990

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundation Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-

Form **990** (2021)

Open to Public ▶ Go to <u>www.irs.gov/Form990</u> for instructions and the latest information. Inspection Department of the Treasury A For the 2021 calendar year, or tax year beginning 01-01-2022 , and ending 12-31-2022 C Name of organization D Employer identification number **B** Check if applicable: Address change INVEST IN EDUCATION COALITION INC 45-4955967 Name change Initial return Doing business as Final return/terminated E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite Amended return PO BOX 38222 410 (518) 368-3627 Application pending City or town, state or province, country, and ZIP or foreign postal code ALBANY, NY $\,$ 122038222 G Gross receipts \$ 925,000 F Name and address of principal officer: H(a) Is this a group return for ANTHONY DE NICOLA subordinates? PO BOX 38222 410 **H(b)** Are all subordinates ALBANY, NY 122038222 included? If "No," attach a list. See instructions. **H(c)** Group exemption number ▶ Website: ► WWW.INVESTINEDUCATION.ORG L Year of formation: 2012 M State of legal domicile: NY K Form of organization: 🔽 Corporation 🔲 Trust 🦳 Association 🦳 Other 🕨 Summary 1 Briefly describe the organization's mission or most significant activities: THE INVEST IN EDUCATION COALITION, INC. IS AN ADVOCACY ORGANIZATION THAT WORKS TO PROMOTE SOCIAL WELFARE THROUGH ITS SUPPORT OF FEDERAL AND STATE LEGISLATION THAT ENCOURAGES THE USE OF CHARITABLE Activities & Governance RESOURCES TO SUPPORT EDUCATION Check this box \blacktriangleright if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) \cdot \cdot 3 Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2021 (Part V, line 2a) 0 Total number of volunteers (estimate if necessary) \cdot \cdot \cdot 6 0 Total unrelated business revenue from Part VIII, column (C), line 12 . 7a **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) 1,250,000 925,000 Program service revenue (Part VIII, line 2g) n 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 0 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,250,000 925,000 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . 13 100,000 5,000 Benefits paid to or for members (Part IX, column (A), line 4) . . . 14 38,700 50,990 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) **16a** Professional fundraising fees (Part IX, column (A), line 11e) . . . 0 **b** Total fundraising expenses (Part IX, column (D), line 25) 324 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 583,440 1,100,055 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 734,430 1,143,755 Revenue less expenses. Subtract line 18 from line 12 . 515,570 -218,755 **Beginning of Current End of Year** 746,141 466,430 Total assets (Part X, line 16) . Total liabilities (Part X, line 26) . 100,059 39,103 Net assets or fund balances. Subtract line 21 from line 20 . 646,082 **Signature Block** Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 2023-10-30 Signature of officer Sign MICHAEL J STRIANESE CFO & COO

Type or print name and title

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Paid	
Prepare	r
Use Onl	У

Paid	Print/Type preparer's name	Preparer's signature	Date 2023-10-30	Check if if self-employed	PTIN P01278366
Preparer	Firm's name TEAL BECKER & CH	TEAL BECKER & CHIARAMONTE CPAS PC Firm's EIN ► 14-1624930			
Use Only	Firm's address ► 7 WASHINGTON SQ ALBANY, NY 12205			Phone no. (518	3) 456-6663
May the IRS dis	cuss this return with the prepare	r shown ahove? (see instructi	nns)		Ves No

Forr	n 990 (2021)			Page :
Pa	art IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		Νo
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions. 🥞	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νo
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the			

right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete

Did the organization receive or hold a conservation easement, including easements to preserve open space,

Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

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

permanent endowments, or 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,

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of

its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 5 c 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 🐿 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 为 e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X

Did the organization's separate or consolidated financial statements for the tax year include a footnote that

12a ប៊ីលើវិទាទ ទល្បានខែងរនិទាំ១៩៥នា និទ្ធាទាខែង និងកែន dependent audited financial statements for the tax year? If "Yes," complete

. If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🐒

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for

b Was the organization included in consolidated, independent audited financial statements for the tax year?

14a Did the organization maintain an office, employees, or agents outside of the United States?

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other

Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions. 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

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

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

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If

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

assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

any foreign organization? If "Yes," complete Schedule F, Parts II and IV

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part Il 🖠

negotiation services? If "Yes," complete Schedule D. Part IV 📆

VIII, IX, or X, as applicable.

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Form **990** (2021)

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Yes

Yes

Yes

Form 990 (2021)

Form 990 ((2021)		Page
Part IV	Checklist of Required Schedules (continued)		
		Yes	No

Par	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		Νo
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,"	23		Νo

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

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

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior

year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If

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

哲道學研究 公公司用包括证例所的的形式的 智利并引力 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?

Was the organization a party to a business transaction with one of the following parties (see the Schedule L,

c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes,"

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . .

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

Hid He Granketa School field to Me, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🖠 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

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

Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V .

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?

Part IV instructions for applicable filing thresholds, conditions, and exceptions):

"Yes," complete Schedule L, Part I

If "Yes," completeSchedule L,Part III

conservation contributions?

sections 301.7701-2 and 301.7701-3?

1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable

b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable .

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

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Part V

entity or family member of any of these persons?

a A current or former officer, director, trustee, key employee, creator or founder, or substantial cont	ributor? <i>If "Yes,"</i>				
complete Schedule L, Part IV		28a		No	
h A family member of any individual described in line 28a? If "Yes " complete Schedule I Part IV	A family member of any individual described in line 2832 If "Ves." complete Schedule I. Part IV				

Pai	Statements Regarding Other IRS Filings and Tax Compliance (continued)						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	2b	Yes				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Νo			
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	4a		No			
b	over, a financial account in a foreign country (such as a bank account, securities account, or other financial						
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts						
	5a (Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?						
b	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes." to line 5a or 5b, did the organization file Form 8886-T?						
	c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?						
	6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?						
	 b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?						
7	_						
	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		N o			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b					
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No			
d	If "Yes," indicate the number of Forms 8282 filed during the year						
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e					
f		7f					
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?						
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?						
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	a Did the sponsoring organization make any taxable distributions under section 4966?						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b					
10	Section 501(c)(7) organizations. Enter:						
	Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club 10b	_					
ь 11	Section 501(c)(12) organizations. Enter:	_					
	Gross income from members or shareholders						
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b	_					
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.						
а	Is the organization licensed to issue qualified health plans in more than one state?	13a					
	Note. See the instructions for additional information the organization must report on Schedule O.						
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans						
_	in which the organization is needs to issue qualified fleatin plans						
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νο			
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b					
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No			
16	IS "thesphsæmithtionstruetloostionthfilmsFiturtio和及即jachedulmensection 4968 excise tax on net investment income?	16		No			
17	If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17					

Section C. Disclosure

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apply.

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Νo

Page 6

	Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 thro	ough i	7b below, and for a "No" r	espons	e to lines	S
	8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule Check if Schedule O contains a response or note to any line in this Part VI	e 0. S	ee instructions.			. [
	Section A. Governing Body and Management					
					Yes	No
	1a Enter the number of voting members of the governing body at the end of the tax	1a	3			
	Yeare are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					
	b Enter the number of voting members included in line 1a, above, who are independent	1b	3			
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		Νo
	3 Did the organization delegate control over management duties customarily performed supervision of officers, directors or trustees, or key employees to a management cor	,		3		Νo
	4 Did the organization make any significant changes to its governing documents since	the p	orior Form 990 was	4	Yes	
	5 Blackhe organization become aware during the year of a significant diversion of the o	organi	zation's assets? .	5		Νo

	or similar committee, explain in Schedule O.						
b	Enter the number of voting members included in line 1a, above, who are independent	1b		3			
2	Did any officer, director, trustee, or key employee have a family relationship or a bu other officer, director, trustee, or key employee?				2		Νo
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co				3		Νo
4	Did the organization make any significant changes to its governing documents since	the p	orior Form 9	990 was	4	Yes	
5	600 d $^{\circ}$ organization become aware during the year of a significant diversion of the $^{\circ}$	organi	zation's ass	sets? .	5		Νo
6	Did the organization have members or stockholders?				6		Νo
7a	Did the organization have members, stockholders, or other persons who had the pow more members of the governing body?				7a	Yes	

	Independent								
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?						2		No
3	Did the organization delegate control over management duties customarily performed supervision of officers, directors or trustees, or key employees to a management control of the control	,					3		Νo
4	Did the organization make any significant changes to its governing documents since	the p	rior f	orm 9	90 wa	S	4	Yes	
5	600 organization become aware during the year of a significant diversion of the o	rgani	zatior	ı's asse	ets?		5		Νo
6	Did the organization have members or stockholders?						6		Νo
7a	Did the organization have members, stockholders, or other persons who had the pow more members of the governing body?						7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?	, ,					7b	Yes	
8	Did the organization contemporaneously document the meetings held or written action year by the following:	ons ur	nderta	aken dı	uring 1	the			
а	The governing body?						8a	Yes	
b	Each committee with authority to act on behalf of the governing body?						8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, whorganization's mailing address? If "Yes," provide the names and addresses in Schedule						9		Νo
_					· ·			_	

3	supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		Νo
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was	4	Yes	
5	60° organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
6	Did the organization have members or stockholders?	6		Νo
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	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	even	ue Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11-	Has the organization provided a complete copy of this Form 000 to all members of its governing body before filling			

	, , , , , , , , , , , , , , , , , , , ,			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was	4	Yes	
5	60° organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
6	Did the organization have members or stockholders?	6		Νo
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	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νο
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
122			.,	
120	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	l

8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:										
а	The governing body?	8a	Yes								
b	Each committee with authority to act on behalf of the governing body?	8b	Yes								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No							
Se	Section B. Policies (This Section B requests information about policies not required by the Internal Rev										
			Yes	No							
10a	Did the organization have local chapters, branches, or affiliates?	10a		No							
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b									
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes								
b	Describe on 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	Yes								
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes								
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	Yes								
13	Did the organization have a written whistleblower policy?	13	Yes								
14	Did the organization have a written document retention and destruction policy?	14	Yes								
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?										
а	The organization's CEO, Executive Director, or top management official	15a		No							
b	Other officers or key employees of the organization	15b		Νo							
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	16-		NI -							

Own website Another's website Vpon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

List the states with which a copy of this Form 990 is required to be filed NY

interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: MICHAEL STRIANESE PO BOX 38222 ALBANY, NY 122038222 (518) 368-3627 Form 990 (2021)

Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that

b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax vear. 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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from organization and any related organizations. List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations. • List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the 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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.								<u>e.</u>		
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	person is both an officer and a director/trustee)		(D) Reportable compensation from the organization (W-2/1099- MISC/1099- NEC)	(E) Reportable compensation from related organizations (W-2/1099- MISC/1099- NEC)	(F) Estimated amount of other compensation from the organization and related organizations				
			Ø.			ted				
(1) ANTHONY J DE NICOLA	3.00									
CHAIR		Х		Х				0	0	0
(2) ROBERT H NIEHAUS	3.00 1.00									
TREASURER		Х						0	0	0
(3) THOMAS MCINERNEY	1.00									
SECRETARY		Х						0	0	0
(4) MICHAEL J STRIANESE	1.00									
CFO & COO				Χ				0	60,000	0
	40.00									
					1		1	l	<u> </u>	Form 990 (2021)

	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	Average Position (d more than or person is be and a direct related ganizations low dotted				x, unlo	ess er	Repo compe froi organiz 2/1 MISC	D) ortable ensation in the ation (W- 099- /1099- EC)	(E) Reportable compensation from related organizations (W-2/1099- MISC/1099- NEC)	(F) Estimated amount of other compensation from the organization and related organizations
1b 9	Sub-Total						•					
_	Fotal from continuation sheets to Pa Fotal (add lines 1b and 1c)	rt VII, Section A					*			0	60,000	0
2	Total number of individuals (includi \$100,000 of reportable compensat	ng but not limit	ed to th	nose	liste	d al	bove)	who	received	I more tha	ın	
3	Did the organization list any forme on line 1a? <i>If "Yes," complete Sched</i>	r officer, directo	or or tru	ıstee		y er	mploye	ee, o	or highest	t compens	. ,	Yes No
4	For any individual listed on line 1a, organization and related organizat individual										ch	4 No
5	Did any person listed on line 1a reservices rendered to the organizat						,		_	nnization o		5 No
	ection B. Independent Contr		nto J.	da:-:	لمي		- n-t		+6-+	المارية المارية	to then #100 000	
1	Complete this table for your five h compensation from the organization	n. Report compe									nin the organization	's tax year.
BOCE		(A) and business addre	ess								(B)	(C) Compensation
	PUBLIC AFFAIRS GROUP LLC F ST NW SUITE 1200									LOBBAING A	and advocacy	253,250
WASH	NINGTON, DC 20004 PUBLIC AFFAIRS GROUP LLC									LOBBYING A	ND MEDIA RELATIONS	147,408
	MONUMENT CIR SUITE 2700 NAPOLIS, IN 46204											
	EN-GROVE STRATEGIES LLC									MEDIA RELA ADVOCACY	ATIONS, RESEARCH &	127,500
	VOLF ROAD SUITE 410 NY, NY 12205											
	Total number of independent contracts 100,000 of compensation from the	,		limite	ed to	o th	ose lis	sted	above) w	vho receiv	ed more than	

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

Part	VIII Statement of Revenue					Page :
rait	Check if Schedule O contains a res	ponse or note to a	ny line in this Par	t VIII		🗆
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, gifts, grants, and other similar amounts	1a Federated campaigns					
	f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a - 1f:\$ h Total. Add lines 1a-1f	925,000				
	I Total. Add illies 1a 11	Business Code	925,000			
Program Service Revenue	b c d e f All other program service revenue. 9 Total. Add lines 2a-2f					
	3 Investment income (including dividends other 49 Minimal afternation after a transfer afternation and the second at the second at the second assets other than inventory by Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) c Gain or (loss) d Net gain or (loss) c Gain or (loss) c Gain or (loss) d Net gain or (loss) c Net income or (loss) from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising experts and allowances c Net income or (loss) from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from sales of inventory, less returns and allowances 10a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory discussed and sales are the same and allowances d All other revenue 11a	bond proceeds (ii) Personal (ii) Other (iii) Other vities Business Code				
	e Total. Add lines 11a-11d	>				
	12 Total revenue. See instructions		925,00	0 0	0	
	<u>i</u>		323,00		<u>. </u>	•

	art IX Statement of Functional Expenses				rage 10
	Section 501(c)(3) and 501(c)(4) organizations mu	·		<u>.</u>	
	Check if Schedule O contains a response or note to	o any line in this Part			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	5,000	5,000		
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, trustees, and key employees	22,500	22,500		
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	14,672	13,499	880	293
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits		1	1	
	Payroll taxes	1,528	1,405	92	31
	Fees for services (non-employees):				<u> </u>
	Management				
Ŀ	Legal	22,824		22,824	
c	Accounting	14,619		14,619	
c	l Lobbying	352,250	352,250		
•	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
9	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	593,161	593,161		
12	Advertising and promotion	27,950	13,975	13,975	
13	Office expenses	2,614	1,307	1,307	
14	Information technology				
	Royalties				
16	Occupancy	9,058	4,529	4,529	
	Travel	37,293	37,293		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	6,038	3,019	3,019	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	a SOFTWARE	27,588	13,794	13,794	
		6.660	2 220	2 220	
	b SUBSCRIPTIONS	6,660	3,330	3,330	
	С				
	d				
	e All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,143,755	1,065,062	78,369	324
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).				

Forr	n 990	(2021)				Page 11
Р	art X	Balance Sheet				
		Check if Schedule O contains a response or not	te to any line in this Part IX .			
				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		743,150	1	465,530
	2	Savings and temporary cash investments	Г		2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	6	Loans and other receivables from any current or trustee, key employee, creator or founder, subst controlled entity or family member of any of the Loans and other receivables from other disquali under section 4958(f)(1)), and persons describ		5		
S	7	Notes and loans receivable, net			7	
ssets	8	Inventories for sale or use			8	
SS	9	Prepaid expenses and deferred charges		2,991	9	900
,	10a	Land, buildings, and equipment: cost or	.Oa 0			
	b	Less: accumulated depreciation 1	.0b	0	10c	
	11	Investments—publicly traded securities .			11	
	12	Investments—other securities. See Part IV, line	11		12	
	13	Investments—program-related. See Part IV, line	11		13	
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11			15	
	16	Total assets: Add lines 1 through 15 (must equal	al line 33)	746,141	16	466,430
	17	Accounts payable and accrued expenses		87,930	17	39,103
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
S	21	Escrow or custodial account liability. Complete	Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or form key employee, creator or founder, substantial co controlled entity or family member of any of the	ontributor, or 35%		22	
	23	Secured mortgages and notes payable to unrela	ted third parties		23	
	24	Unsecured notes and loans payable to unrelated	I third parties		24	
	25	Other liabilities (including federal income tax, p parties, and other liabilities not included on line Complete Part X of Schedule D		12,129	25	0
	26	Total liabilities. Add lines 17 through 25		100,059	26	39,103
es		Organizations that follow FASB ASC 958, check	here 🕨 🔽 and complete			
Balances	27	lines 27, 28, 32, and 33. Net assets without donor restrictions		646,082	27	427,327
l Ba	28	Net assets with donor restrictions	1	İ	28	

29

30 31

32

33

646,082

746,141

427,327

466,430

Form **990** (2021)

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

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

Retained earnings, endowment, accumulated income, or other funds

complete lines 29 through 33.
Capital stock or trust principal, or current funds . . .

Total net assets or fund balances

Total liabilities and net assets/fund balances

	11
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3b

Νo

Form 990 (2021)

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

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

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

Schedule O.

Single Audit Act and OMB Circular A-133?

Form 990 (2021)		
Additional Data		Return to Form
	Coftware ID:	
	Software ID:	
	Software Version:	
Form 990, Special Condition D	escription:	
	Special Condition Description	

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No. 1545-0047

Open to Public Inspection Attach to Form 990. Department of the Treasury Internal Revenue Service ▶ Go to <u>www.irs.gov/Form990</u> for instructions and the latest information. Employer identification number Name of the organization

INV	EST IN EDUCATION COALITION INC			45 4055067
Pa	ort I Organizations Maintaining Donor Ac	dvised Funds or	Other Similar Fu	ds-4955967 nds or Accounts.
	Complete if the organization answered "			
	-	(a) Donor ad	vised funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advi the organization's property, subject to the organization			
6	Did the organization inform all grantees, donors, and charitable purposes and not for the benefit of the dono impermissible private benefit?	or or donor advisor, o	r for any other purpos	e conferring
Pa	rt II Conservation Easements. Complete if the organization answered "			
1	Purpose(s) of conservation easements held by the or			
	Preservation of land for public use (e.g., recreation	n or education)	Preservation of an h	nistorically important land area
	Protection of natural habitat		Preservation of a ce	ertified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held	a qualified conserva	tion contribution in the	e form of a conservation
	easement on the last day of the tax year.	•		Held at the End of the Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements		L	2b
С	Number of conservation easements on a certified hist	oric structure include	ed in (a)	2c
d	Number of conservation easements included in (c) acc historic structure listed in the National Register	quired after 7/25/06,		2d
3	Number of conservation easements modified, transfer tax year	red, released, exting	uished, or terminated	by the organization during the
	·	tion occoment is loc	atad b	
4 -	Number of states where property subject to conserva		•	
5	Does the organization have a written policy regarding violations, and enforcement of the conservation ease			ng or ☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, insp year	ecting, handling of v	iolations, and enforcin	g conservation easements during the
7	Amount of expenses incurred in monitoring, inspectin	g, handling of violati	ons, and enforcing cor	nservation easements during the year
8	Does each conservation easement reported on line 2 (B)(i) and section 170(h)(4)(B)(ii)?		•	
9	In Part XIII, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation easem	he footnote to the or		· ·
Pai	TIII Organizations Maintaining Collection Complete if the organization answered			r Other Similar Assets.
1a	If the organization elected, as permitted under FASB of art, historical treasures, or other similar assets hel service, provide, in Part XIII, the text of the footnote	d for public exhibitio	n, education, or resea	rch in furtherance of public
b	If the organization elected, as permitted under FASB art, historical treasures, or other similar assets held provide the following amounts relating to these items	for public exhibition,		
	(i) Revenue included on Form 990, Part VIII, line 1 · · ·			> \$
(ii) Assets included in Form 990, Part X			> \$
2	If the organization received or held works of art, histofollowing amounts required to be reported under FAS	orical treasures, or of	ther similar assets for	
а	Revenue included on Form 990, Part VIII, line 1 · ·			. \$
b	Assets included in Form 990, Part X			>\$
	Paperwork Reduction Act Notice, see the Instructions f		Cat. No.	Schedule D (Form 990) 2021

Par	rt III Organizations Maintaini	ng Collection	ns of A	rt, Historic	al Trea	asures, o	r Other Sir	milar Assets (continued)
3	Using the organization's acquisition, a	·	ther reco	rds, check an	y of the f	ollowing th	at are a signi	ficant use of its
_	collection items (check all that apply)	:		d □ ı				
а	Public exhibition					xchange pr	-	
b	Scholarly research			e 🗌 (Other			
C	Preservation for future generation	าร						
4	Provide a description of the organizati Part XIII.	on's collections a	and expla	nin how they f	further th	ne organiza	tion's exempt	purpose in
5	During the year, did the organization assets to be sold to raise funds rather							Yes No
Pa	Escrow and Custodial And Complete if the organization Part X, line 21.			orm 990, P	art IV, I	line 9, or	reported an	amount on Form 990,
1a	Is the organization an agent, trustee, included on Form 990, Part X?			•				Yes No
b	If "Yes," explain the arrangement in P	art XIII and com	nplete the	e following ta	ble:			Amount
c			•	_		1c		
d						1d		
e						1e		
f						1f		
2a	3						count liability	2 Yes No
Za	· · ·	10 011 1 01111 990,	rait X, ii	116 21, 101 65	crow or c	ustoulal at	count nability	
b	If "Yes," explain the arrangement in P	art XIII. Check	here if th	e explanatior	n has bee	n provided	in Part XIII	🗆
Pa	art V Endowment Funds.		/ II F	000 B		10		
	Complete if the organizatio	n answered "Y (a) Curre		orm 990, P (b) Prior ye			ack (d) Three ve	ears back (e) Four years back
1a	Beginning of year balance	,	one your	(2) , c		, ca. 5	(2) 66)	Construction (C) Four years such
	Contributions							
	Net investment earnings, gains, and lo	sses						
	5., 5,						<u> </u>	
d	I Grants or scholarships							
е	Other expenditures for facilities and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the	-	end balan	ice (line 1g, c	olumn (a	i)) held as:		
а		c -						
b								
C								
2-	The percentages on lines 2a, 2b, and					d - d:	4 6 4	
3a	Are there endowment funds not in the organization by:	possession of th	ie organiz	Zation that ar	e neid an	u aumminst	ered for the	Yes No
	(i) Unrelated organizations							3a(i)
	(ii) Related organizations					•		3a(ii)
b	If "Yes" on 3a(ii), are the related orga	nizations listed	as requir	ed on Schedu	ıle R?			3b
4	Describe in Part XIII the intended use	s of the organiz	ation's er	ndowment fur	nds.			
Pa	art VI Land, Buildings, and Equ							
	Complete if the organizatio							
		or other basis vestment)	(b) Cost	or other basis (other) (c) Accumulate	ed depreciation	(d) Book value
1a	Land							
	Buildings	<u>, </u>						
	Leasehold improvements							
	I Equipment	<u>, </u>						
	Other							

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

XIII 🔽

	Investments - Other Securities.					Page 3
rait VII	Complete if the organization answered "Yes" on Form 9					
	(a) Description of security or category (including name of security)	(b) Bo valu			(c) Method of valuat or end-of-year mar	
	al derivatives					
(3)Other	-held equity interests					
(A)						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
	nn (b) must equal Form 990, Part X, col. (B) line 12.)	•				
Part VIII	Investments - Program Related. Complete if the organization answered 'Yes' on Form 9	990, Part	t IV,	line 11c. Se	e Form 990, Part	X, line 13.
	(a) Description of investment		(b)) Book value	(c) Method Cost or end-of-ye	
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Colum	nn (b) must equal Form 990, Part X, col.(B) line 13.)	•				
Part IX	Other Assets. Complete if the organization answered 'Yes' on Form 9	90 Part	ΙV	line 11d See	Form 990 Part X	line 15
	(a) Description	307 T GTC		110 110 500		(b) Book value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Colu	mn (b) must equal Form 990, Part X, col.(B) line 15.) Other Liabilities.				•	
T ure X	Complete if the organization answered 'Yes' on Form 9 See Form 990, Part X, line 25.	90, Part	IV, I	line 11e or 1	1f.	
1.	(a) Description of liab	ility				(b) Book value
(1) Federal	income taxes					
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	nn (b) must equal Form 990, Part X, col.(B) line 25.)				b	
2. Liability forganization	for uncertain tax positions. In Part XIII, provide the text of the bars is liability for uncertain tax positions under FIN 48 (ASC 740).	footnote t Check he	to the	organization' the text of the	s financial statemer e footnote has been	ts that reports the provided in Part

Page 4

Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements . 1

1 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:

Net unrealized gains (losses) on investments 2a Donated services and use of facilities . . .

2b 2c

Other (Describe in Part XIII.) Add lines 2a through 2d

Recoveries of prior year grants

Other (Describe in Part XIII.)

Total expenses and losses per audited financial statements

Donated services and use of facilities

Prior year adjustments

Add lines 2a through 2d

Subtract line 2e from line 1

Other losses

Other (Describe in Part XIII.)

Other (Describe in Part XIII.)

Add lines 4a and 4b

5

1

2

3

Part XII

2d

4a

4h

2a

2b

2c

2d

2e 3

925,000

Subtract line 2e from line 1 . . Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b .

925,000 1,143,755

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Amounts included on line 1 but not on Form 990, Part IX, line 25:

5 1

2e

3

4c

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b

2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

4a 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) . .

> THE COALITION FOLLOWS THE GUIDANCE FOR UNCERTAINTY IN INCOME TAXES. AS OF DECEMBER 31, 2022, THE COALITION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR THE INCOME TAX POSITIONS TAKEN AND TO BE TAKEN ON ITS RETURNS BASED ON AN ASSESSMENT OF MANY FACTORS, INCLUDING EXPERIENCE AND INTERPRETATIONS OF TAX LAWS APPLIED TO THE FACTS OF EACH MATTER. THE COALITION HAS CONCLUDED THAT THERE ARE NO SIGNIFICANT UNCERTAIN TAX POSITIONS REQUIRING DISCLOSURE, AND

THERE ARE NO MATERIAL AMOUNTS OF UNRECOGNIZED TAX BENEFITS.

1,143,755

4c 1,143,755

Schedule D (Form 990) 2021

Part XIII

PART X, LINE 2:

Add lines 4a and 4b .

Supplemental Information

Return Reference

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

SCHEDULE 0

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.

Open to Public

OMB No. 1545-0047

Inspection

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

THE BOARD OF DIRECTORS WILL ESTABLISH AN EXECUTIVE COMMITTEE OF THE BOARD COMPRISED OF AT LEAST THREE

DIRECTORS. DURING INTERVALS BETWEEN MEETINGS OF THE BOARD OF DIRECTORS. THE EXECUTIVE COMMITTEE WILL

REASONABLE JUDGEMENT OF ANY MEMBER OF THE EXECUTIVE COMMITTEE CANNOT WAIT UNTIL THE NEXT MEETING, EXCEPT FOR ANY AUTHORITY THE DELEGATION OF WHICH IS PROHIBITED BY SECTION 141(C)(2) OF THE DELAWARE GENERAL CORPORATION LAW. ANY ACTION TAKEN BY THE EXECUTIVE COMMITTEE WILL BE REPORTED TO THE BOARD OF DIRECTORS AT THE NEXT MEETING THEREOF. THE EXECUTIVE COMMITTEE WILL SELECT A CHAIRMAN OF THE EXECUTIVE COMMITTEE. THE EXECUTIVE COMMITTEE MAY FIX ITS OWN RULES OF PROCEDURE. BUT IN EVERY CASE THE PRESENCE OF A MAJORITY OF THE MEMBERS OF THE EXECUTIVE COMMITTEE WILL BE NECESSARY AND SUFFICIENT TO CONSTITUTE A QUORUM FOR THE TRANSACTION OF BUSINESS. AND THE VOTE OF THE MAJORITY OF THE MEMBERS OF THE EXECUTIVE COMMITTEE PRESENT AT ANY MEETING AT WHICH THERE IS A QUORUM WILL BE THE ACT OF THE EXECUTIVE COMMITTEE.

IN ACCORDANCE WITH ARTICLE III. SECTON 11 OF THE BY-LAWS. A CONFLICT OF INTEREST DISCLOSURE STATEMENT IS

THE ORGANIZATION'S GOVERNING DOCUMENTS. POLICIES. AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.

ADVISORY: PROGRAM SERVICE EXPENSES 285,000. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 0.

TOTAL EXPENSES 285.000. CONSULTING: PROGRAM SERVICE EXPENSES 77.179. MANAGEMENT AND GENERAL EXPENSES 0.

FUNDRAISING EXPENSES 0. TOTAL EXPENSES 77.179. PROFESSIONAL SERVICES: RESEARCH: PROGRAM SERVICE EXPENSES 130.600. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 130.600. PROFESSIONAL

SERVICES: MEDIA RELATIONS: PROGRAM SERVICE EXPENSES 100,382. MANAGEMENT AND GENERAL EXPENSES 0.

HAVE THE AUTHORITY OF THE BOARD OF DIRECTORS TO ACT WITH RESPECT TO ALL MATTERS WHICH IN THE

A COPY OF THE 990 IS PROVIDED TO ALL BOARD MEMBERS FOR THEIR REVIEW PRIOR TO FILING.

SENT TO EACH DIRECTOR OR OFFICER FOR THEIR SUBMISSION TO, AND REVIEW BY, THE BOARD.

Department of the Treasury Internal Revenue Service Name of the organization **Employer identification number** INVEST IN EDUCATION COALITION INC 45-4955967 **Explanation** Return Reference FORM 990. THE ORGANIZATION MODIFIED ITS BYLAWS IN JANUARY 2022 TO LIMIT AND CONTROL THE BOARD SELECTION AND PART VI. REMOVAL PROCESS. AND ALSO TO MODIFY THE PROCESS FOR HIRING AND FIRING OF A CEO AND DIRECT REPORTS OF THE

SECTION A. CFO

I INF 4

FORM 990.

PART VI.

THERE IS A POLICY THE ORGANIZATION HAS IN PLACE REGARDING THE ELECTION OF THE DIRECTORS BY MEMBERS.

SECTION A. LINF 7A

(Form 990)

FORM 990. PART VI. SECTION A.

LINE 7B

FORM 990. PART VI. SECTION B. LINF 11B

FORM 990. PART VI. SECTION B.

LINE 12C FORM 990. PART VI.

SECTION C. LINE 19 FORM 990.

PART IX. LINE 11G

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat. No. 51056K Schedule O (Form 990) 2021

FUNDRAISING EXPENSES 0. TOTAL EXPENSES 100.382.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
INVEST IN EDUCATION COALITION INC

Fattach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number

							4955967			
Part I Identification of Disregarded Entities. Comple		nswered "		Form 99		line				
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activi		ty Legal domicile (or foreign cour				(e) End-of-year assets	Direct control entity		
Part II Identification of Related Tax-Exempt Organiz or more related tax-exempt organizations during th	ations. Complete if the e tax year.	organizat	ion ansv	wered "Y	es" on For	m 99	0, Part IV, line	2 34 because it had	d one	
(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domic or foreign	cile (state	Exempt	(d) Code section	Pub (if s	(e) Dic charity status ection 501(c)(3))	(f) Direct controlling entity	Se 51 (con en	(g) ection 12(b) (13) atrolled
(1)INVEST IN EDUCATION FOUNDATION INC PO BOX 38222 ALBANY, NY 122038222	EDUCATING THE PUBLIC ON EDUCATION ISSUES	N'	NY 501(C		501(C)(3) LINE		7		Yes	No No
45-3027711										1
										_
For Paperwork Reduction Act Notice, see the Instructions for Form 990		Cat N	Vo. 5013	5Y				Schedule R (Form 9	90) 20	121

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34,	,
because it had one or more related organizations treated as a partnership during the tax year.	

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	Disprop alloca	h) ortionate otions?	(i) Code V-UBI amount in box 20 of Schedule K- 1 (Form 1065)	part	eral or naging tner?	(k) Percentage ownership
		<u> </u>	<u> </u>				Yes	No	<u> </u>	Yes	No	<u> </u>
Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.												

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile	(d) (e) Direct controlling entity (C corp, S		(f) Share of total income	(g) Share of end- of-year	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?		
		(state or foreign country)		corp, or trust)		assets		Yes	No	
						-	Schedule	R (Form 99	0) 2021	

Sche	edule R (Form 990) 2021		Pag	ge 3				
Pā	Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.							
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No				
1 [During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?							
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No				
b	Gift, grant, or capital contribution to related organization(s)	1b		No				
c	Gift, grant, or capital contribution from related organization(s)	1 c		No				
d Loans or loan guarantees to or for related organization(s)								
е	Loans or loan guarantees by related organization(s)	1e		No				
f	Dividends from related organization(s)	1f		No				
g	Sale of assets to related organization(s)	1 g		No				
h	Purchase of assets from related organization(s)	1h		No				
i	Exchange of assets with related organization(s) $\cdots \cdots	1i		No				
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		No				
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No				
-1	Performance of services or membership or fundraising solicitations for related organization(s)	11		No				
ń	Performance of services or membership or fundraising solicitations by related organization(s)	1m	Yes					
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes					
0	Sharing of paid employees with related organization(s)	10	Yes					
р	Reimbursement paid to related organization(s) for expenses	1p	Yes					
q	Reimbursement paid by related organization(s) for expenses	1q		No				
r	Other transfer of cash or property to related organization(s)	1r		No				
s	Other transfer of cash or property from related organization(s)	1s		No				
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.							
	(a) (b) (c) (d) Name of related organization Transaction Amount involved type (a-s)	ount i	nvolved	I				
1) II	NVEST IN EDUCATION FOUNDATION 0 46,200 CASH							

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.																	
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from	(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		Share of total income (g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1	(j) General or managing partner?		(k) Percentage ownership	
			tax under sections 512- 514)	Yes	No			Yes	No	(Form 1065)	Yes	No					
	l	<u> </u>									chedule P	(Form 9	990) 2021				

Schedule R (Form 990) 2021	Page 5	
Part VII Supplemental In		
Provide additional inf	ormation for responses to questions on Schedule R. See instructions.	
Return Reference	Explanation	
		Schedule R (Form 990) 2021
Additional Data		Return to Form
	Software ID:	
	Software Version:	