

For calendar year 2020, or tax year beginning 07-01-2020, and ending 06-30-2021

Name of foundation: THE ACHIEVEMENT NETWORK LTD. A Employer identification number: 20-3289870. B Telephone number: (617) 725-0000. C If exemption application is pending, check here. D 1. Foreign organizations, check here. D 2. Foreign organizations meeting the 85% test, check here and attach computation. E If private foundation status was terminated under section 507(b)(1)(A), check here. F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here. H Check type of organization: Section 501(c)(3) exempt private foundation. I Fair market value of all assets at end of year: \$22,728,084. J Accounting method: Accrual.

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)

Table with 5 columns: (a) Revenue and expenses per books, (b) Net investment income, (c) Adjusted net income, (d) Disbursements for charitable purposes. Rows include Revenue (1-12) and Operating and Administrative Expenses (13-26), with a final section for Excess of revenue over expenses and disbursements (27-29).

**Part II Balance Sheets** Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	14,875,534	17,017,827	17,017,827
	<b>2</b> Savings and temporary cash investments . . . . .	266,564	523,963	523,963
	<b>3</b> Accounts receivable ▶ <u>4,509,876</u>			
	Less: allowance for doubtful accounts ▶ _____	3,094,362	4,509,876	4,509,876
	<b>4</b> Pledges receivable ▶ _____			
	Less: allowance for doubtful accounts ▶ _____			
	<b>5</b> Grants receivable . . . . .		156,792	156,792
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____			
	Less: allowance for doubtful accounts ▶ _____			
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .	233,250	519,626	519,626
	<b>10a</b> Investments—U.S. and state government obligations (attach schedule)			
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .			
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .			
	<b>11</b> Investments—land, buildings, and equipment: basis ▶ _____			
Less: accumulated depreciation (attach schedule) ▶ _____				
<b>12</b> Investments—mortgage loans . . . . .				
<b>13</b> Investments—other (attach schedule) . . . . .				
<b>14</b> Land, buildings, and equipment: basis ▶ _____				
Less: accumulated depreciation (attach schedule) ▶ _____	31,779	0	0	
<b>15</b> Other assets (describe ▶ _____)	168,603	0	0	
<b>16 Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I)	18,670,092	22,728,084	22,728,084	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	2,008,117	1,647,387	
	<b>18</b> Grants payable . . . . .			
	<b>19</b> Deferred revenue. . . . .	140,043	417,127	
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons . . . . .			
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .			
	<b>22</b> Other liabilities (describe ▶ _____)	4,500,000	0	
	<b>23 Total liabilities</b> (add lines 17 through 22) . . . . .	6,648,160	2,064,514	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 24, 25, 29 and 30.</b>			
	<b>24</b> Net assets without donor restrictions . . . . .	10,952,459	18,827,429	
	<b>25</b> Net assets with donor restrictions . . . . .	1,069,473	1,836,141	
	<b>Foundations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 26 through 30.</b>			
	<b>26</b> Capital stock, trust principal, or current funds . . . . .			
	<b>27</b> Paid-in or capital surplus, or land, bldg., and equipment fund . . . . .			
	<b>28</b> Retained earnings, accumulated income, endowment, or other funds . . . . .			
<b>29 Total net assets or fund balances</b> (see instructions) . . . . .	12,021,932	20,663,570		
<b>30 Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	18,670,092	22,728,084		

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	12,021,932
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	8,641,638
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	0
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	20,663,570
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	0
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29.	<b>6</b>	20,663,570



Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here [ ] and enter "N/A" on line 1.
Date of ruling or determination letter: \_\_\_\_\_ (attach copy of letter if necessary—see instructions)
b Reserved
c All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)
3 Add lines 1 and 2.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-.
6 Credits/Payments:
a 2020 estimated tax payments and 2019 overpayment credited to 2020
b Exempt foreign organizations—tax withheld at source
c Tax paid with application for extension of time to file (Form 8868)
d Backup withholding erroneously withheld
7 Total credits and payments. Add lines 6a through 6d
8 Enter any penalty for underpayment of estimated tax. Check here [ ] if Form 2220 is attached.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.
11 Enter the amount of line 10 to be: Credited to 2021 estimated tax Refunded

Part VII-A Statements Regarding Activities

1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition).
c Did the foundation file Form 1120-POL for this year?
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:
(1) On the foundation. (2) On foundation managers.
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers.
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments?
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?
b If "Yes," has it filed a tax return on Form 990-T for this year?
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:
• By language in the governing instrument, or
• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?
7 Did the foundation have at least \$5,000 in assets at any time during the year?
8a Enter the states to which the foundation reports or with which it is registered (see instructions)
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G?
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2020 or the taxable year beginning in 2020?
10 Did any persons become substantial contributors during the tax year?

**Part VII-A Statements Regarding Activities (continued)**

<b>11</b>	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions. . . . .				<b>No</b>
<b>12</b>	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions . . . . .				<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>ACHIEVEMENTNETWORK.ORG</u>	<b>Yes</b>			
<b>14</b>	The books are in care of ► <u>NATASHA WILLIAMS</u> Telephone no. ► <u>(617) 725-0000</u> Located at ► <u>177 HUNTINGTON AVE STE 1703 PMB 74520 BOSTON MA 02115</u> ZIP+4 ► _____				
<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here . . . . . <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . <b>15</b> _____				
<b>16</b>	At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . .		<b>Yes</b>	<b>No</b>	
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign _____	<b>16</b>			<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

<b>1a</b>	During the year did the foundation (either directly or indirectly):				
	<b>(1)</b> Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
	<b>(2)</b> Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
	<b>(3)</b> Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
	<b>(4)</b> Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
	<b>(5)</b> Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
	<b>(6)</b> Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions . . . . . <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. . . . . <input type="checkbox"/>	<b>1b</b>			<b>No</b>
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2020? . . . . . <input type="checkbox"/>	<b>1c</b>			<b>No</b>
<b>2</b>	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):				
<b>a</b>	At the end of tax year 2020, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2020? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20____, 20____, 20____, 20____				
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions.) . . . . . <input type="checkbox"/>	<b>2b</b>			
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. ► 20____, 20____, 20____, 20____				
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>b</b>	If "Yes," did it have excess business holdings in 2020 as a result of <b>(1)</b> any purchase by the foundation or disqualified persons after May 26, 1969; <b>(2)</b> the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or <b>(3)</b> the lapse of the 10-, 15-, or 20-year first phase holding period?(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2020.) . . . . . <input type="checkbox"/>	<b>3b</b>			
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>			<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2020?	<b>4b</b>			<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (continued)

**5a** During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes  No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?  Yes  No

(3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.  Yes  No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  Yes  No

**b** If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions **5b**

Organizations relying on a current notice regarding disaster assistance check here.

**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  Yes  No

If "Yes," attach the statement required by Regulations section 53.4945–5(d).

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

If "Yes" to 6b, file Form 8870. **6b**

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes  No

**b** If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?  Yes  No **7b**

**8** Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?  Yes  No

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

**1 List all officers, directors, trustees, foundation managers and their compensation. See instructions**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
MORA SEGAL 177 HUNTINGTON AVENUE SUITE 1703 PMB 74520 BOSTON, MA 02115	CEO & PRESIDENT 40.00	282,744	24,860	0
NATASHA WILLIAMS 177 HUNTINGTON AVENUE SUITE 1703 PMB 74520 BOSTON, MA 02115	COO 40.00	210,299	27,522	0
CARTER ROMANSKY 177 HUNTINGTON AVENUE SUITE 1703 PMB 74520 BOSTON, MA 02115	CSO, ASSISTANT SECRETARY 40.00	183,150	24,370	0
DEBORAH GRAY 177 HUNTINGTON AVENUE SUITE 1703 PMB 74520 BOSTON, MA 02115	GENERAL COUNSEL, ASSISTANT SECRETARY 20.00	85,000	2,833	0
KIMBERLY COCKRELL 177 HUNTINGTON AVENUE SUITE 1703 PMB 74520 BOSTON, MA 02115	CPO, ASSISTANT SECRETARY 40.00	209,880	7,002	0
SCOTT WELLS 177 HUNTINGTON AVENUE SUITE 1703 PMB 74520 BOSTON, MA 02115	CHAIR 1.00	0	0	0
ROBERTO RODRIGUEZ 177 HUNTINGTON AVENUE SUITE 1703 PMB 74520 BOSTON, MA 02115	TREASURER 1.00	0	0	0
JOHN FARWELL MAYCOCK 177 HUNTINGTON AVENUE SUITE 1703 PMB 74520 BOSTON, MA 02115	SECRETARY 1.00	0	0	0
MARK ATKINSON 177 HUNTINGTON AVENUE SUITE 1703 PMB 74520 BOSTON, MA 02115	DIRECTOR 1.00	0	0	0
JUDY ELLIOTT 177 HUNTINGTON AVENUE SUITE 1703 PMB 74520 BOSTON, MA 02115	DIRECTOR 1.00	0	0	0
BHARAT ANAND 177 HUNTINGTON AVENUE SUITE 1703 PMB 74520 BOSTON, MA 02115	DIRECTOR 1.00	0	0	0
REBECCA KOCKLER 177 HUNTINGTON AVENUE SUITE 1703 PMB 74520 BOSTON, MA 02115	DIRECTOR 1.00	0	0	0
BRIAN PICK 177 HUNTINGTON AVENUE SUITE 1703 PMB 74520 BOSTON, MA 02115	DIRECTOR 1.00	0	0	0
STEPHANIE WU 177 HUNTINGTON AVENUE SUITE 1703 PMB 74520 BOSTON, MA 02115	DIRECTOR 1.00	0	0	0

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
177 HUNTINGTON AVENUE SUITE 1703 PMB 74520 BOSTON, MA 02115	1.00			
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
EMMA DOGGETT 177 HUNTINGTON AVENUE SUITE 1703 PMB 74520 BOSTON, MA 02115	CHIEF PROGRAM OFFICE 40.00	201,460	10,163	0
ALYSE PECORARO 177 HUNTINGTON AVENUE SUITE 1703 PMB 74520 BOSTON, MA 02115	INTERIM ED, PARTNERS 40.00	179,054	24,947	0
ANA LUISA VARGAS 177 HUNTINGTON AVENUE SUITE 1703 PMB 74520 BOSTON, MA 02115	VICE PRESIDENT, EXTE 40.00	174,716	12,218	0
MARK BLACKMAN 177 HUNTINGTON AVENUE SUITE 1703 PMB 74520 BOSTON, MA 02115	VICE PRESIDENT, PROD 40.00	175,100	7,893	0
<b>Total number of other employees paid over \$50,000.</b>				171

**Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

**Part VIII**

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
LEARNOSITY LIMITED 6 COKE LN SMITHFIELD, DUBLIN D07 T0FA EI	WEB SERVICES	210,360
TRANSFORMING EDUCATION INC 6 LIBERTY SQUARE PMB 397 BOSTON, MA 02109	CONSULTING	177,500
CLEVER 75 REMITTANCE DRIVE DEPT 6598 CHICAGO, IL 60675	CONSULTING	94,080
AVENIROS LLC 12 GILL STREET SUITE 1600 WOBURN, MA 01801	TECH CONSULTING	83,658

**Total** number of others receiving over \$50,000 for professional services. . . . . **4** ▶

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
<p><b>1</b> THE ACHIEVEMENT NETWORK, LTD. (ANET) IS A NONPROFIT CORPORATION WHICH WAS INCORPORATED IN MASSACHUSETTS ON JUNE 15, 2005. ANET'S PURPOSE IS TO WORK WITH LOW-INCOME PUBLIC SCHOOLS TO CLOSE THE ACHIEVEMENT GAP. ANET PROVIDES EFFECTIVE DATA DRIVEN STRATEGIES TO IDENTIFY AND CLOSE GAPS IN STUDENT LEARNING THROUGH INTERIM ASSESSMENTS, REAL TIME AND BEST PRACTICE COACHING. ANET WORKS WITH SCHOOLS IN MASSACHUSETTS AND ACROSS THE UNITED STATES. IN 2020-2021, ANET SERVED 154 SCHOOL DISTRICTS AND OVER 280,000 STUDENTS.</p>	25,327,630
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions. <b>3</b>	

**Total.** Add lines 1 through 3 . . . . . **0** ▶

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	0
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	16,341,944
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	5,186,294
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	21,528,238
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	21,528,238
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	322,924
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	21,205,314
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	1,060,266

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	
<b>2a</b>	Tax on investment income for 2020 from Part VI, line 5. . . . .	<b>2a</b>	
<b>b</b>	Income tax for 2020. (This does not include the tax from Part VI.)	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1. . . . .	<b>3</b>	
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . . . .	<b>7</b>	

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . .	<b>1a</b>	10,848,452
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes. . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	10,848,452
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions. . . . .	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	10,848,452

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
<b>1</b> Distributable amount for 2020 from Part XI, line 7				
<b>2</b> Undistributed income, if any, as of the end of 2020:				
<b>a</b> Enter amount for 2019 only. . . . .				
<b>b</b> Total for prior years: 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2020:				
<b>a</b> From 2015. . . . .				
<b>b</b> From 2016. . . . .				
<b>c</b> From 2017. . . . .				
<b>d</b> From 2018. . . . .				
<b>e</b> From 2019. . . . .				
<b>f</b> Total of lines 3a through e. . . . .				
<b>4</b> Qualifying distributions for 2020 from Part XII, line 4: ▶ \$ _____				
<b>a</b> Applied to 2019, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .				
<b>d</b> Applied to 2020 distributable amount				
<b>e</b> Remaining amount distributed out of corpus				
<b>5</b> Excess distributions carryover applied to 2020. (If an amount appears in column (d), the same amount must be shown in column (a).)				
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b. . . . .				
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
<b>d</b> Subtract line 6c from line 6b. Taxable amount—see instructions. . . . .				
<b>e</b> Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions. . . . .				
<b>f</b> Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .				
<b>8</b> Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions)				
<b>9</b> Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a				
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2016				
<b>b</b> Excess from 2017				
<b>c</b> Excess from 2018. . . . .				
<b>d</b> Excess from 2019				
<b>e</b> Excess from 2020				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2020, enter the date of the ruling 2006-06-20

b. Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed
b 85% of line 2a
c Qualifying distributions from Part XII, line 4 for each year listed
d Amounts included in line 2c not used directly for active conduct of exempt activities
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c

Table with 6 columns: Tax year, (a) 2020, (b) 2019, (c) 2018, (d) 2017, (e) Total. Rows include 2a-e and 3a-d.

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:
a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:
Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

**Part XV** Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
<b>Total . . . . .</b> ▶ <b>3a</b>				<b>0</b>
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b> ▶ <b>3b</b>				<b>0</b>





## **Additional Data**

[Return to Form](#)

**Software ID:**

**Software Version:**

**Form 990PF - Special Condition Description:**

**Special Condition Description**

**Schedule B**

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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, 990-EZ, or 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

Name of the organization THE ACHIEVEMENT NETWORK LTD	<b>Employer identification number</b> 20-3289870
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**Organization type** (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

- 501(c)( ) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

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

**General Rule**

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

**Special Rules**

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year . . . . . ▶ \$ \_\_\_\_\_

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

Name of organization  
THE ACHIEVEMENT NETWORK LTD

Employer identification number  
20-3289870

<b>Part I</b>			
<b>Contributors</b> (see instructions). Use duplicate copies of Part I if additional space is needed.			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BILL AND MELINDA GATES FOUNDATION PO BOX 23350 SEATTLE, WA 98102	\$ 1,866,800	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions.)</small>
2	CHARLES AND LYNN SCHUSTERMAN FAMILY FOUNDATION 1250 EYE STREET 700 WASHINGTON, DC 20005	\$ 3,000,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions.)</small>
3	CARNEGIE CORPORATION OF NEW YORK 437 MADISON AVENUE NEW YORK, NY 10022	\$ 783,333	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions.)</small>
4	BALLMER GROUP 777 108TH AVE NE SUITE 2020 BELLEVUE, WA 98004	\$ 1,800,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions.)</small>
5	MICHAEL AND SUSAN DELL FOUNDATION 4417 WESTLAKE DR AUSTIN, TX 78746	\$ 500,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions.)</small>
6	LLOYD A FRY FOUNDATION 120 S LASALLE ST SUITE 1950 CHICAGO, IL 60603	\$ 150,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions.)</small>

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

Name of organization  
THE ACHIEVEMENT NETWORK LTD

Employer identification number  
20-3289870

<b>Part I</b>			
<b>Contributors</b> (see instructions). Use duplicate copies of Part I if additional space is needed.			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	GHR FOUNDATION 560 SOUTH 6TH STREET SUITE 2950 MINNEAPOLIS, MN 55402	\$ 210,441	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions.)</small>
8	GREAT MN SCHOOLS 1300 LAGOON 4TH FLOOR MINNEAPOLIS, MN 55408	\$ 330,560	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions.)</small>
9	ROBIN HOOD FOUNDATION 826 BROADWAY FL 9 NEW YORK, NY 10003	\$ 75,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions.)</small>
10	NEVADA DEPARTMENT OF EDUCATION 2080 E FLAMINGO RD 210 LAS VEGAS, NV 89119	\$ 79,984	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions.)</small>
11	LYNCH FAMILY FOUNDATION 331 3RD ST NW WAUCOMA, IA 52171	\$ 39,999	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions.)</small>
12	CENTERBRIDGE FOUNDATION 375 PARK AVE 12C NEW YORK, NY 10152	\$ 20,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions.)</small>

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

Name of organization  
THE ACHIEVEMENT NETWORK LTD

Employer identification number  
20-3289870

<b>Part I</b>			
<b>Contributors</b> (see instructions). Use duplicate copies of Part I if additional space is needed.			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	SCOTT WELLS 37 ROYALSTON RD WELLESLEY, MA 02481	\$ 5,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions.)</small>
14	US SMALL BUSINESS ADMINISTRATION 409 3RD ST SW WASHINGTON, DC 20416	\$ 4,500,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions.)</small>
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions.)</small>
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions.)</small>
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions.)</small>
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions.)</small>

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

Name of organization  
 THE ACHIEVEMENT NETWORK LTD

**Employer identification number**  
 20-3289870

**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____

Name of organization THE ACHIEVEMENT NETWORK LTD	Employer identification number 20-3289870
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	
	_____	_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	
	_____	_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	
	_____	_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	
	_____	_____	

# **Additional Data**

**Return to Form**

**Software ID:**

**Software Version:**

# TY 2020 IRS 990 e-File Render

**Name:** THE ACHIEVEMENT NETWORK LTD

**EIN:** 20-3289870

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	24,000	0	13,707	10,293

# TY 2020 IRS 990 e-File Render

**Name:** THE ACHIEVEMENT NETWORK LTD

**EIN:** 20-3289870

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL	7,823	0	4,468	3,355

# TY 2020 IRS 990 e-File Render

**Name:** THE ACHIEVEMENT NETWORK LTD

**EIN:** 20-3289870

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
DEPOSIT	168,603		

# TY 2020 IRS 990 e-File Render

**Name:** THE ACHIEVEMENT NETWORK LTD

**EIN:** 20-3289870

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LICENSE FEE	38,000	0	21,703	16,297
TELEPHONE AND COMMUNICATIONS	290,988	0	166,194	124,794
POSTAGE	838	0	479	359
MISCELLANEOUS	20,368	0	11,633	8,735
ADVERTISING	66,489	0	37,974	28,515
INSURANCE	68,525	0	39,137	29,388
STAFF DEVELOPMENT	76,684	0	43,797	32,887
OFFICE EXPENSE	484,466	0	276,697	207,769
RECRUITING	212,594	0	121,420	91,174

# TY 2020 IRS 990 e-File Render

**Name:** THE ACHIEVEMENT NETWORK LTD

**EIN:** 20-3289870

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
PROGRAM SERVICES	19,824,650		19,824,650

# TY 2020 IRS 990 e-File Render

**Name:** THE ACHIEVEMENT NETWORK LTD

**EIN:** 20-3289870

Description	Beginning of Year - Book Value	End of Year - Book Value
CONDITIONAL ADVANCE	4,500,000	0

# TY 2020 IRS 990 e-File Render

**Name:** THE ACHIEVEMENT NETWORK LTD

**EIN:** 20-3289870

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL SERVICE	278,411	0	159,011	119,400
TECHNICAL ASSISTANCE	67,178	0	38,368	28,810
ASSESSMENT DEVELOPMENT	346,974	0	198,170	148,804
OTHER	555,065	0	317,018	238,047

**Name:** THE ACHIEVEMENT NETWORK LTD

**EIN:** 20-3289870

**Explanation:** THE TAXPAYER IS IN RECEIPT OF LETTER NUMBER 2697C IN REGARDS TO THE TAX PERIOD ENDED JUNE 30, 2021, IN WHICH THEIR IRS FORM 990PF WAS NOT ACCEPTED BY THE INTERNAL REVENUE SERVICE, AS IT WAS NOT ELECTRONICALLY FILED. IN THE FOLLOWING PARAGRAPH THE TAXPAYER WILL DEMONSTRATE ITS' CASE FOR AN ABATEMENT OF THE PENALTIES, SHOULD THEY BE ISSUED IN THE FUTURE. STATEMENTS OF FACTS AND CIRCUMSTANCES LEADING TO NONCOMPLIANCE THE TAXPAYER HAD PREVIOUSLY BEEN REQUIRED TO FILE THEIR FORM 990 BY PAPER AS THEY WERE IN THE FIRST 5 YEARS OF THEIR PUBLIC SUPPORT TEST. IN YEAR 6, WHEN THEY BECAME A PRIVATE FOUNDATION, DUE TO PRIOR PAPER FILINGS, THEY CONTINUED TO PAPER FILE THEIR FORM 990. THE TAXPAYER TIMELY PAID THEIR TAX DUE ELECTRONICALLY THROUGH EFTPS. ONCE THE TAXPAYER BECAME AWARE OF THE ISSUE IN THE ABOVE NOTICE, DATED JULY 29, 2022, THEY PROMPTLY ELECTRONICALLY FILED THEIR IRS FORM 990PF. DEMONSTRATING REASONABLE CAUSE THE TAXPAYER TAKES ITS' FILING OBLIGATIONS SERIOUSLY AND HAS ALWAYS FILED ALL TAX FILINGS ON TIME, INCLUDING THE RETURN ENDING JUNE 30, 2021. IRS REGULATION 301.6724-1(A) STATES THAT THE PENALTY FOR A FAILURE RELATING TO A REPORTING REQUIREMENT IS WAIVED IF THE FAILURE IS DUE TO REASONABLE CAUSE. REASONABLE CAUSE MAY BE DEMONSTRATED IF THE FILER ESTABLISHES THAT THERE ARE SIGNIFICANT MITIGATING FACTORS WITH RESPECT TO THE FAILURE AND THAT THE FILER ACTED IN A RESPONSIBLE MANNER BY EXERCISING REASONABLE CARE, WHICH IS THAT STANDARD OF CARE THAT A REASONABLY PRUDENT PERSON WOULD USE, AND THAT THE FILER UNDERTOOK SIGNIFICANT STEPS TO AVOID OR MITIGATE THE FAILURE. AS PROVIDED UNDER TREASURY REGULATION SECTION 301.6724-1(A), SIGNIFICANT MITIGATING FACTORS INCLUDE ALL PRIOR FILINGS BEING FILED TIMELY AND NO PREVIOUSLY ASSESSED PENALTIES AGAINST THE TAXPAYER FOR NON-COMPLIANCE ISSUES RELATED TO REQUIRED INFORMATIONAL FORM 990 FILING REQUIREMENTS. REQUEST FOR ABATEMENT NO PENALTY HAS BEEN ASSESSED IN THE ABOVE NOTICE. ADDITIONALLY THE TAXPAYER, HAVING FILED THEIR FORM 990PF TIMELY, DID NOT REALIZE THAT THERE WAS AN ISSUE UNTIL AFTER THE FILING DEADLINE. THE ABSENCE OF "WILLFUL NEGLIGENCE" HAS BEEN DEEMED BY THE IRS TO BE ONE FACTOR THAT MAY INDICATE THE EXISTENCE OF REASONABLE CAUSE. THE TAXPAYER HAS NOT SHOWN WILLFUL NEGLIGENCE WITH RESPECT TO ITS FILING OBLIGATIONS AND BELIEVES THEY HAVE DEMONSTRATED THIS WITH THE STATEMENTS AND EVIDENCE IN THIS REQUEST. THE TAXPAYER BELIEVES THAT IT FALLS WITHIN THE REASONABLE CAUSE ABATEMENT PROVISIONS OF THE CODE BY HAVING ESTABLISHED SIGNIFICANT MITIGATING FACTORS WITH RESPECT TO THE FAILURE, AND BY ESTABLISHING THAT THEY ACTED RESPONSIBLY TO CORRECT THE FAILURE, ONCE DISCOVERED. THE TAXPAYER HAS ALWAYS HAD EVERY INTENTION OF BEING IN COMPLIANCE WITH ALL OF ITS FILING REQUIREMENTS. THE TAXPAYER RESPECTFULLY REQUESTS THAT SHOULD THE IRS ISSUE PENALTIES IN THE FUTURE THAT THEY ABATE ALL PENALTIES ASSESSED FOR THE LATE FILING OF FORM 990PF FOR THE YEAR ENDED JUNE 30, 2021 AND APPRECIATES YOUR CONSIDERATIONS OF OUR REQUEST. UNDER PENALTIES OF PERJURY, THE TAXPAYER HEREBY DECLARES THAT THE STATEMENTS CONTAINED HEREIN, TO THE BEST OF OUR KNOWLEDGE AND BELIEF, ARE TRUE, CORRECT, AND COMPLETE.

# TY 2020 IRS 990 e-File Render

**Name:** THE ACHIEVEMENT NETWORK LTD

**EIN:** 20-3289870

Name	Address
BALLMER GROUP	777 108TH AVE NE SUITE 2020 BELLEVUE,WA 98004
BILL AND MELINDA GATES FOUNDATION	PO BOX 23350 SEATTLE,WA 98102
CARNEGIE CORPORATION	437 MADISON AVENUE NEW YORK,NY 10022
STRATEGIC GRANT PARTNERS	240 NEWBURY STREET 2ND FLOOR BOSTON,MA 02116
THE MICHAEL AND SUSAN DELL FOUNDATI	PO BOX 163867 AUSTIN,TX 78716
US DEPARTMENT OF EDUCATION	400 MARYLAND AVENUE SW WASHINGTON,DC 20202
CHARLES AND LYNN SCHUSTERMAN FAMILY	1250 EYE STREET 700 WASHINGTON,DC 20005
THE SKILLMAN FOUNDATION	100 TALON CENTER DRIVE SUITE 100 DETROIT,MI 48207