foundations)	2010
	-(Rev	i. Januar	y 2020)			y numbers on this form			Open to Public
	Depa Intern	rtment of th al Revenue	e Treasury Service			990 for instructions an			Inspection
	AF	or the 2	019 calend	lar year, or tax year begi				UN 30, 2020	
	Bca	heck if pplicable	C Name of	forganization	ес _1).			D Employer identificati	on number
	X								
	X	Name change Initial		usiness as			10	31-1793562	
		∫return Final return/		and street (or P.O. box if GEORGIA AVE		to street adoress)	Room/suite	E Telephone number 202-347-48	48
	_	termin~ ated ]Amended	City or t	G Gross receipts \$	3,720,832.				
		_ireturn ]Applica-	WASH	INGTON, DC 2 nd address of principal of	20011 fficer: KIM CO	<u> </u>		H(a) Is this a group return for subordinates?	Yes X No
3	<u> </u>	_tion pending		AS C ABOVE				H(b) Are all subordinates includ	
0/	1 1	ax-exem		X 501(c)(3) 501(	c) ( ) 🗸 (ur	nsert no.) 4947(a)(1)	or 527		
				COLLEGEACCESS			1	H(c) Group exemption ni	
10					ust 🔲 Associati	on 🗌 Other ►	L Year	of formation: 1995 M St	
	Pa		Summary				MICCIO		<u> </u>
	e			HEN, AND EMPC		JNITIES AND	STAKEHO	N IS TO BUILD DLDERS TO CLOS	, E EOUITY
	Governance							than 25% of its net assets	
	ver			ting members of the gove				ECEL/EN3	12
				lependent voting member			 B638 M	4	12
	S &	5 To	tal number	of individuals employed ii	n calendar year 20	19 (Part V, line 2a)	[b] M	IAR 31 2021	18
2	Activities	<b>6</b> To	tal number	of volunteers (estimate if	necessary)		1	1 2021 61	12
20	<b>lcti</b>	<b>7</b> a To	tal unrelated	d business revenue from	Part VIII, column (	C), line 12	L OG	DEN UT	0.
4	_	<u>b</u> Ne	et unrelated	business taxable income	from Form 990-T,	line 39		UEN, UT TR	0.
SCANNED MAR 04 2022								Prior Year	Current Year
R	e			and grants (Part VIII, line				294,397.	778,611.
MA	Revenue		-	ce revenue (Part VIII, line	-			2,499,246.	2,902,452.
0	Re			come (Part VIII, column (A			·	<u>16,047.</u> 21,673.	<u>    13,471.</u> 26,298.
Ш				e (Part VIII, column (A), line				2,831,363.	3,720,832.
Z	-			<ul> <li>add lines 8 through 11 ( milar amounts paid (Part I</li> </ul>				561,475.	709,763.
Ā				to or for members (Part I)		-		0.	0.
S	s		-	compensation, employe	• •		-	1,755,233.	1,928,829.
97				undraising fees (Part IX, c	-			0.	0.
	Expense			ing expenses (Part IX, col		► 106,9	02.		·
	ũ	17 Ot	her expense	es (Part IX, column (A), lin	es 11a-11d, 11f-24	4e) .		2,582,500.	1,969,039.
		<b>18</b> To	tal expense	s. Add lines 13-17 (must o	equal Part IX, colu	mn (A), line 25)		4,899,208.	4,607,631.
		19_Re	venue less o	expenses. Subtract line 1	8 from line 12			-2,067,845.	-886,799.
_	58						Be	ginning of Current Year	End of Year
S.	Assets	<b>20</b> To	tal assets (P	Part X, line 16)				4,289,579.	4,433,040.
20	LTAS DEBS	<b>21</b> To	tal liabilities	(Part X, line 26)				739,895.	1,770,155.
5 0 2021	Est.			fund balances Subtract I	ine 21 from line 20	)	l	3,549,684.	2,662,885.
<i>€</i> 3	<u> </u>		Signature				o and stateme	unter and to the best of multiple	uladas and bolist star
SEP		•		i declare that I have examine Declaration of preparer (oth		• • • •		ents, and to the best of my kno	wiedge and deliet, it is
© S	uue,		Kw			seu on an mormation of w	nich preparer		2021
ধ	Sign		Signature	e of officer				Date	
Ň	Here		KIM	COOK , EXECUTI	VE DIRECT	OR			
ß				rint name and title		1			
<b>M</b>			nt/Type prep			Date Check	PTIN		
2	Paid			CK LONGWOOD	0		P00439715		
$\sim$	Prep			RSM US LLP				Firm's EIN 🕨 42	-0714325
(ja)	Use (	Doly Fu	rm's address	► 2021 L STRE					
				WASHINGTON,				Phone no. 202-	
				return with the preparer					X Yes No
	93200	1 01-20-20 SEI		or Paperwork Reduction				T CONTINUATIO	Form <b>990</b> (2019)

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	n 990 (2019) NATIONAL COLLEGE ATTAINMENT NETWORK 31-1793562 Pag	e 2
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	
	OUR MISSION IS TO BUILD, STRENGTHEN, AND EMPOWER COMMUNITIES AND STAKEHOLDERS TO CLOSE EQUITY GAPS IN POSTSECONDARY ATTAINMENT FOR ALL	
	STUDENTS.	
		—
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	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?	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.           (Code) (Expenses \$3,919,087.         including grants of \$709,763.         (Revenue \$2,902,452]	
4a	(Code) (Expenses \$3,919,087. including grants of \$709,763.) (Revenue \$2,902,452] NCAN CREATES AND SUPPORTS COMMUNITY-BASED COLLEGE ACCESS PROGRAMS	••)
	THROUGHOUT THE COUNTRY. WE OFFER OUR MEMBERS PROFESSIONAL DEVELOPMENT,	
	POLICY UPDATES, TECHNOLOGY TOOLS AND TECHNICAL ASSISTANCE.	
	· · · · · · · · · · · · · · · · · · ·	
		—
4b	(Code) (Expenses \$ including grants of \$ ) (Revenue \$	
40	(Code) (Expenses \$ including grants of \$) (Revenue \$)	- '
4c	(Code ) (Expenses \$ including grants of \$ ) (Revenue \$	<u>,</u>
		- '
4d	Other program services (Describe on Schedule O.)	
-10	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 3,919,087.	
	Form 990 /20	10

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	990 (2019) NATIONAL COLLEGE ATTAINMENT NETWORK ARCODIU 31-1793 t IV Checklist of Required Schedules	<u> </u>	•	
Form	990 (2019) NATIONAL COLLEGE ATTAINMENT NETWORK 31-1793	562	p	age 3
_	t IV Checklist of Required Schedules	502	, [	aye o
L			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
-	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			1
	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," complete	ļ		
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	!		
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
	If "Yes," complete Schedule D, Part IV	9		<b>^</b>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10		x
44	or in quasi endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	-10		
11	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			i
	Part VI	11a	x	
ь	Did the organization report an amount for investments - other secunties in Part X, line 12, that is 5% or more of its total			
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	<u> </u>	X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	<u>14a</u>		- <u>-</u>
b	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			1
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	L	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
·	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	I

Form	990 (2019) NATIONAL COLLEGE ATTAINMENT NETWORK 31-179	3562	P	age 4
Pa	t IV Checklist of Required Schedules (continued)	_		
		_	Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J .	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the		ŀ	
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			1
	Schedule K If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			1
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%		]	
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
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	<b>28</b> a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	L	X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	*Yes, " complete Schedule L, Part IV .	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<u>35a</u>		х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity		[	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			ł
	Note: All Form 990 filers are required to complete Schedule O	38	X_	
Par				
	Check if Schedule O contains a response or note to any line in this Part V		r	
		-	Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 3	긝		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	<u>ار</u>		1

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

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Х Form 990 (2019)

1c

Form	990 (2019) NATIONAL COLLEGE ATTAINMENT NETWORK 31-1793 t V Statements Regarding Other IRS Filings and Tax Compliance (continued)	562	P	age 5
			Yes	No
9-	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		Tes	
20	filed for the calendar year ending with or within the year covered by this return 2a 18			
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	·
D	<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to $e-file$ (see instructions)	- 20		·
39	Did the organization have unrelated business gross income of \$1,000 or more during the year?	 3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation 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			1
	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 sheltor transaction at any time during the tax year?			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	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		
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 year7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u> </u>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
Ь	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	•		
11	Section 501(c)(12) organizations. Enter:			1
a	Gross income from members or shareholders 11a	<b>A</b> 1		
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against			
40-	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . [12b]			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120		<b></b> '
а	is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	<u>13a</u>		
h				
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
c	organization is licensed to issue qualified health plans     13b       Enter the amount of reserves on hand     13c			
с 14а	Did the organization receive any payments for indoor tanning services during the tax year?	14a		x
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		<b></b>
, р 15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	1-10		
	excess parachute payment(s) during the year?	15		x
	If "Yes," see instructions and file Form 4720, Schedule N.			<u> </u>
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		<u> </u>
	If "Yes," complete Form 4720, Schedule O.			

Form 990 (2019)

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Form	990	(2019	)
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#### NATIONAL COLLEGE ATTAINMENT NETWORK

31-1793562 Page 6

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			X
<u>Sec</u>	tion 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 12			[
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 12			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		<u>X</u>
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	X	
Ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	<u> </u>		
а	The governing body?	<b>8</b> a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	.Χ.	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		• • •	
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9	•	X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
Ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	In Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	····
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			<b>!</b>
	The organization's CEO, Executive Director, or top management official	15a	X	<u> </u>
b	Other officers or key employees of the organization	15b	X	Ļ
٠	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		x
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			JJ
<u> </u>	exempt status with respect to such arrangements?	16b		
-	tion C. Disclosure	-		
17	List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright OH$			
.18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3):	s only)	availa	DIE
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	tinand	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records	·		
	$\frac{\text{KIM COOK} - 202 - 347 - 4848}{(218) \text{ CEOP CLA NUE NUE NO. L 405 WAGULAGEON DG 20011}$			
	6218 GEORGIA AVE., NW, NO. I-405, WASHINGTON, DC 20011			

Form 990 (	2019) NATIONAL COLLEGE A	TTAINMENT NETWORK	31-1793562	Page 7
Part VII	<b>Compensation of Officers, Directors, Trus</b>	tees, Key Employees, Highest	Compensated	
	Employees, and Independent Contractors			٠.
	Check if Schedule O contains a response or note to any	Ine in this Part VII	·· ·	

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

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

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

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(10	not c	Pos			nne	Reportable	Reportable	Estimated
	hours per	box	, unle: cer an	ss per	rson I	s both	n an	compensation	compensation	amount of
	week					1/113		from	from related	other
	(list any hours for	or director				_	i i	the organization	organizations (W-2/1099-MISC)	compensation from the
	related	ie or c	stee			sated		(W-2/1099-MISC)	(112/1000/1000)	organization
	organizations	trustee	al tru:		yee	a me				and related
	below	Individual	institutional trustee	ᆸ	Key employee	Highest compensated employee	ler.			organizations
· · · · · · · · · · · · · · · · · · ·	line)	Ę	Inst	Officer	Key	돌ਛ	Former	L		
(1) NATHANIEL EASLEY, JR., PH.D.	1.00									
PRESIDENT	L	X		X				0.	0.	0.
(2) STEVE COLON	1.00						]	}		
VICE PRESIDENT		X		Х				0.	0.	0.
(3) ADAM BERG	1.00									
TREASURER		Х		Х				0.	0.	0.
(4) JAMIE SEARS	1.00									
SECRETARY		X		Х				0.	0.	0.
(5) MARLENE IBSEN	1.00									
IMMEDIATE PAST PRESIDENT		X		Х				0.	0.	0.
(6) TINA FERNANDEZ	1.00									
BOARD MEMBER		X						0.	0.	0.
(7) AMY KERWIN	1.00									
BOARD MEMBER	l	X						0.	0.	0.
(8) PAUL LUNA	1.00									
BOARD MEMBER		X						0.	0.	0.
(9) CANDY MARSHALL	1.00									
BOARD MEMBER		X						0.	0.	0.
(10) STEPHEN SMITH	1.00									
BOARD MEMBER		X						0.	0.	0.
(11) HERB TILLERY	1.00									
BOARD MEMBER		X						0.	0.	0.
(12) RICARDO TORRES	1.00									
BOARD MEMBER		X						0.	0.	0.
(13) LORI MCFARLING	1.00									
BOARD MEMBER (UNTIL 9/14/2019)		X						0.	0.	0.
(14) GLORIA NEMEROWICZ	1.00									
BOARD MEMBER (UNTIL 9/14/2019)		X						0.	0.	0.
(15) KIMBERLY COOK	37.50						ŀ			
EXECUTIVE DIRECTOR				Х				193,895.	0.	32,517.
(16) ELIZABETH MORGAN	37.50									
DIRECTOR OF EXTERNAL RELATIONS						X		161,302.	0.	20,618.
(17) COLETTE HADLEY	37.50									
DIRECTOR OF CONSULTING SERVICES						X		134,907.	0.	26,210.
										Earne 000 (0010)

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Form 990 (2019)

Form 990 (2019) NATIONAL									31-1	793	562	Page 8
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,	and	ł Hig	ghes	st C	ompensated Employee	s (continued)			
(A) Name and title	(B) Average hours per week	box	not c , unle:	Posi heck r ss per nd a di	rtion more rson i:	than o s both	1 an	(D) Reportable compensation from	(E) Reportable compensatio from related		Estir amo	F) nated unt of her
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization: (W-2/1099-MIS	s	compe from organ and r	ensation in the nization related izations
(18) SARA MELNICK DEPUTY DIRECTOR	37.50					x		120 204		0.	10	102
(19) E. MORRALEE KELLER	37.50							130,204.		<u> </u>	10	<u>,183.</u>
DIRECTOR OF TECHNICAL ASSISTANTS						x		114,128.		0.	26	<u>,275.</u>
(20) ZENIA HENDERSON DIRECTOR OF MEMBER & PARTNER ENGAGEM	37.50					x		111,470.		0.		,686.
1b Subtotal		-			•			845,906.		0.	144	,489.
<ul> <li>c Total from continuation sheets to Part VI</li> <li>d Total (add lines 1b and 1c)</li> </ul>	I, Section A							0. 845,906.		0.	144	0. ,489.
<ul> <li>2 Total number of individuals (including but n compensation from the organization</li> </ul>	ot limited to th	ose	liste	d ab	ove)	) wh	o re	A	000 of reportable			<u>6</u>
compensation from the organization	,			<u> </u>				••••••			Y	es No
3 Did the organization list any former officer,		ee, k	ey e	emple	oyee	e, or	hıgl	hest compensated emp	loyee on			
<ul> <li>line 1a? If "Yes," complete Schedule J for s</li> <li>For any individual listed on line 1a, is the su</li> </ul>		e co	mpe	ensat	tion	and	oth	er compensation from t	he organization		3	
and related organizations greater than \$150	•							•	<b>J</b>		4	X
5 Did any person listed on line 1a receive or a	Iccrue comper	satio	on fr	om a	any	unre			dual for services			
rendered to the organization? If "Yes." corr Section B. Independent Contractors	plete Schedule	e J fo	or su	ich p	perso	on					5	X
1 Complete this table for your five highest co	mpensated ind	lepei	nder	nt co	ontra	actor	's th	at received more than \$	100,000 of comp	ensat	ion from	
the organization. Report compensation for	the calendar ye	ear e	ndın	ig wi	th o	or wit	thin I	the organization's tax y (B)	ear.		(C)	
(A) Name and business								Description of s		С	ompens	ation
PENN HILL GROUP LLC, 777 500, WASHINGTON, DC 20001		NW	S	UI	ΓE			GOVERNMENT RECONSULTING	ELATIONS		158	,769.
ENTERPRISE RESEARCH GROUP							- 1	DEVELOPMENT				
43644 LEES MILL SQUARE, L	EESBURG	<u>, `</u>	VA	2(	01	76		NEXT-GENERAT	ION STU		151,	,000.
							+			<u> </u>		
			-	<u>.</u>		<u> </u>					_	
2 Total number of independent contractors (ii \$100,000 of compensation from the organi	-	ot lin	nted	l to t	hos 2	e list	ted	above) who received mo	ore than			

· ·

Part V					LL	EGE ATTA	INMENT NET	WORK	31-1793	562 Page 9
		Check if Schedule O c				or note to any lin	e in this Part VIII			[]
		Check II Schedule O C	Jonte	ans a respo	150	or note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ഇ ഇ 1	а	Federated campaigns		1a			· · · · · · · · · · · · · · · · · · ·			
Contributions, Gifts, Grants and Other Similar Amounts L		Membership dues		1b						
	ċ	Fundraising events		1c			]			
are	d	Related organizations		1d						
S, E	е	Government grants (contri	ibuti	ons) <b>te</b>						
tion Sign	f	All other contributions, gifts,	grant	s, and						
ibu th		similar amounts not included	abov			778,611.				
	-	Noncash contributions included in I	lines 1	a-1f <b>1g</b> \$			770 (11			
<u> </u>	h	Total. Add lines 1a-1f				<u> </u>	778,611.			
						Business Code	1 402 160	1 102 160		
<u>9</u> 2	_	TO & THRU PRO CONFERENCE RE			-	<u>900099</u> 900099	1,482,168. 644,465.			· = ···· ·
re v		MEMBERSHIP DU		STRATI	<u>,</u>	900099	350,381.			
E D S	-	CONFERENCE SP		CORCHI	D I	900099	346,175.	346,175.		
Program Service Revenue S		COLLEGE FUTUR		SUKBILL		900099	79,263.	79,263.		
Pro-		All other program service		200	-		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	/3,203.		
-		Total. Add lines 2a-2f	GVC	iue		· · · · · ·	2,902,452.		·	1
3		Investment income (includ	lina i	dividends. ir	tere					
		other similar amounts)					13,471.	1		13,471.
4		Income from investment o	of tax	-exempt bo	nd pr	roceeds				
5		Royalties		•	•	•				
				(I) Reai		(II) Personal				
6	6 a	Gross rents	6a	_						
	b	Less rental expenses	6b							
-	С	Rental income or (loss)	6c							
	d	Net rental income or (loss)	)			►				
7	'a	Gross amount from sales of		(i) Securit	es	(ii) Other				
		assets other than inventory	7a							
		Less. cost or other basis	ŀ							
ne l		and sales expenses	7b							
Revenue		Gain or (loss)	7c			L				I
		Net gain or (loss)		anta (mat		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·		· · · · · ·
0ther 8		Gross income from fundraisin including \$	ng ev							
8		contributions reported on	line	of						
		Part IV, line 18	1116	10, 000	8a		·			
		Less. direct expenses			8b		1			
		Net income or (loss) from	fund	raising even		•				
9		Gross income from gamin		-						
		Part IV, line 19	•		9a					
	b	Less direct expenses			9b					
	С	Net income or (loss) from	gam	ing activities	·	►		1		
10	) a	Gross sales of inventory, I	ess	returns	l					
		and allowances		,	10a					
		Less cost of goods sold			10b					
	C	Net income or (loss) from	sale	s of inventor	У	►		Į	· · · · ·	ļ
<u>s</u>		MERCER E SUBOR				Business Code	26 000	<b> </b>		
Miscellaneous <u>Revenue</u> 11		MISCELLANEOUS		_		900099	26,298.		· · ·	26,298.
scellaned	b			· · · · •				<b>+</b>		
Be	C J							+		
ΨË		All other revenue				L	26,298.			
	<u>e</u> 2	Total. Add lines 11a-11d Total revenue. See instruction				P	3 720 832	2,902,452.	0.	39,769.

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Form **990** (2019)

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# Form 990 (2019) NATIONAL COLLEGE ATTAINMENT NETWORK Part IX Statement of Functional Expenses

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Sect	ion 501(c)(3) and 501(c)(4) organizations must comp	lete all columns. All othe	er organizations must con	nplete column (A)	•
	Check if Schedule O contains a respon	se or note to any line in	this Part IX	· _ · · · · · · · · · · · · · · · · · ·	X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	709,763.	709,763.		
2	Grants and other assistance to domestic				
	Individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
-	individuals. See Part IV, lines 15 and 16				· · · · · · · · · · · · · · · · · · ·
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	232,835.	152,394.	70,364.	10 077
•	trustees, and key employees		152,594.	70,304.	10,077.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and				
	persons (as defined under section 4558(r)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,315,101.	1,013,385.	233,370.	68,346.
8	Pension plan accruals and contributions (include				00,540+
Ŭ	section 401(k) and 403(b) employer contributions)	165,597.	14,605.	150,992.	
9	Other employee benefits	99,750.	14,605. 5,350.	94,400.	
10	Payroll taxes	115,546.	695.	114,851.	
11	Fees for services (nonemployees)				<u> </u>
а	Management				
b	Legal	2,342.		2,342.	
с	Accounting	112,000.		112,000.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	<u>787,587.</u>	701,524.	<u>86,063.</u>	
12	Advertising and promotion				
13	Office expenses	69,965.	27,820.	42,145.	
14	Information technology	74,636.	40,705.	33,915.	16.
15	Royalties	146 228	05 544	100 000	
16	Occupancy	146,337.	25,711.	120,626.	F 000
17	Travel	189,659.	167,095.	17,278.	5,286.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	401 065	401 016	40	
19 00	Conferences, conventions, and meetings	491,965.	491,916.	49.	
20 21	Interest Payments to affiliates				
21 22	Depreciation, depletion, and amortization	22,881.	5,010.	17,871.	
22 23	Insurance	17,958.	4,317.	13,641.	
23 24	Other expenses. Itemize expenses not covered				
-7	above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)	the least as body or	a subject as an		
а	DUES & SUBSCRIPTIONS	51,712.	44,191.	7,521.	
a b	RECRUITMENT	1,997.	152.	1,845.	
c	BENEFITS ALLOCATION	0.	303,556.	-326,733.	23,177.
d	INDIRECT ALLOCATION	0.	210,898.	-210,898.	
_	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	4,607,631.	3,919,087.	581,642.	106,902.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here  If following SOP 98-2 (ASC 958-720)				

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#### NATIONAL COLLEGE ATTAINMENT NETWORK

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		Check if Schedule O contains a response or note	e to any	line in this Part X	·····		<b></b>	<u>ب</u>
								(2)
					(/ Beginnin	<b>4)</b> g of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing				50,01 <u>8</u> .		528,065.
	2	Savings and temporary cash investments	· ·		38,087.		3,754,831.	
	3	Pledges and grants receivable, net				87,823.		
	4	Accounts receivable, net				84,674.	4	<u>29,633</u> .
	5	Loans and other receivables from any current or	former	officer, director,				
		trustee, key employee, creator or founder, substa	antial co	ontributor, or 35%				
		controlled entity or family member of any of thes	e perso	ns			5	1
	6	Loans and other receivables from other disqualif	ed pers	ons (as defined				
		under section 4958(f)(1)), and persons described	in sect	on 4958(c)(3)(B)			6	
2	7	Notes and loans receivable, net					7	
Assets	8	Inventories for sale or use					8	
Ä	9	Prepaid expenses and deferred charges				<u>53,677.</u>	9	76,447.
1	10a	Land, buildings, and equipment cost or other						
		basis. Complete Part VI of Schedule D	10a	361,812.				
1	ь	Less accumulated depreciation	10b	328,760.		54,288.	10c	33,052.
1	11	Investments - publicly traded securities					11	
1	12	Investments - other securities. See Part IV, line 1				12		
1	13	Investments - program-related. See Part IV, line 1	· _			13		
1	14	Intangible assets		1 01 0	14	11 010		
1	15	Other assets. See Part IV, line 11				1,012.		11,012.
	16	Total assets. Add lines 1 through 15 (must equa	al line 3	<u> </u>		<u> 9,579.</u>	_	4,433,040.
	17	Accounts payable and accrued expenses				59,943.	1	292,086.
1	18	Grants payable				0 007	18	1 460 600
	19	Deferred revenue		· · · -	64	8,927.		1,469,698.
	20	Tax-exempt bond liabilities		F			20	
	21	Escrow or custodial account liability. Complete F		F	·		21	
se 2	22	Loans and other payables to any current or form			· , • •			
Liabilities		trustee, key employee, creator or founder, substa		· · · · · · · · · · · · · · · · · · ·				
liat	~	controlled entity or family member of any of thes					22	
_   <sup>2</sup>	23	Secured mortgages and notes payable to unrelat					23	
	24	Unsecured notes and loans payable to unrelated	•	· · ·			24	
	25	Other liabilities (including federal income tax, pay		1				
		parties, and other liabilities not included on lines of Schedule D	17-24).		2	21,025.	25	8,371.
	26	Total liabilities. Add lines 17 through 25		· -		9,895.		1,770,155.
	20	Organizations that follow FASB ASC 958, chee	ck here					
S		and complete lines 27, 28, 32, and 33.						
	27	Net assets without donor restrictions		.=	2,13	34,939.	27	2,272,060.
	28	Net assets with donor restrictions		F		4,745.		390,825.
P		Organizations that do not follow FASB ASC 95	58. che	x here 🕨 🗌		- · · ·		
2		and complete lines 29 through 33.						
<u>ة</u> 2	29	Capital stock or trust principal, or current funds					29	·····
Sets 3	30	Paid-in or capital surplus, or land, building, or eq	uipmen	t fund			30	
SA 3	31	Retained earnings, endowment, accumulated inc		· · · · · ·			31	····
	32	Total net assets or fund balances	, -	F	3,54	9,684.		2,662,885.
	33	Total liabilities and net assets/fund balances			4,28	39,579.		4,433,040.

Form 990 (2019)

# Form 990 (2019) NA

Form	990 (2019) NATIONAL COLLEGE ATTAINMENT NETWORK	31-	17935	62	Pa	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12).	1				<u>32.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2				31.
3	Revenue less expenses. Subtract line 2 from line 1	3				<u>99.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	<u> </u>	549	9,6	84.
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
		10	<u> </u>	662	2,8	85.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			_		Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.	_			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		L	2a	-	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both.					
	Separate basis Consolidated basis Both consolidated and separate basis		_			
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:			1		
	X Separate basis Consolidated basis Both consolidated and separate basis					
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O	. [_			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Aud	ıt 🛛			ł
	Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed aud	t [		•	
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			ЗЬ		

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Form 990 (2019)

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SCHEDULE 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.

Open to Public Inspection

OMB No 1545-0047

1 g

2

Name of the organiz	atior
---------------------	-------

Total

Department of the Treasury Internal Revenue Service		<ul> <li>Attach to Form 990 or Form 990-EZ.</li> <li>Go to www.irs.gov/Form990 for instructions and the latest information.</li> </ul>					Open to Public Inspection				
Name of the organization			· · · · · · · · · · · · · · · · · · ·						Employer	identification number	
		•	NATI	ONAL COLLE	GE ATTAINMEN	r NETV	VORK		3	1-1793562	
Pa	rt I	Reason	for Public (	Charity Status (/	All organizations must co	mplete th	s part.) Se	e instruction			
The	organ	ization is not a	private found	ation because it is (I	For lines 1 through 12, cl	neck only (	one box.)				
1		A church, co	nvention of ch	urches, or associatio	n of churches described	in sectio	n 170(b)(1	I)(A)(i).	٨		
2		A school des	cribed in <b>sect</b> i	ion 170(b)(1)(A)(ii). (	Attach Schedule E (Form	1 990 or 99	90-EZ).)		LCΛ		
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).									
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,									
		city, and stat	e:								
5		An organizati	on operated fo	or the benefit of a col	lege or university owned	or operate	ed by a go	overnmental u	nit describe	ed in	
		section 170	(b)(1)(A)(iv). (C	Complete Part II.)							
6		A federal, sta	te, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).		•	
7		An organizati	on that norma	Ily receives a substai	ntial part of its support fr	om a gove	emmental	unit or from t	ne general p	oublic described in	
		section 170(	<b>b)(1)(A)(vi).</b> (C	omplete Part II.)							
8		A community	trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Parl	t <b>II.)</b>					
9		An agricultur	al research org	anization described	in section 170(b)(1)(A)(	ix) operate	ed in conju	inction with a	land-grant	college	
		or university	or a non-land-g	grant college of agric	ulture (see instructions).	Enter the r	name, city	, and state of	the college	or	
		university		· ···=		<u> </u>			· .		
10	X	0		2	than 33 1/3% of its supp			-	•		
					ct to certain exceptions,	• •				0	
					(less section 511 tax) fro	m busines	ses acqui	red by the org	ganization a	ifter June 30, 1975.	
				mplete Part III.)					•		
11	H.	•	6	•	vely to test for public sat	•					
12	1	-	-	-	vely for the benefit of, to	•			-	• •	
		-		-	d in section 509(a)(1) o				· · · ·	check the box in	
		-	-		f supporting organization				-	•	
а					upervised, or controlled						
		•	-		gularly appoint or elect a	majonty o	n the alrea	tors or truste	es or the st	ipporting	
				complete Part IV, Se		ion with it	oupporte	d organizatio	n(a) by ba		
b	· · · ·				or controlled in connect					-	
				· · ·	anization vested in the sa	ane perso	ns that co	ntroi or mana	ge uie supp	Jonea	
c	Ē	<b>-</b>		t complete Part IV,	g organization operated		hon with s	and functiona	lly integrate	d with	
Ľ	_		-		). You must complete F				iny integrate	u with,	
d		-	-		orting organization oper			-	rted organis	ration(s)	
Ū	L		-	•	ation generally must sat			• •	•	.,	
			•		nplete Part IV, Sections	•		•			
e	ſ	-			written determination from				II. Type III		
-			-		naily integrated supporti			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, . , , , , ,	1	
f	Ente	er the number	•	••		·3 - 3					
ų			••	about the supporte	d urganization(s).						
		(i) Name of supp		(ii) EIN	(III) Type of organization	(iv) is the orga in your dovern	inization listed	(v) Amount o		(vi) Amount of other	
		organization	ı		(described on lines 1-10 above (see instructions))	Yes	No	support (see II	nstructions)	support (see instructions)	
						-					
		. <u></u>									

#### Schedule A (Form 990 or 990 EZ) 2019 NATIONAL COLLEGE ATTAINMENT NETWORK 31-1793562 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support (f) Total Calendar year (or fiscal year beginning in) 🕨 (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) 🕨 (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business 9 activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 12 13 First five years. If the Form 990/s for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f) 14 % 15 Public support percentage from 2018 Schedule A, Part II, line 14 15 16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the jorganization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization b 10% zfacts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or moré, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2019

### Schedule A (Form 990 or 990 EZ) 2019 NATIONAL COLLEGE ATTAINMENT NETWORK

(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 a qualify under the tests listed below, please complete Part II.)

#### Section A. Public Support <u>(e)</u> 2019 (a) 2015 (b) 2016 (c) 2017 (d) 2018 (f) Total Calendar year (or fiscal year beginning in) 🕨 1 Gifts, grants, contributions, and membership fees received. (Do not 4376425. 3254141. 7081599. 294,397. 778,611.15785173. 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 2499246. 2902452. 8792310. 994,807. 1142214. 1253591. 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 5371232. 4396355. 8335190. 2793643. 3681063.24577483. 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 1485039.14714407. 2436786 6177123. 1128208. 3487251. 3 received from disgualified 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 0. amount on line 13 for the year 3487251. 6177123 1128208 1485039.14714407. 2436786. c Add lines 7a and 7b 9863076. 8 Public support. (Subtract line 7c from line 6) Section B. Total Support (f) Total (a) 2015 (d) 2018 (e) 2019 Calendar year (or fiscal year beginning in) (b) 2016 (c) 2017 5371232. 4396355. 8335190 2793643 3681063. 24577483. 9 Amounts from line 6 10a Gross income from interest. dividends, payments received on securities loans, rents, royalties, 2,133. 5,440. 16,047. 13,471 39,272. 2,181. and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 2,181. 2,133. 5,440 16,047. 13,471. 39,272. c Add lines 10a and 10b Net income from unrelated business 11 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 23,068. 2,316. 11,965. 21,673. 26,298. 85,320. assets (Explain in Part VI.) 4400804. 3720832.24702075. 8352595. 2831363. 5396481. 13 Total support. (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► Section C. Computation of Public Support Percentage 39.93 15 % 15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f)) .. 37.28 16 Public support percentage from 2018 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage .16 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f)) 17 % 17 .12 18 Investment income percentage from 2018 Schedule A, Part III, line 17 18 % 19a 33 1/3% support tests - 2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not ► X more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

#### Schedule A (Form 990 or 990 EZ) 2019 NATIONAL COLLEGE ATTAINMENT NETWORK

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5b

<u>5c</u>

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9a

9b

9c

10a

10b

Yes

No

Part IV | Supporting Organizations

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

#### 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 (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authonty 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.*
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Schedule A (Form 990 or 990-EZ) 2019

# Schedule A (Form 990 or 990-EZ) 2019 NATIONAL COLLEGE ATTAINMENT NETWORK Part IV | Supporting Organizations (continued)

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L				
44	Here the experimentation expected a pift or contribution from any of the following personal	[	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
a	below, the governing body of a supported organization?	11a		
h	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) above? If "Yes" to a. b. or c. provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations	1		
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			Ì
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion 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		L
<u>Sec</u>	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (II) a copy of the Form 990 that was most recently filed as of the date of notification, and (III) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			1
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	ì		
_	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
800	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3	Li	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)	1.		
a L	The organization satisfied the Activities Test. Complete line 2 below.			
b c	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i> The organization supported a governmental entity. <i>Describe in Part VI how you supported a government entity (see inst</i>	4 m		
2	Activities Test. Answer (a) and (b) below.	ructions)	Yes	No
ے a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	[	105	
a	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	· ·		
	that these activities constituted substantially all of its activities	 2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
-	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	1.		
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	1.		
	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b				
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	Зb		1

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

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Part V Type III Non-Functionally Integrated 509(a)(3) Supp	orting Organi	zations	
1 Check here if the organization satisfied the Integral Part Test as a qu	alifying trust on N	ov. 20, 1970 (explain in F	Part VI). See instruction
other Type III non-functionally integrated supporting organizations m	ust complete Sec	tions A through E.	
ection A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5	·	
6 Portion of operating expenses paid or incurred for production or			•
collection of gross income or for management, conservation, or		•	
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7	•	
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
ection 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):		<b>y</b> e ta	<u> </u>
a Average monthly value of securities	1 <u>a</u>		
b Average monthly cash balances	<u>1b</u>		
c Fair market value of other non-exempt-use assets	10		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI)			<u> </u>
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amou	int,		
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		L
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		1
ection C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		L
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		

Schedule A (Form 990 or 990-EZ) 2019

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Schedule A (Form 990 or 990-EZ) 2019					31-17
Part V   Type III Non-Functi	onally Integrat	ed 509(a)(3)	Supporting Orga	nizations (contin	nued)

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	Type in Non-1 directionally integrated bos	(u)(o) oupporting orga		
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	5	•
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
	(provide details in Part VI). See instructions.	-		
9	Distributable amount for 2019 from Section C, line 6	<u> </u>		
10	Line 8 amount divided by line 9 amount			
		(i)	(ii)	(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2019	Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6	·		
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015	<sup>i</sup> £		
c	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7 <sup>.</sup> \$			
а	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
•	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
-	and 4c.			
8	Breakdown of line 7			
	Excess from 2015			
_	Excess from 2016	· · · · · · · · · · · · · · · · · · ·		
	Excess from 2017			
	Excess from 2018			
	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

Schedule A (Form 990 or 990 EZ) 2019 NATIONAL COLLEGE ATTAINMENT NETWORK	31-1793562 Page 8
Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 1	7a 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, li	nes 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;	
Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any ac (See instructions.)	Iditional information.
	<u> </u>
SCHEDULE A, PART III, LINE 12, EXPLANATION FOR OTHER INCO	<b>ME:</b>

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OTHER INCOME		 		
2015 AMOUNT: \$	23,068.			
2016 AMOUNT: \$	2,316.			
2017 AMOUNT: \$	11,965.		<u></u>	
2018 AMOUNT: \$	21,673.	 		
2019 AMOUNT: \$	26,298.	 		
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SCHEDULE C	Pc	litical Campaign a	nd Lobbying	g Activities		OMB No 1545-0	)047
(Form 990 or 990-EZ) Department of the Treasury	For Org Complete	anizations Exempt From Income if the organization is described i	Tax Under section 5 below. ► Attach to	01(c) and section 5 Form 990 or Form 9		2019 Open to Pul	
Internal Revenue Service	L.,	io to www.irs.gov/Form990 for i		· · · · · · · · · · · · · · · · · · ·		and Inspectio	n n
<ul> <li>Section 501(c)(3) org</li> </ul>	ganizations: Com r than section 50	Form 990, Part IV; line 3, or Form plete Parts I-A and B. Do not comp P1(c)(3)) organizations: Complete P Part I-A only.	olete Part I-C.		-	vities), then	
-		Form 990, Part IV, line 4, or For	n 990-EZ, Part VI, lin	e 47 (Lobbying Acti	vities), th	en	
		nave filed Form 5768 (election und					
<ul> <li>Section 501(c)(3) org</li> </ul>	janizations that ł	nave NOT filed Form 5768 (election	under section 501(h)	: Complete Part II-B	. Do not co	omplete Part II-A.	
If the organization ansu Tax) (see separate inst		Form 990, Part IV, line 5 (Proxy	Tax) (see separate in	structions) or Form	990-EZ, I	Part V, line 35c (F	roxy
<ul> <li>Section 501(c)(4), (5)</li> </ul>	), or (6) organizat	ons Complete Part III.					
Name of organization					Employe	r identification n	umber
	NATIONA	L COLLEGE ATTAINM	ENT NETWORK		3	31-179356	2
Partil-A Compl	ete if the org	anization is exempt under	section 501(c) o	r is a section 52	27 organ	nization.	
<ol> <li>Enter the amount of</li> <li>Enter the amount of</li> <li>Enter the amount of</li> <li>If the organization if</li> <li>Was a correction mm</li> <li>If "Yes," describe in</li> <li>PartileC: Complete</li> <li>Enter the amount of</li> <li>Total exempt function action</li> <li>Total exempt function</li> <li>Inter 17b</li> <li>Did the filing organic</li> <li>Enter the names, and</li> <li>made payments. For</li> <li>contributions received</li> </ol>	ete if the org f any excise tax f any excise tax f any excise tax ncurred a section ade? Part IV. ete if the org irectly expended f the filing organ tivities ion expenditures ization file Form ddresses and em or each organizatived that were pro-		section 4955 under section 4955 r this year? <b>section 501(c), e</b> on 527 exempt function r organizations for sec on Form 1120-POL, of all section 527 politi rom the filing organiza eparate political organ	except section 5 on activities ation 527 and organizations to tion's funds. Also en hization, such as a se	<ul> <li>\$</li></ul>	• filing organization nount of political	No   No   No   No n
(a) Name		(b) Address	(c) EIN	(d) Amount paid filing organization funds. If none, ent	er -0	(e) Amount of pol ntributions receive promptly and dire delivered to a sepa political organizat If none, enter -(	ed and ectly arate tion.
				×	-		

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

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Schedule C (Form 990 or 990 EZ) 2019 N Part II-A Complete if the orga section 501(h)).	ATIONAL CC	DLLEGE ATTAIN npt under section	MENT NETWOR 501(c)(3) and file	<u>11–1</u> d Form 5768 (ele	793562 Page 2 ction under
A Check 🕨 🔄 if the filing organization	on belongs to an aff	iliated group (and list in	Part IV each affiliated	group member's name	, address, EIN,
expenses, and share	of excess lobbying	expenditures).			
		nd "limited control" pro	visions apply.		
	on Lobbying Expe tures" means amou	nditures unts paid or incurred.)		<b>(a)</b> Filing organization's totals	(b) Affiliated group totals '
1a Total lobbying expenditures to influe	nce public opinion (	grassroots lobbying)		12,933.	ر د
b Total lobbying expenditures to influe				6,158.	,
c Total lobbying expenditures (add line	U	, , , , , , , , , , , , , , , , , , , ,	•	19,091.	
d Other exempt purpose expenditures				4,588,540.	
e Total exempt purpose expenditures		1)		4,607,631.	
f Lobbying nontaxable amount. Enter	•		n columns.	380,382.	
If the amount on line 1e, column (a) or		bying nontaxable amo			
Not over \$500,000		the amount on line 1e.	Junt 13.	•	
Over \$500,000 but not over \$1,000,0		00 plus 15% of the exce	255 over \$500.000		
Over \$1,000,000 but not over \$1,000,		00 plus 10% of the exce			
Over \$1,500,000 but not over \$1,500					
		00 plus 5% of the exces	s over \$1,500,000.		
Over \$17,000,000	\$1,000	.000.	<u></u>		
- Overseets sectoricable amount (ante	- OEM of less 10			95,096.	
g Grassroots nontaxable amount (ente	•			0.	
h Subtract line 1g from line 1a. If zero			_	0.	<u>_</u>
i Subtract line 1f from line 1c. If zero c		1		0.	<u> </u>
j If there is an amount other than zero reporting section 4911 tax for this ye		line 11, did the organiza	ition file Form 4720	Γ	Yes No
		eraging Period Under	Section 501(h)		
Some organizations that	it made a section 5	•••	nave to complete all o	f the five columns be	low.
	Lobbying Expe	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2016	( <b>b)</b> 2017	<b>(c)</b> 2018	<b>(d)</b> 2019	<b>(e)</b> Total
2a Lobbying nontaxable amount	352,573.	416,613.	395,102.	380,382.	1,544,670.
b Lobbying ceiling amount (150% of line 2a, column(e))			2,317,005.		
c Total lobbying expenditures	6,042.	21,264.	16,667.	19,091.	63,064.
d Grassroots nontaxable amount	88,143.	104,153.	98,776.	95,096.	386,168.
e Grassroots ceiling amount					50072001
e Grassroots ceiling amount (150% of line 2d, column (e))					579,252.
f Grassroots lobbying expenditures	•		6,558.	12,933.	19,491.

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Schedule C (Form 990 or 990-EZ) 2019

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#### Schedule C (Form 990 or 990 EZ) 2019 NATIONAL COLLEGE ATTAINMENT NETWORK 31-1793562 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description       (a)       (b)         of the lobbying activity.       **       .       Yes       No       Amo         1       During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter       .       <	
	unt
local legislation, including any attempt to influence public opinion on a legislative matter	
or referendum, through the use of:	
a Volunteers?	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	
c Media advertisements?	
d Mailings to members, legislators, or the public?	
e Publications, or published or broadcast statements?	
f Grants to other organizations for lobbying purposes?	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	
i Other activities?	
j Total. Add lines 1c through 1i	
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	
b If "Yes," enter the amount of any tax incurred under section 4912	
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	
501(c)(6).	No
₩	NO
1       Were substantially all (90% or more) dues received nondeductible by members?       1         2       Debtte substantially all (90% or more) dues received nondeductible by members?       1	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line answered "Yes."	3, is
1 Dues, assessments and similar amounts from members	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	
expenses for which the section 527(f) tax was paid).	
a Current year 2a	
b Carryover from last year	
c Total 2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	
expenditure next year?	
5 Taxable amount of lobbying and political expenditures (see instructions) 5	
Part IV Supplemental Information	
Provide the descriptions required for Part I.A, line 1; Part I.B, line 4, Part I.C, line 5; Part II.A (affiliated group list), Part II.A, lines 1 and 2 (see	
instructions); and Part II-B, line 1. Also, complete this part for any additional information.	

60	HEDULE D	Supplement	al Financial Stater	nante		OMB No 15	45-0047
	n 990)		anization answered "Yes" on F			20.	10
(For	n 990)	Part IV, line 6, 7, 8, 9, 10	, 11a, 11b, 11c, 11d, 11e, 11f, 1	orm 990, 2a, or 12b.		ZU	13
	ment of the Treasury I Revenue Service		Attach to Form 990. 90 for instructions and the late:			Open to Inspecti	
	e of the organizati				Employ	ver identification	n number
	•	NATIONAL COLLEGE A			•	31-17935	62
Pa	rt I Organiza	ations Maintaining Donor Advise	d Funds or Other Similar	Funds or Ac	counts	Complete if the	ne
	organizatio	n answered "Yes" on Form 990, Part IV, Iir	e 6				
			(a) Donor advised funds	(	b) Funds	and other accou	nts
1	Total number at e	nd of year					
2		f contributions to (during year)					
3	+	f grants from (during year)					
4	Aggregate value a	•	L	<u> </u>	· · ·	· · · · · ·	
5	-	on inform all donors and donor advisors in	-	nor advised fund	S		<b>—</b>
~	•	on's property, subject to the organization's	•		•	_ L Yes	No No
6	-	on inform all grantees, donors, and donor a poses and not for the benefit of the donor o			•		
	impermissible priv		r donor advisor, or for any other	purpose comerni	ig	Yes	No
Pa		ation Easements. Complete if the or	anization answered "Yes" on Fo	rm 990. Part IV.	ine 7.		
1		servation easements held by the organization					
		of land for public use (for example, recrea		vation of a histor	rically imp	portant land area	1
	<u> </u>	f natural habitat	·	vation of a certif	•	•	
	Preservation	n of open space					
2	Complete lines 2a	through 2d if the organization held a qualit	ed conservation contribution in t	the form of a con	servatior	n easement on th	e last
	day of the tax year	r.		[	He	eld at the End of th	e Tax Year
а	Total number of co	onservation easements	_		2a		
b	Total acreage rest	ricted by conservation easements			2b		
С	Number of conser	vation easements on a certified historic str	ucture included in (a)	1	2c		
d	Number of conser	vation easements included in (c) acquired a	ifter 7/25/06, and not on a histor	ic structure			
	listed in the Nation	nal Register		l	2d_		
3	Number of conser	vation easements modified, transferred, rel	eased, extinguished, or terminate	ed by the organiz	ation dui	ring the tax	
	year 🕨						
4		where property subject to conservation eas				-	
5	+	tion have a written policy regarding the per		dling of			<u> </u>
	•	orcement of the conservation easements it					
6		r hours devoted to monitoring, inspecting,	nandling of violations, and enford	ing conservation	easeme	ents during the ye	ear
7	Amount of expens	es incurred in monitoring, inspecting, hand	ling of violations, and enforcing	conservation eas	omonte c	turing the year	
'	► \$	is incurred in monitoring, inspecting, nare	ing of violations, and entoroning t		emento c	anng the year	
8	· · · · · · · · · · · · · · · · · · ·		e satisfy the requirements of sec	tion 170(h)(4)(B)(i	)		
-	and section 170(h)				,	Yes	No No
9		be how the organization reports conservation	on easements in its revenue and	expense stateme	ent and		
		d include, if applicable, the text of the footr				es the	
		ounting for conservation easements					
Par	t III Organiza	ations Maintaining Collections of	Art, Historical Treasures	, or Other Si	milar A	sets.	
	Complete if	the organization answered "Yes" on Form	990, Part IV, line 8.				
1a	If the organization	elected, as permitted under FASB ASC 95	8, not to report in its revenue sta	tement and bala	nce shee	t works	
	of art, historical tre	easures, or other similar assets held for put	lic exhibition, education, or resea	arch in furtherand	ce of pub	blic	
	service, provide in	Part XIII the text of the footnote to its finar	icial statements that describes th	iese items.			
b	If the organization	elected, as permitted under FASB ASC 95	8, to report in its revenue statem	ent and balance	sheet wo	orks of	
	art, historical treas	sures, or other similar assets held for public	exhibition, education, or researc	h in furtherance	of public	service,	
	-	ng amounts relating to these items					
	(i) Revenue inclu	ded on Form 990, Part VIII, line 1			▶ \$_		
		ed in Form 990, Part X					
2	•	received or held works of art, historical trea		financial gain, p	rovide		
	0	unts required to be reported under FASB A	SC 958 relating to these items.				
		on Form 990, Part VIII, line 1			▶ \$_		
b	Assets included in	Form 990, Part X			▶ \$	hodulo D (Farm	

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Schedule D (Form 990) 2019

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Sche		L COLLEGE						<u>31-17</u>		Page 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Histe	orical Tre	asures, o	r Other	Simila	r Assets	(continu	ed)
3	Using the organization's acquisition, accessi	ion, and other record	s, check	any of the f	following that	make si	gnificant i	use of its		٠
	collection items (check all that apply):									
а	Public exhibition	c	<u>ا</u> ا	Loan or exc	hange progra	m				
b	Scholarly research	e	,	Other	··,,					
c	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explair	n how th	ey further th	e organizatio	n's exen	npt purpo	se in Part I	XIII.	
5	During the year, did the organization solicit of	or receive donations of	of art, his	storical treas	sures, or othe	er sımılar	assets	_	_	
	to be sold to raise funds rather than to be ma								Yes	No
Pai	t IV Escrow and Custodial Arran		ete if the	e organizatio	n answered "	Yes" on	Form 990	), Part IV, I	ine 9, or	
	reported an amount on Form 990, Pa	· · · · · · · · · · · · · · · · · · ·								
1a	Is the organization an agent, trustee, custode	ian or other intermed	liary for o	contribution	s or other ass	ets not i	ncluded	_	-	
	on Form 990, Part X?								Yes	L No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing t	able			<u> </u>			
									Amount	
	Beginning balance				•		1c			
	Additions during the year			• •			1d			
е	Distributions during the year	•	•		•		. <u>1e</u>			
f	Ending balance	· · · ·						<u> </u>		<u> </u>
	Did the organization include an amount on F						ty?		Yes	No No
Pai	If "Yes," explain the arrangement in Part XIII.						0			
rai	t V Endowment Funds. Complete							unara baak	(a) Four y	aara baak
4		(a) Current year	(D) P	rior year	(c) Two year	SDACK	(a) three y	ears back	(e) Four y	ears back
1a	Beginning of year balance									
b										
c L	Net investment earnings, gains, and losses				<u> </u>					<u></u>
d	Grants or scholarships				<u>}</u>					
е	Other expenditures for facilities									
	and programs		_							
1	Administrative expenses End of year balance	· · · · · · · · · · · · · · · · · · ·		· · · · · ·						
g	Provide the estimated percentage of the cur	rent year and balance		n column (a)	)) held as:					
2	Board designated or quasi-endowment	rent year end balance	e (iiiie ių %	j, column (aj	n neiu as.					
a b	Permanent endowment	%								
		<u>~~~</u> /0								
U	The percentages on lines 2a, 2b, and 2c sho	-								
3a	Are there endowment funds not in the posse	•	ation tha	t are heid ar	nd administer	ed for th	e organiza	ation		
•	by								L N	es No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations		-						3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza	ations listed as requir	ed on S	chedule R?					3b	
4	Describe in Part XIII the intended uses of the	•							<u> </u>	
Par										
·	Complete if the organization answere	d "Yes" on Form 990	), Part IV	/, line 11a. S	ee Form 990	, Part X,	line 10.			
	Description of property	(a) Cost or o			or other		ccumulate	ed	(d) Book	value
		basis (investr		basis	(other)	de	preciation		-	
1a	Land									
b	Buildings									
С	Leasehold improvements			1	4,755.		10,5	39.	4	,216.
d	Equipment				9,799.		97,6		22	,158.
e	Other			22	7,258.		220,5	80.		,678.
Tota	, Add lines 1a through 1e. (Column (d) must e	aual Form 990. Part	X. colun	nn (B). line 1	0c.)				33	,052.

Schedule D (Form 990) 2019

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Schedule D (Form 990) 2019 NATIONAL' CO Part VII Investments - Other Securities.	LLEGE ATTAIN	MENT NETWORK	31-1793562 Page 3
Complete if the organization answered "Yes"			
(a) Description of security or Category (including name of security)	(b) Book value	(c) Method of valuation. Cost	: or end-of-year market value
(1) Financial derivatives	•		
(2) Closely held equity interests			
(3) Other			
(A)		_	
(B)			
(C)			
(D) (E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			· · · · · · · · · · · · · · · · · · ·
Part VIII Investments - Program Related.	I	· · ·	•
Complete if the organization answered "Yes"	on Form 990 Part IV Jun	e 11c See Form 990 Part X line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost	
(1)			
(2)			<u>.</u>
(3)			
(4)			
(5)			
(6)			
(7)			· · · · ·
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.		· · · · · · · · · · · · · · · · · · ·	
Complete if the organization answered "Yes"	on Form 990, Part IV, Iin	e 11d. See Form 990, Part X, line 15	
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)		· · · ·	
(6)		·	
(7)			
_(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X [ Other Liabilities.		~	
Complete if the organization answered "Yes"	on Form 990, Part IV, lin	e 11e or 11f. See Form 990, Part X, I	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes	· · · · · · · ·		
(2) CAPITAL LEASE OBLIGATION			3,920.
(3) DEFERRED RENT	·		4,451.
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X. col. (B) line			▶ 8,371.
2. Liability for uncertain tax positions. In Part XIII, provide	the text of the footnote	to the organization's financial statem	ients that reports the

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organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2019

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-	dule D (Form 990) 2019 NATIONAL COLLEGE ATTAINMENT t XI Reconciliation of Revenue per Audited Financial Statement			L793562	Page 4
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		•		•
1	Total revenue, gains, and other support per audited financial statements		1	3,760,	,646.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b 39,814.			
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d		<u>2</u> e	39,	814.
3	Subtract line 2e from line 1		3	3,720	832.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b		<u>4c</u>		0.
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 12.)	· · · · ·	5	3,720,	<u>,832.</u>
Pa	t XII Reconciliation of Expenses per Audited Financial Statemer	nts With Expenses per l	Return	1.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		<del></del>		
1	Total expenses and losses per audited financial statements			4,647	<u>,445.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a 39,814.	4 1		
b	Prior year adjustments		4 1	-	
С	Other losses	2c	-		
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d		<u>2</u> e		814.
3	Subtract line 2e from line 1		3	4,607,	,631.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	_4b			•
С	Add lines 4a and 4b		4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)	• •	5	4,607,	631.
Pa	t XIII Supplemental Information.				

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

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SCHEDULE I (Form 990) Department of the Treasury	Go	Grants and Oth vernments, ar lete if the organizatio	nd Individual	s in the Uni on Form 990, Pai	ted States		OMB No 1545-0047 <b>2019</b> Open to Public
Internal Revenue Service		► Go to www.ir	rs.gov/Form990 fo		ation.		Inspection
Name of the organization	COLLEGE A	TTAINMENT N	ETWORK				Employer identification number 31-1793562
Part I General Information on Grants a							
<ol> <li>Does the organization maintain records criteria used to award the grants or assi</li> <li>Describe in Part IV the organization's pro-</li> </ol>	stance?	_			for the grants or assis	stance, and the selecti	on 🔀 Yes 🗌 No
Part II Grants and Other Assistance to	Domestic Organi	zations and Domestic	<b>Governments</b> . C	omplete if the org	anization answered "Y	es" on Form 990, Part	IV, line 21, for any
recipient that received more than	T				(f) Method of	T	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
CITIZENS FOR EDUCATIONAL							▲
EXCELLENCE - P.O. BOX 261125 - CORPUS CHRISTI, TX 78426	75-3137924	501C3	10,000.	0.			FAFSA AWARD OF EXCELLENCE
	73-3137524		10,000.				TATUR ANALO OF DACEDDUACE
PARTNERSHIP FOR LA SCHOOLS 1055 WILSHIRE BOULEVARD SUITE 1850							
LOS ANGELES , CA 90017	26-1759681	501C3	10,000.	0.			POSTSECONDARY ADVISING
ROCHESTER EDUCATION FOUNDATION 250 MILL STREET ROCHESTER, NY 14614	27-0132133	501C3	10,000.	0.			FAFSA AWARD OF EXCELLENCE
UTAH HIGHER EDUCATION ASSISTANCE AUTHORITY - 60 SOUTH 400 WEST - SALT LAKE CITY, UT 84101	87~6000545	115	10,000.	0.			FAFSA AWARD OF EXCELLENCE
ACADEMIC SUCCESS PROGRAM 5440 HARVEST HILL ROAD SUITE 234							
DALLAS, TX 75230	26-4673797	501C3	11,000.	0.		<u>}</u>	ADVOCACY
COLLEGE SUCCESS ARIZONA							
4040 E. CAMELBACK RD STE 220 PHOENIX , AZ 85018	20-2366755	501C3	11,000.	0,		1	ADVOCACY
2 Enter total number of section 501(c)(3) a				L	L	4	▶ 34.
3 Enter total number of other organization		-					0.
LHA For Paperwork Reduction Act Notice	e, see the Instruct	ions for Form 990.					Schedule I (Form 990) (2019)

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932101 10-26-19

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#### Schedule I (Form 990) NATIONAL COLLEGE ATTAINMENT NETWORK

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

-

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance →	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EDUCATION IS FREEDOM FOUNDATION							
1111 W. MOCKINGBIRD LN. SUITE 1300B							
DALLAS , TX 75247	04-3643313	501C3	11,000.	- 0.	,		ADVOCACY
			,				· · · ·
FOUNDATION FOR STUDENTS RISING							
ABOVE - PO BOX 192492 - SAN							
FRANCISCO, CA 94119	81-0615887	501C3	11,000.	0.			ADVOCACY
							1
LEADERSHIP ENTERPRISE FOR DIVERSE							
AMERICA - 315 WEST 39TH STREET							
SUITE 607 - NEW YORK , NY 10018	33-1071771	501C3	11,000.	0.			ADVOCACY
	-						
MID-AMERICA REGIONAL COUNCIL							
600 BROADWAY, SUITE 200							
KANSAS CITY , MO 64105	20-1824454	501C3	11,000.	٥.			ADVOCACY
MN STATE COLL. STUDENT ASSN.		1	1				
1515 ROBERT STREET S,							1.
WEST ST. PAUL, MN 55418	41-1804559	501C3	11,000.	0.			ADVOCACY
							-
NEED							
LAW & FINANCE BUILDING 429 4TH AVE.		•			'		• •
PITTSBURGH, PA 15219	25-6070821	501C3	11,000.	0.			ADVOCACY
ROWAN COUNTY CROSBY SCHOLARS							
225 N. MAIN STREET, SUITE 102	46 2621465	50103	11 000	^			ADVOCACY
SALISBURY, NC 28144	46-2621465	501C3	11,000.	0.			ADVOCACY
STUDENT U						-	
600 UMSTEAD ST.							
DURHAM, NC 27701	27-3460491	501C3	11,000.	. 0.			ADVOCACY
	2, 3100451		11,000.	<u> </u>			
WOODWARD HINES EDUCATION							
FOUNDATION - PO BOX 5008 -							
JACKSON, MS 39296	64-0860939	501C3	11,000.	0.			ADVOCACY

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Schedule I (Form 990)

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31-1793562

Page 1

#### NATIONAL COLLEGE ATTAINMENT NETWORK

31-1793562 Page 1

 Schedule I (Form 990)
 NATIONAL COLLEGE ATTAINMENT NETWORK

 Raft II
 Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II )

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRIDGE THE GAP COLLEGE PREP							
PO BOX 1390	01 1020207	501.00	15 000				POSTSECONDARY SUCCESSS
SAUSALITO, CA 94965	91-1930327	501C3	15,000.	0.			PROGRAMMING
CITY SQUASH							
602 E. 187TH ST. SUITE 204							POSTSECONDARY SUCCESSS
BRONX, NY 10458	42-1535583	501C3	15,000.	0.			PROGRAMMING
COLLEGE ACCESS NOW.							
3211 MARTIN LUTHER KING JR WAY S. S	ł		Į				POSTSECONDARY SUCCESSS
SEATTLE , WA 98144	68-0624494	501C3	15,000.	0.			PROGRAMMING -
			T				
COLLEGE VISIONS							
131 WASHINGTON STREET SUITE 205							POSTSECONDARY SUCCESSS
PROVIDENCE , RI 02903	27-2344723	501C3	15,000.	0.			PROGRAMMING
	· · ·						
ONTARIO-MONTCLAIR PROMISE SCHOLARS							
PO BOX 1426							
ONTARIO, CA 91762	90-0716973	501C3	15,000.	0.			POSTSECONDARY ADVISING
PROJECT GRAD HOUSTON							
3000 RICHMOND AVENUE, SUITE 400							POSTSECONDARY SUCCESSS
HOUSTON, TX 77098	76-0450397	501C3	15,000.	0.			PROGRAMMING
SPRINGFIELD PUBLIC SCHOOLS (MA)							
1550 MAIN STREET							
SPRINGFIELD, MA 01103	04-6001415	115	15,000.	0.			POSTSECONDARY ADVISING
TEENSHARP							
1200 N. FRENCH STREET							POSTSECONDARY SUCCESSS
WILMINGTON, DE 19801	27-2246880	501C3	15,000.	0.			PROGRAMMING
CADIMAL DADMARDO DOD PDUCAMION			-				
CAPITAL PARTNERS FOR EDUCATION							DOGRADION DATA
1413 K. ST. NW THIRD FLOOR	E0 1020407	50102	15 050				POSTSECONDARY SUCCESSS
WASHINGTON , DC 20005	52-1832497	501C3	15,250.	0.			PROGRAMMING

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Schedule I (Form 990)

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NATIONAL COLLEGE ATTAINMENT NETWORK

 Schedule I (Form 990)
 NATIONAL
 COLLEGE
 ATTAINMENT
 NETWORK

 Part II
 Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

3	1-	17	93	56	2	Page 1

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CROSBY SCHOLARS PROGRAM		1					
2701 UNIVERSITY PARKWAY							POSTSECONDARY SUCCESSS
WINSTON SALEM , NC 27105	31-1523230	501C3	. 15,250.	0.			PROGRAMMING
DEGREES OF CHANGE							
1102 COMMERCE ST. SUITE 400							POSTSECONDARY SUCCESSS
TACOMA , WA 98401	45-3035382	501C3	15,250.	0.			PROGRAMMING
PREP NEXT, DC PREP PROGRAM							
701 EDGEWOOD ST, NE		]					POSTSECONDARY SUCCESSS
WASHINGTON , DC 20017	02-0550253	501C3	15,250.	0.			PROGRAMMING
Abilitoron , De 20017		50105	13,230.				
COLLEGE HORIZONS, INC.							-
PO BOX 1262							POSTSECONDARY SUCCESSS
PENA BLANCA, NM 87041	20-1730126	501C3	16,500.	0.			PROGRAMMING
DENTON ISD							
1307 N. LOCUST							
DENTON, TX 76201	75-6001311	115	25,000.	0.			FAFSA AWARD OF EXCELLENCE
I KNOW I CAN-COLUMBUS							-
1108 CITY PARK SUITE 301							
COLUMBUS OH 43206	31-1229135	501C3	25,000.	0.			POSTSECONDARY ADVISING
OPERATION JUMP START							
3515 LINDEN AVENUE							POSTSECONDARY SUCCESSS
LONG BEACH, CA 90807	33-0629895	501C3	26,000.	0.			PROGRAMMING
		,					
ACHIEVE MINNEAPOLIS							
2829 UNIVERSITY AVENUE SE SUITE 850		]				]	]
MINNEAPOLIS, MN 55414	41-1425264	501C3	28,313.	0.			POSTSECONDARY ADVISING
PUGET SOUND ESD					-		
800 OAKESDALE AVE SW, RENTON, WA 98057	91-0851413	115	30,000.	0.			POSTSECONDARY ADVISING

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Schedule I (Form 990)

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#### NATIONAL COLLEGE ATTAINMENT NETWORK

932241 04-01-19

31-1793562 Page 1

Schedule I (Form 990) NATIONAL COLLEGE ATTAINMENT NETWORK

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ZCAN/COLLEGE SUCCESS ARIZONA 040 CAMELBACK ROAD SUITE 220							
HOENIX , AZ 85018	20-2366755	501C3	100,000.	0.			FAFSA AWARD OF EXCELLENC
						_	• •
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Schedule I (Form 990)

#### Schedule I (Form 990) (2019) NATIONAL COLLEGE ATTAINMENT NETWORK

 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 noncash assistance

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

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

PART I, LINE 2:

Part III

PER SIGNED GRANT AGREEMENTS BETWEEN NCAN AND THE ORGANIZATIONS, GRANTEES

MAKE AN ANNUAL REPORT TO NCAN ON GRANT ACTIVITY AND FINANCIALS. GRANT FUNDS

MUST BE USED SPECIFICALLY FOR THE PURPOSED OUTLINED IN THE GRANT PROPOSAL.

ANY GRANT FUNDS UNEXPENDED OR UNCOMMITTED AT THE END OF THE GRANT PERIOD

MUST BE PROMPTLY RETURNED TO NCAN.

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31-1793562

Page 2

50	HEDÜLE J	Compensation Information	1		545-004	17
	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		00	40	
· -		Compensated Employees		ZU	19	)
<b>D</b>		Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.		Open to	Publ	ic
	rtment of the Treasury al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe		
Nan	ne of the organizatio		Employer id			nber
		NATIONAL COLLEGE ATTAINMENT NETWORK	31-1	79356	2	
Pa	rt I Question	s Regarding Compensation				
	<b>.</b>				Yes	No
1a		iate box(es) if the organization provided any of the following to or for a person listed on Form	990,			
		line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or o					
	Travel for con	panions Payments for business use of personal re- cation and gross-up payments I Health or social club dues or initiation fee				
	<u> </u>	spending account				
	Discretionary		n, oner			
Ь	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or				
-	-	provision of all of the expenses described above? If "No," complete Part III to explain		1b		
2		n require substantiation prior to reimbursing or allowing expenses incurred by all directors,				
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2		
3	Indicate which, if a	ny, of the following the organization used to establish the compensation of the organization's				
	CEO/Executive Dire	ector. Check all that apply. Do not check any boxes for methods used by a related organization	on to			
	establish compens	ation of the CEO/Executive Director, but explain in Part III.				
	Compensation					
		compensation consultant				
	Form 990 of c	ther organizations Approval by the board or compensation c	ommittee			
4	During the year, di	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
	organization or a re	lated organization				
а	Receive a severand	e payment or change-of-control payment?		4a		X
b	Participate in, or re	ceive payment from, a supplemental nonqualified retirement plan?		4b		X
с	Participate in, or re	ceive payment from, an equity based compensation arrangement?		4c		X
	If "Yes" to any of h	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	Only section 501(	c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	'n		l	
	contingent on the i					
а	The organization?			5a		X
ь	Any related organiz	ration?		5b		X
	If "Yes" on line 5a	or 5b, describe in Part III.				
6	For persons listed	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	'n			
	contingent on the r	net earnings of				
а	The organization?			<b>6</b> a		X
ь	Any related organia	ation?		6b		X
		or 6b, describe in Part III.				
7	For persons listed	on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments				ليب
		nes 5 and 6? If "Yes," describe in Part III		7		X
8	•	reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	ie			<b> </b>
		eption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		X
9		id the organization also follow the rebuttable presumption procedure described in				لـــــا
	Regulations section	n 53 4958-6(c)?		9		L

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

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Schedule J (Form 990) 2019

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31-1793562

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

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

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

· · · · · · · · · · · · · · · · · · ·		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(B)(i)-(D)	reported as deferred on prior Form 990
(1) KIMBERLY COOK	(i)	182,679.	11,000.	216.	25,885.	13,055.	232,835.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ELIZABETH MORGAN	(i)	160,971.	0.	331.	20,618.	1,423.	183,343.	0.
DIRECTOR OF EXTERNAL RELATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) COLETTE HADLEY	(i)	134,288.	0.	619.	17,355.	10,208.	162,470.	0.
DIRECTOR OF CONSULTING SERVICES	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
<u></u>	(ii)			· · · · · · · · · · · · · · · · · · ·			·	
	(i)			· · · · · · · · · · · · · · · · · · ·				
<u> </u>	(ii)							
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	(ii)							
	(i)							•
<u></u>	(ii)				L	L	L	

Schedule J (Form 990) 2019

Schedule J (Form 990) 2019	NATIONAL COLLEGE ATTAINMENT NETWORK	<u>31-1793562</u> Page <b>3</b>
Part III, Supplemental Informa	ition	
Provide the information, explanate	ion, 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.
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Schedule J (Form 990) 2019

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information.

EZ <u>2019</u> <u>Open to Public</u> <u>Inspection</u> Employer identification number

 Name of the organization
 Employer identification null

 NATIONAL COLLEGE ATTAINMENT NETWORK
 31-1793562

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

GAPS IN POSTSECONDARY ATTAINMENT FOR ALL STUDENTS.

FORM 990, PART VI, SECTION A, LINE 6:

NATIONAL COLLEGE ATTAINMENT NETWORK HAS MEMBERS. THE ONLY RIGHT GIVEN TO

REGULAR MEMBER ORGANIZATIONS IS THE RIGHT TO ELECT THE MEMBERS OF NCAN'S

GOVERNING BODY.

FORM 990, PART VI, SECTION A, LINE 7A:

EACH YEAR AT THE NCAN ANNUAL MEETING EACH REGULAR MEMBER ORGANIZATION IS

GIVEN ONE VOTE TO CAST FOR ANY NEW AND RENEWING BOARD MEMBERS FOR THAT

PARTICULAR YEAR.

FORM 990, PART VI, SECTION A, LINE 7B:

MEMBERS OF THE ORGANIZATION ELECT THE ORGANIZATION'S BOARD OF DIRECTORS AT THE ANNUAL MEMBERSHIP MEETING.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FEDERAL FORM 990 IS REVIEWED INITIALLY BY THE IN-CHARGE ACCOUNTANT,

THEN REVIEWED BY THE BOARD OF DIRECTORS. THE FINAL PRODUCT IS MADE

AVAILABLE FOR REVIEW AND COMMENTS PRIOR TO FILING THE RETURN.

FORM 990, PART VI, SECTION B, LINE 12C:

THE ORGANIZATION REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES

COMPLIANCE WITH THE POLICY THROUGH ANNUAL BOARD MEETINGS AND STAFF

MEETINGS.

Schedule O (Form 990 or	990-EZ) (2019)				Page <b>2</b>
Name of the organization		COLLEGE AT	TAINMENT	NETWORK	Employer identification number 31-1793562
		• · · · · · · · · · · · · · · · · · · ·			
FORM 990, PAR	T VI, SEC	TION B, LIN	E 15:		

FOR THE EXECUTIVE DIRECTOR, THEY RECEIVED COMPARABILITY DATA AND

BENCHMARKING STUDY BY HR CONSULTANT, WHICH WAS THEN REVIEWED BY THE BOARD

COMMITTEE AND THE COMPENSATION WAS THEN DECIDED UPON. FOR EMPLOYEES, THE

ORGANIZATION WORKED WITH AN HR CONSULTANT AND RECEIVED COMPARABILITY DATA

AND A SALARY BENCHMARKING STUDY THE ORGANIZATION USED FOR DETERMINING THE

COMPENSATION OF THE EMPLOYEE.

FORM 990, PART VI, SECTION C, LINE 19:

THE DOCUMENTS ARE SHARED WITH MEMBERS AT THE ANNUAL MEETING, AND ARE POSTED

TO THE ORGANIZATION'S WEBSITE UNDER THE MEMBERS ONLY SECTION. THESE

DOCUMENTS ARE ALSO AVAILABLE UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

CONSULTANTS:

PROGRAM SERVICE EXPENSES	701,524.
MANAGEMENT AND GENERAL EXPENSES	86,063.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	787,587.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	787,587.

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

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Building Connections Advancing Equity. Promoting Success.

1001 Connecticut Avenue NW Suite 300 Washington, DC 20036 Phone (202) 347-4848 www.collegeaccess org

#### **Board Members**

Nate Easley, Ph D. Board President EasleyFoundSolutions, LLC

> Steve Colón Board Vice President Bottom Line

> > Adam Berg Board Treasurer AEM Corporation

Jamie Sears Board Secretary UBS Americas

Tina Fernandez Achieve Atlanta

Marlene Ibsen Travelers Foundation

Paul Luna Helios Education Foundation

> Candy Marshall TheDream.US

Stephen M. Smith Intellispark

Herb Tillery College Success Foundation – District of Columbia

Ricardo Torres National Student Clearinghouse

> Executive Director Kim Cook

### NCAN Board of Directors Resolution 20-01 February 7, 2020

**RESOLVED**, that the National College Access Network shall change its name to the National College Attainment Network, effective February 7, 2020, and will make all necessary updates to its Articles of Incorporation, Bylaws, and registrations.

Nathaniel Easley, Ph.D. Board President



DATE 02/14/2020 DOCUMENT ID DE 202004204450 AM

DESCRIPTION AMENDMENT TO ARTICLES (AMD) FILING EXPED CERT COPY 50 00 0 00 0 00 0 00

**Receipt** This is not a bill Please do not remit payment

C T CORPORATION SYSTEM 4400 EASTON CMNS WAY STE 125 COLUMBUS, OH 43219

## STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Frank LaRose 1245406

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

NATIONAL COLLEGE ATTAINMENT NETWORK

and, that said business records show the filing and recording of:

Document(s)

AMENDMENT TO ARTICLES

Effective Date: 02/11/2020

Document No(s): 202004204450



United States of America State of Ohio Office of the Secretary of State Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 14th day of February, A.D. 2020.

Fact flore

**Ohio Secretary of State** 

Form 541 Prescribed by:



Toll Free: 877.767.3453 | Central Ohio: 614.466.3910 <u>OhioSoS.gov</u> | <u>business@OhioSoS.gov</u> File online or for more information: <u>OhioBusinessCentral.gov</u>

### Certificate of Amendment (Nonprofit, Domestic Corporation) Filing Fee: \$50 Form Must Be Typed

heck t	he appropriate box:
X	Amendment to existing Articles of Incorporation by Members pursuant to Ohio Revised Code section 1702.38(C) (128-AMD
	Amended and Restated Articles by Members pursuant to Ohio Revised Code section 1702.38(D) or by Directors pursuant to Ohio Revised Code section 1702.38(E) (126-AMAN) - The following articles supersede the existing articles and all amendments thereto.

ormation:	
NATIONAL COLLEGE ACCESS NETWORK, INC.	
<u>^</u>	
1245406	

#### A copy of the resolution of amendment must be attached to this document.

Note: If amended and restated articles were adopted, amended articles must set forth all provisions required in original articles other than with respect to the initial directors pursuant to Ohio Revised Code section 1702.38(A). In the case of adoption of the resolution by the directors, a statement of the basis for such adoption shall be provided.

Form 540 Prescribed by.



Toll Free: 877.767.3453 Central Ohio: 614.466.3910 OhioSoS.gov business@OhioSoS.gov File online or for more information: OhioBusinessCentral.gov Eor screen readers. follow instructions, located at this path.

Mail this form to one of the following: Regular Filing (non expedite) P.O. Box 1329 Columbus, OH 43218 Expedito Filing (Two business day processing the Requires an additional \$100.00) ng tie P.O. Box 1390 Columbus, OH 43216

### **Certificate of Amendment** (For-Profit, Domestic Corporation) Filing Fee: \$50 Form Must Be Typed

Check appropriate box:

Amendment to existing Articles of Incorporation (125-AMDS)

Amended and Restated Articles (122-AMAP) - The following articles supprace the existing articles and all amendments thereto.

Complete the following i	nformation:	
Name of Corporation	NATIONAL COLLEGE ACCESS NETWORK, INC.	
Charter Number	1245406	

Check one box below and provide information as required:

	The articles are hereby amended by the <b>Incorporators</b> . Pursuant to Ohio Revised Code section 1701.70 (A), incorporators may adopt an amendment to the articles by a writing signed by them if initial directors are not named in the articles or elected and before subscriptions to shares have been received.
Ň	The articles are hereby amended by the <b>Directors.</b> Pursuant to Ohio Revised Code section 1701.70(A), directors may adopt amendments if initial directors were named in articles or elected, but subscriptions to shares have not been received. Also, Ohio Revised Code section 1701.70(B) sets forth additional cases in which directors may adopt an amendment to the articles.
	The resolution was adopted pursuant to Ohio Revised Code section 1701.70(B) (In this space insert the number 1 through 10 to provide basis for adoption.)
	The articles are hereby amended by the Shareholders pursuant to Ohio Revised Code section 1701.71.
<b>–</b>	The articles are hereby amended and restated pursuant to Ohio Revised Code section 1701.72.

\_ \_\_\_\_

By signing and submitting this form has the requisite authority to execut	to the Ohio Secretary of State, the undersigned hereby certifies that he or she te this document.
Required	National College Attainment Network
Must be signed by an authorized officer of the	Signature
Corporation pursuant to the Ohio Revised Code	Kimberly M Cook
section 1702.38(G).	By (if applicable)
If authorized representative is an individual, then they	Kimberly M Cook
must sign in the "signature" box and print their name in the "Print Name" box.	Print Name
If authorized representative	
is a business entity, not an individual, then please print the business name in the	Signature
"signature" box, an authorized representative	
of the business entity must sign in the "By" box	By (if applicable)
and print their name in the "Print Name" box.	
	Print Name
·	

#### A copy of the resolution of amendment is attached to this document.

Note: If amended articles were adopted, they must set forth all provisions required in original articles except that articles amended by directors or shareholders need not contain any statement with respect to initial stated capital. See Ohio Revised Code section 1701.04 for required provisions.

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

. 1 .

Print Name

#### Required

Must be signed by all incorporators, if amended by incorporators, or an authorized officer if amended by directors or shareholders, pursuant to Ohio Revised Code section 1701.73(B) and (C).

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.

Signature	ge Attainment	Network	
Lunberly M. By (if applicable)	.Cogle		
Kimberly I Print Name	M. Cook		
	<u> </u>		
Signature	· · · · · · · · · · · · · · · · · · ·		
By (if applicable)	<u></u>	s )	

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Last Revised: 06/2019

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#### **Board Members**

Nate Easley, Ph.D. **Board President** EasleyFoundSolutions, LLC

> Steve Colón Board Vice President Bottom Line

> > Adam Bero **Board Treasurer**

Jamie Sears Board Secretary **UBS** Americas

**Tina** Fernandez Achieve Atlanta

Marlene Ibsen **Travelers Foundation** 

Paul Luna **Helios Education Foundation** 

> Candy Marshall TheDream.US

Stephen M. Smith Intellispark

Herb Tillery College Success Foundation -**District of Columbia** 

**Ricardo Torres** National Student Clearinghouse

> **Executive Director** Kim Cook

### **NCAN Board of Directors Resolution 20-01** February 7, 2020

**RESOLVED**, that the National College Access Network shall change its name to the National College Attainment Network, effective February 7, 2020, and will make all necessary updates to its Articles AEM Corporation of Incorporation, Bylaws, and registrations.

Nathaniel Easley, Ph.D. **Board President**