# NEIGHBORHOOD DEVELOPMENT FUND Not-for-Profit Transmittal and Approval Form

Applicant/Program: Educational Justice Activists Applicant Requested Amount: \$17.300.00 Appropriation Request Amount: \$5,005.00
Executive Summary of Request
Funding is requested to help with the cost assciated with program expenses and testing materials for the Educational Justice Activists Tourting program.
Is this program/project a fundraiser?
Is this program/project a fundraiser?  Is this applicant a faith based organization?  Does this application include funding for sub-grantee(s)?  Yes  No  Yes  No
I have reviewed the attached Neighborhood Development Fund Application and have found it complete and within Metro Council guidelines and request approval of funding in the following amount(s). I have read the organization's statement of public purpose to be furthered by the funds requested and I agree that the public purpose is legitimate. I have also completed the disclosure section below, if required.
7 District # Primary Sponsor Signature \$5,005 Amount Date
Primary Sponsor Disclosure List below any personal or business relationship you, your family or your legislative assistant have with this organization, its volunteers, its employees or members of its board of directors.  N/A
Approved by:
Appropriations Committee Chairman Date Final Appropriations Amount:

Applicant/Program:		
Additional Disclos	ure and Signatures	
Additional Council Office Disclosure List below any personal or business relationship you, y organization, its volunteers, its employees or members	your family or your legislat	ive assistant have with this
Council Member Signature and Amount		
District 1	Φ.	
District 2		_
District 3	\$	· -
District 4	\$	-
District 5	<u> </u>	
District 6	\$	
District 7 Primary Sonsor	\$	
District 8	\$	
District 9	\$	
District 10		
District 11		
District 12		
District 13		
District 14		
District 15	\$\$	

Applicant/Program:					
Additional Disclosure and Signatures					
Additional Council Office Disclosu List below any personal or business relatorganization, its volunteers, its employed	tionship you, your family or your legisla	tive assistant have with this			
District 16	\$	-			
District 17	\$	-			
District 18	\$	-			
District 19	\$	_			
District 20	\$				
District 21	\$				
District 22	\$				
District 23	\$				
District 24	\$				
District 25	\$				
District 26	\$				

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**NEIGHBORHOOD DEVELOPMENT FUND APPLICATION** Legal Name of Applicant Organization Educational Justice Program Name and Request Amount Educational Justice Activists \$17,300.00 Yes/No/NA Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding? Yes▼ Is the funding proposed by Council Member(s) less than or equal to the request amount? Is the proposed public purpose of the program viable and well-documented? Yes▼ Will all of the funding go to programs specific to Louisville/Jefferson County? Yes▼ Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet? Yes▼ Has prior Metro Funds committed/granted been disclosed? Yes▼ Is the application properly signed and dated by authorized signatory? Yes▼ Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included? Yes▼ If Metro funding is for a separate taxing district is the funding appropriated for a program outside the N/A legal responsibility of that taxing district? Is the entity in good standing with: ▶ Kentucky Secretary of State? ▶ Louisville Metro Revenue Commission? Yes√ ▶ Louisville Metro Government? ▶ Internal Revenue Service? ▶ Louisville Metro Human Relations Commission? Is the current Fiscal Year Budget included? Yes▼ Is the entity's board member list (with term length/term limits) included? Yes▼ Is recommended funding less than 33% of total agency operating budget? Yes▼ Does the application budget reflect only the revenue and expenses of the project/program? Yes▼ Is the cost estimate(s) from proposed vendor (if request is for capital expense) included? Yes▼ Is the most recent annual audit (if required by organization) included? N/A Is a copy of Signed Lease (if rent costs are requested) included? N/A Is the Supplemental Questionnaire for churches/religious organizations (if requesting organization is N/A faith-based) included? Are the Articles of Incorporation of the Agency included? Yes▼ Is the IRS Form W-9 included? Yes▼ Is the IRS Form 990 included? Yes▼ Are the evaluation forms (if program participants are given evaluation forms) included? N/A 🔻 Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if N/A required to do so)? Has the Agency agreed to participate in the BBB Charity review program? If so, has the applicant N/A met the BBB Charity Review Standards?

Prepared by:

SECTION 1 – APPLICANT INFORMATION				
Legal Name of Applicant Organization: Educational Justice, Inc.				
(as listed on: <a href="http://www.sos.ky.gov/business/records">http://www.sos.ky.gov/business/records</a>				
Main Office Street &			t Rd., Ste. 200	
Website: Education	alJustice.	org		
Applicant Contact:	Katheri	ine Six	Title:	Program Administration Coor.
Phone:	502-70	9-8719	Email:	katherine@educationaljustice.org
Financial Contact:	Same a	as Applicant Contact	Title:	
Phone:	-		Email:	
Organization's Repre	sentative v	who attended NDF Train	ing: Not yet attended	training.
GEO	RAPHICA	L AREA(S) WHERE PROG	RAM ACTIVITIES ARE (	WILL BE) PROVIDED
Program Facility Loca	tion(s):	Louisville, KY (Louisv	ille Free Public Librar	ies + EJ Headquarters)
Council District(s):		Available to all district	s Zip Code(s):	Available to students in all zip codes
		ON 2 – PROGRAM REQU		RMATION
	NAME: Ed	lucational Justice Activ	ists	
Total Request: (\$)	17,300		ward (this program) in	previous year: (\$) 7,500
Purpose of Request (	check all ti	hat apply):		
		erally cannot exceed 33%		0 0 .
		s/events for direct benef		
✓ Capital Proj	ect of the	organization (equipment	, furnishing, building, e	tc)
The Following are Rec	quired Att	achments:		
✓ IRS Exempt Status De	terminatior	n Letter	Signed lease if rent	costs are being requested
✓ Current year projecte	d budget		✓ IRS Form W9	
✓ Current financial stat	ement		Evaluation forms if ι	sed in the proposed program
✓ Most recent IRS Form			Annual audit (if requ	ired by organization)
✓ Articles of Incorporat	ion (curren	nt & signed)	Faith Based Organiza	ation Certification Form, if applicable
Cost estimates from proposed vendor if request is for capital expense				
For the current fiscal year ending June 30, list all funds appropriated and/or received from Louisville Metro Government for this or any other program or expense, including funds received through Metro Federal Grants, from any department or Metro Council Appropriation (Neighborhood Development Funds). Attach additional sheet if necessary.				
Source:	External /	Agency Funds	Amount: (\$) 7,	500
Source:			Amount: (\$)	
Source:			Amount: (\$)	
Has the applicant contacted the BBB Charity Review for participation? ■ Yes  No				
Has the applicant met	Has the applicant met the BBB Charity Review Standards?  Yes No In process			rocess

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#### **SECTION 3 - AGENCY DETAILS**

#### Describe Agency's Vision, Mission and Services:

Recognizing that substantially fewer educational opportunities are available to students of low socioeconomic status than to their more privileged peers, Educational Justice endeavors to innovate and implement practical solutions aimed at closing the opportunity gap in education. Using these solutions, Educational Justice strives not only to expand the equalizing power of education to underserved students and their families, but also to end educational inequity by creating and inspiring a new generation of zealous advocates for social justice.

Every year, thousands of exceptional high school students engage in community service. But at a time when a crisis is raging in American education, far too few of these bright students - those who have developed a proven expertise in academics - direct their community service efforts to passing their knowledge and skills on to their disadvantaged peers. Educational Justice, an award-winning nonprofit organization, is tackling the educational inequity ravaging our communities by inviting our brightest high school students to apply to a new kind of honor society, in which applicants are selected based on academic credentials and, if accepted, become activists for equality in education. Selected students, called "EJ Activists," are provided access to a proprietary web application, where they create an online profile. At the same time, low-income students in grades 5-8 are granted full tutoring scholarships and are enrolled in the program as "EJ Achievers." Each EJ Achiever is able to browse through the secure database of Activist profiles to select a single exceptional high school student to be his/her dedicated tutor for one hour-long sessions every week for up to four years.

## SECTION 4 - BOARD OF DIRECTORS AND PAID STAFF

Board Member	Term End Date	
Kara Damon	06/30/2018	
Mike Mays	06/30/2018	
Sam Corbett	06/30/2018	
Sharon Goodman	06/30/2018	
Dr. Lora Haynes	12/31/2017	
Michelle Burgan	12/31/2017	
Donna Tatum-Johns	12/31/2017	
Joan Byer	12/31/2017	
Robert Blair	12/31/2017	

#### Describe the Board term limit policy:

The term of office for a Director shall be one (1) year from the meeting in which the Director was appointed. There are no term limits and, therefore, Directors may serve any number of consecutive terms.

Three Highest Paid Staff Names	Annual Salary
All staff are currently paid through AmeriCorps VISTA.	
	1

#### SECTION 5 - PROGRAM/PROJECT NARRATIVE

A: Describe the program/project start and end dates, a description of the program/project and applicable data with regards to specific client population the program will address (attach related flyers, planning minutes, designs, event permits, proposals for services/goods, etc.):

The EJ Activists program timeline will run according to the 2017-2018 school calendar. Previously enrolled Achievers and Activists will begin tutoring early in the school year. New Achievers will be continually recruited throughout the school year, and new Activists will be recruited in three different rounds.

Previously enrolled Achievers and Activists begin tutoring in Aug 2017

Cohort A: Recruiting, Mar/Apr 2017

Activist Training & Achiever Registration Sessions (+ Pre-Test), Early Aug 2017

Tutoring Sessions, Mid-Late Aug 2017

Cohort B: Recruiting, Aug/Sept 2017

Activist Training, Oct 2017

Tutoring Sessions, Nov 2017

Achiever Mid-Year-Test, Dec 2017

· Cohort C: Recruiting, Nov/Dec 2017

Activist Training, Jan 2018

Tutoring Sessions, Feb 2018

Achiever Post-Test, Apr 2018

End-of-Year Celebration May 2018

## B: Describe specifically how the funding will be spent including identification of funding to sub grantee(s):

One of the major changes to Educational Justice Activists in the 2017-18 school year will center on data collection. Currently we receive the bulk of our data from JCPS, but there are a few issues with relying on data from the district: (1) over a third of the Achievers in the program are not JCPS students, and, therefore, Educational Justice does not receive grades, test scores, or attendance rates for these students, (2) K-PREP scores are not released until mid-October of the next school year, preventing any analysis and implementation of new procedures based on these results, and (3) the periodic grade reports and district assessments cannot be analyzed holistically due to differences in teachers, class sizes, and pace that material is covered within the classrooms of our Achievers. For these reasons, Educational Justice began piloting the administration of nationally normed assessments to our 5th-8th grade students: a reading assessment (Test of Reading Comprehension, TORC, 3rd Edition) and a mathematics assessment (Key Math 3 Diagnostic Assessment, Pearson). The results obtained from this pilot assessment will help staff to develop best practice procedures for assessing Achievers starting in August of the 2017-18 school year. EJ staff has chosen to use Scholastic Math and Reading Inventories as the primary form of academic assessment for Achievers next school year. In order to administer these assessments, which are computer adaptive, EJ will need to purchase at least 40 Google Chromebooks in order to test a large number of students at one time. Another significant change to Educational Justice Activists in the upcoming school year will be an expansion of the Activists training initiative. Throughout the Activist training and development workshops hosted this year, it was clear that our students benefited greatly from their workshop participation and lead to more improved Achiever academic performance and positive attitudinal shifts. Educational Justice plans to use Metro funding for materials associated with these improved testing and workshop sessions.

C: If this request is a fundraiser, please detail how the proceeds will be spent:
N/A
D: For Expenditure Reimbursement Only – The grant award period begins with the Metro Council approval date
and ends on June 30 of Metro fiscal year in which the grant is approved. If any part of this funding request is for funds to be spent before the grant award period, identify the applicable circumstances:
in the applicable and an entire period, facility the applicable an earlistances.
The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement:
✓ If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application.
The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement.
Testing Materials (Scholastic Reading + Math Inventories Subscription License and Google Chromebooks) will need to be purchased no later than July 31, 2017. Therefore, if Metro Funding is received, part of the funding will be a reimbursement for these expenditures.
Reimbursements should not be made before application date unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment):  Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application.
Attach a copy of cancelled checks to provide proof of payment of the invoices or receipts associated with the work plan identified in this application.

E: Describe the program's benefits to those being served (measurable outcomes). Include the program's process for collecting data and the indicators that will be tracked to measure the benefits to those being served:

Success is measured by the following parameters:(1) Number of 5-8th grade students enrolled in one-on-one tutoring, (2) Number of 9-12th grade tutors recruited and trained, (3) Number of pairings between Achievers and Activists who meet regularly (on the same day and time each week), (4) Number of tutoring hours provided, (5) Number of sessions occurring on time, (6) Extend of participation in each session by Achievers, (7) Attitudinal improvement in value of school/education by Achievers and Activists (as measured by comprehensive entrance/exit survey analysis), (8) Improvement in academic performance measures including GPA, test scores, and school attendance based on a comprehensive analysis of JCPS-provided data for Achievers and Activists both pre-program and post-program.

To consistently gauge the success of EJA, the platform provides global performance measures for evaluation, including the numbers of accepted and denied Activists, Achievers enrolled, number of pairings, and tutoring hours completed/missed. In addition, a number of feedback mechanisms have been built into the program to monitor its progress and to test key assumptions about the program design and target demographic: (1) online progress reports, which are submitted by Activists following every session with an Achiever; (2) entrance and exit attitudinal surveys, which are required for Activists, Achievers, and Achiever parents; (3) hard data provided by the local school district about Achievers and Activists before and after participation in the program (e.g., grades, test scores, attendance rates), and (4) internal testing data using nationally recognized assessments (Scholastic Reading and Math Inventories).

F: Briefly describe any existing collaborative relationships the organization has with other community organizations. Describe what those partners are bringing to the relationship in general and to this program/project specifically.

Louisville Free Public Libraries: sites for tutoring sessions

School Choice Scholarships: access to parents of students who are eligible for tutoring scholarships Jefferson County Public Schools: access to students who are eligible to be academic mentors and students who are eligible for tutoring scholarships

Louisville Tutoring Agency: site for training and registration sessions

Boys & Girls Club: access to parents of students who are eligible for tutoring scholarships Luckett & Farley: in-kind office space donation

#### SECTION 6 - PROGRAM/PROJECT BUDGET SUMMARY

THE PROGRAM/PROJECT BUDGET SHOULD REALISTICALLY ESTIMATE WHAT AMOUNT IS NEEDED FROM METRO GOVERNMENT AND WHAT IS EXPECTED FROM OTHER SOURCES.

	Column 1	Column 2	Column (1+2)=3
Program/Project Expenses	Proposed Metro Funds	Non- Metro Funds	Total Funds
A: Personnel Costs Including Benefits	0	152,530	152,530
B: Rent/Utilities	0	87,060	87,060
C: Office Supplies	0	40,050	40,050
D: Telephone	0	0	0
E: In-town Travel	0	0	0
F: Client Assistance (See Detailed List on Page 8)	0	0	0
G: Professional Service Contracts	0	82,000	82,000
H: Program Materials	9,300	20,604	37,904
I: Community Events & Festivals (See Detailed List on Page 8)	0	0	0
J: Machinery & Equipment	8,000	0	0
K: Capital Project	0	0	0
L: Other Expenses (See Detailed List on Page 8)	0	34,824	34,824
*TOTAL PROGRAM/PROJECT FUNDS	17,300	417,068	434,368
% of Program Budget	4 %	96 %	100%

#### List funding sources for total program/project costs in Column 2, Non-Metro Funds:

and the state of t		
68,028		
0		
4,190		
3,000		
341,850		
417,068		

<sup>\*</sup>Total of Column 1 MUST match "Total Request on Page 1, Section 2"

<sup>\*\*</sup>Must equal or exceed total in column 2.

Detail for Client Assistance, Community Events & Festivals or Other Expenses shown on Page 7	Column 1	Column 2	Column (1 + 2)=3
(circle one and use multiple sheets if necessary)	Proposed Metro Funds	Non- Metro Funds	Total Funds
N/A			
·			
	·		
Total			

**Detail of In-Kind Contributions for this PROGRAM only:** Includes Volunteers, Space, Utilities, etc. (Include anything not bought with cash revenues of the agency).

Donor*/Type of Contribution	Value of Contribution	Method of Valuation
Luckett & Farley	\$42,000	Rent Reduction
Louisville Tutoring Agency	\$21,000	Sublease
Total Value of In-Kind (to match Program Budget Line Item. Volunteer Contribution &Other In Kind)	\$63,000	

* DONOR INFORMATION REFERS TO WHO MADE THE IN KIND CONTRIBUTION.	VOLUNTEERS NEED NOT BE
LISTED INDIVIDUALLY, BUT GROUPED TOGETHER ON ONE LINE AS A TOTAL NO	
PERSON PER WEEK	

Agency Fiscal Ye	ar Start Date:	July 1, 2017				
Does your Agend budget projecte	cy anticipate a si d for next fiscal	ignificant increase ( year? NO []	or decrease in yo YES 🗸	ur budget from th	e current fiscal ye	ar to the
If YES, please ex	plain:					
For the 2018-20 software platfor \$350,000.	019 school year m and improve	r, Educational Jus the mobile applic	tice plans to cre ation. Current es	ate a fundraising stimates for this p	campaign to ove project will be \$3	erhaul our 00,00 to

#### SECTION 7 - CERTIFICATIONS & ASSURANCES

By signing Section 7 of the Grant Application, the authorized official signing for the applicant organization certifies and assures to the best of his or her knowledge and/or belief the following Assurances and Certifications. If there is any reason why one or more of the assurances or certifications listed cannot be certified or assured, please explain in writing and attach to this application.

#### Standard Assurances

- 1. Applicant understands this application and its attachments as well as any resulting grant agreement, reports and proof of expenditure is subject to Kentucky's open records law.
- 2. Applicant understands if the grant agreement is not returned to Louisville Metro within 90 days of its mailing to the applicant, the approval is automatically revoked and the funds will not be disbursed to our organization.
- 3. Applicant and any sub grantee will give Louisville Metro Government access to and the right to examine all paper or electronic records related to the awarded grant for up to five years of the grant agreement date.
- 4. Applicant assures compliance with the grant requirements and will monitor the performance of any third party (sub-grantee).
- 5. The Agency is in good standing with the Kentucky Secretary of State, Louisville Metro Government, the Jefferson County Revenue Commission, the Internal Revenue Service, and the Louisville Metro Human Relations Commission.
- Applicant understands failure to provide the services, programs, or projects included in the agreement will result in funds being withheld or requested to be returned if previously disbursed.
- 7. Applicant understands they must return to Louisville Metro any unexpended funds by July 31 following the Metro Louisville's fiscal year end.
- 8. Applicant understands they must provide proof of all expenditures (canceled checks, receipts, paid invoices). The Applicant understands the failure to provide proof of expenditures as required in the grant agreement could result in funding being withheld or request to be returned if previously disbursed.
- 9. Applicant understands if this application is approved, the grant agreement will identify an award period that begins with the Metro Council approval date, and will end with June 30 of the fiscal year in which the grant is approved. Expenditures associated with this award expected to occur prior to the award period (approval date) must be disclosed in this application in order to be considered compliant with the grant agreement.
- 10. Applicant understands if we choose to incur expenditures prior to the approval of the application by the Metro Council, there is no guarantee that funding will be reimbursed, as the Council may choose not to award the application.
- 11. Applicant will establish safeguards to prohibit employees or any person that receives compensation from awarded funds from using their position for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.

#### Standard Certifications

- 1. The Agency certifies it will not use Louisville Metro Government funds for any religious, political or fraternal Activities.
- 2. The Agency has a written Affirmative Action/Equal Opportunity Policy.
- 3. The Agency does not discriminate in employment or in provision of any service/program/activity/event based on age, color, disabled status, national origin, race, religion, sex, gender identity or sexual orientation, or Vietnam era veteran status.
- 4. The Agency certifies it will not require clients, recipients, or beneficiaries to participate in religious, political, fraternal or like activities in order to receive services/benefits provided with Louisville Metro Government funds.
- 5. The Agency understands the Americans with Disabilities Act (ADA) and makes reasonable accommodations.

Relationship Disclosure: List below any relationship you or any member of your Board of Directors or employees has with any Councilperson, Councilperson's family, Councilperson's staff or any Louisville Metro Government employee.

N/A

#### **SECTION 8 – CERTIFICATIONS & ASSURANCES**

I certify under the penalty of law the information in this application (including, without limitation, "Certifications and Assurances") is accurate to the best of my knowledge. I am aware my organization will not be eligible for funding if investigation at any time shows falsification. If falsification is shown after funding has been approved, any allocations already received and expended are subject to be repaid. I further certify that I am legally authorized to sign this application for the applying organization and have initialed each page of the application.

Signatur	e of Legal Signatory:	40			Date:	07/19/2017
Legal Sig	natory: (please print):	Mos	she Ohayon		Title:	Executive Director
Phone:	502-709-8719		Extension:	Email:	moshe@edu	ıcationaljustice.org

# Form **990-EZ**

# **Short Form Return of Organization Exempt From Income Tax**

2016

OMB No. 1545-1150

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

Department of the Treasury Internal Revenue Service

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

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A	or the	2016 calenda	r year, or tax year beginning January	1 . 2016.	and ending	Dec	ember 31	. 20 16
	Check if ap		C Name of organization				oye <u>r identificati</u>	,
	Address c	hange	Educational Justice, Inc.				-,-	**************
	Name cha	ıngə	Number and street (or P.O. box, if mall is not delivered to str	reet address)	Room/suite	E Telep	hone number	
Leasen	Initial retur		4050 Westport Rd.		200			740
-	Final retur Amended	n/terminated	City or town, state or province, country, and ZIP or foreign p	ostal code	200	E Cros	502-709-8 p Exemption	119
proving		n pending	Louisville, KY 40207			B .	ip exemption iber 🕨	
-		ing Method:	✓ Cash		111	-		
	Vebsite		tionalJustice.org					janization is not
			prog	rt no.) 4947(a)(1) o			to attach Sch 90, 990-EZ, or	
			✓ Corporation ☐ Trust ☐ Associa		r527	(i Oilli S	70, 990-EZ, UI	990-PF).
			7b to line 9 to determine gross receipts. If gross recei		more or if total	apporte		
(Pai	rt II, coli	umn (B) belov	) are \$500,000 or more, file Form 990 instead of Forn	990-EZ		asabis	•	
	art I		e, Expenses, and Changes in Net Assets			inatrue	tions for De	cat IX
		Check if	the organization used Schedule O to respond	to any question	in this Dort I	msuuc	LIUIS IOI Pa	ar i. 1)
torsial street	1	Contributio	ns, gifts, grants, and similar amounts received	a to any question			The second secon	CONTRACTOR OF THE PROPERTY OF
	2		ervice revenue including government fees and c				1	118,571
	3		p dues and assessments				2	0
	4	Investment	1				3	5,417
	5a		Income  unt from sale of assets other than inventory				4	0
	b					a		
		Cais or /las	or other basis and sales expenses	<u>5b</u>		0		
	C	Caming on	s) from sale of assets other than inventory (Sub d fundraising events	tract line 55 from I	ine 5a)		5c	0
	6			and the same			343	
Ø	a	\$15,000	ome from gaming (attach Schedule G if g	1	ž.			
316	h			6a		0		
Revenue	b	from fundr	me from fundraising events (not including \$_aising events reported on line 1) (attach Sched	0.0	f contribution	s		
Œ			h gross income and contributions exceeds \$15.	000	1			
						0		
	d		expenses from gaming and fundraising events or (loss) from gaming and fundraising events		d Ch and au	0	2.2	
		line 6c) .	or (1000) from gaining and fundialsing events	s (auu mies va am	u on and sui	otract		
	7a	,	of important loss setums and all accounts		1		6d	0
	b		of inventory, less returns and allowances of goods sold	The second secon		0		
	C		t or (loss) from sales of inventory (Subtract line			0	7-	
	8		nue (describe in Schedule O)				7c	40
	9	Total reve	nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		* * * *		9	
-PONESAL PL	10	Grants and	similar amounts paid (list in Schedule O)		* * * * * *		10	123,988
	11		id to or for members				11	0
6/0	12	,	her compensation, and employee benefits			• •	12	0
Se	13		al fees and other payments to independent con				13	0
Expenses	14	Occupance	r, rent, utilities, and maintenance	uaciois	* * * *		14	8,154
X	15		ablications, postage, and shipping				15	9
	16	Other eyne	nses (describe in Schedule O)		* . * * *		16	5,356
	17	Total expe	nses. Add lines 10 through 16				17	30,593
4.8	18	Excess or	deficit) for the year (Subtract line 17 from line 9)		4 4 4		18	44,103
er G	19	Net assets	or fund balances at beginning of year (from li	ine 27 column (A)	Imust sare	a swith	10	79,885
SS		end-of-yea	r figure reported on prior year's return)	and condition (M)	must agree	ANITE	19	Pr # 25 00
Net Assets	20		ges in net assets or fund balances (explain in S				20	5,430
Ž	21		or fund balances at end of year. Combine lines				21	
RESISTANCE AND ADDRESS OF	and the second second second second	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT					Jone S . I	

Pa	art II Balance Sheets (see the instructions	for Part III				Page 2
	Check if the organization used Schedu	le O to respond to	any question in this	Deut II		
			any question in tris	(A) Beginning of year	•	
22					20	(B) End of year
23				6,430		86,31
24				0	1	
25 26				6,430		86,315
27		• • • • • • •			26	00,31
the same of	Taria balances (inte 27 of colui)	in (B) must agree wi	th line 21)	6,430	27	86,315
	Statement of Program Service Accor Check if the organization used Schedul	inplishments (see t	ne instructions for	Part III)		
Wha	at is the organization's primary exempt purpose?	Educational	any question in this	Part III	/Doc	Expenses quired for section
					501(	(c)(3) and 501(c)(4)
	cribe the organization's program service accomp neasured by expenses. In a clear and concise is cons benefited, and other relevant information for e	MARROL MOSKINA H	of its three largest postices provider	orogram services, d, the number of	orga othe	inizations; optional for ers.)
28	Educational Justice Activists (EJA) provides weekly	one-on-one tutoring	and academic ment	ring company to		T
	underserved students. EJA serves over 250 studen	is throughout the sch	ool vear.	miny services to		
00	(Grants \$ ) If this amoun	t includes foreign gr	ants, check here .	> []	28a	43,567
29		**********				43,307
		***********************************				
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31	Other program services (describe in Schedule O)			• • • • • •	30a	0
	(Grants \$ ) If this amount	tincludes foreign av	ander alessaled		31a	
32	Total program service expenses (and lines 28a	through 31a)				43,567
Life	List of Officers, Directors, Trustees, and Ke	v Employees (list each	one even if not come	nonnetad th !	struc	tions for Part IV)
-	Check if the organization used Schedule	O to respond to a	ny question in this	Part IV		<u></u>
	(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employe benefit plans, and deferred compensation	e (e) I	Estimated amount of ther compensation
Mosh	e Ohayon - Executive Director		, , , , , , , , , , , , , , , , , , , ,	doiched compensation	+-	
		60	0			
Sarat	1 Jackson - Program Director				+	0
14 .11		20	0	0		0
Kathe	erine Six - Program Administration Coordinator					
Llann	ale Lauria Dandura Dand	60	0	0		0
mailin	ah Lewis - Product Development Coordinator	-				
Phidle	ynn Augustin - Achiever Coordinator	60	0	0		. 0
	The range state of Contamator	- co				
Micha	el Lucacher - Outreach Director	60	0	0	-	0
		50				
Erin C	Grogan - Achiever Coordinator	30	0	0	-	0
		40	0			
Alex L	ukas - Product Development Coordinator		U	0		0
		40	0	0		
Kara I	Damon - Chair of the Board of Directors			0	1	0
n att	120000000000000000000000000000000000000	5	0	0		0
Mike f	Mays - Board Member					0
Carro	Naukant Paradana	2	0	0		0
Sam C	Corbett - Board Member					
Share	n Goodman - Board Member	2	0	0		0
Julia	Occuman - Board Wemper					

Part		in th	30	aye 📞
-Mr ty-Migrate State of Company	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part	٧	
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		Yes	No
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	33		<b>√</b>
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	34		1
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? It "No," provide an explanation in Schedule O	35a 35b		✓
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		1
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a			V
b 38a	Did the organization file Form 1120-POL for this year?  Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were	37b		✓
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		1
b	If "Yes," complete Schedule L. Part II and enter the total amount involved	506		_ V
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9			
b 40a	Gross receipts, included on line 9, for public use of club facilities			
700	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0 : section 4912 ▶ 0 : section 4955 ▶ 0			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year			
	that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		1
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912,			
d	4955. and 4958	e e est		* e <sub>101</sub>
CI	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization	1 de 1 de 1		
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	10		4
41	List the states with which a copy of this return is filed ▶ Kentucky	40e	<u> </u>	V
42a		02-70	9-8719	<del></del>
	Constant of the ARCO Wanter of Did Co. non		-3139	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	Yes	No 🗸
	If "Yes," enter the name of the foreign country: ▶	N.		
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	*		
С	At any time during the calendar year, did the organization maintain an office outside the United States?  If "Yes," enter the name of the foreign country: ▶	42c		<b>V</b>
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year		. ]	<b>-</b> -
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be		Yes	No
	completed instead of Form 990-EZ	44a		1
d	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		1
d	Did the organization receive any payments for indoor tanning services during the year?  If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44c		1
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	44d 45a		-/
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	700		V
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions).	45h		

46	Did the organization engage, directly or	ndirectly, in political o	ampaign activities	on behalf of	of or in opposi	ition	Yes	No
Part	to cardidates for public office? If "Yes,"	complete Schedule C	, Part I			. 46		1
u en c	All section 501(c)(3) organization	s only Is must answer que	estions 47_40h a	ad EO and	complete the tables:  VI			
	ou and of.					ie tables i	for lin	es
	Check if the organization used Sc	hedule O to respond	d to any question i	in this Part	VI			
47							Yes	No
71	Did the organization engage in lobbying year? If "Yes," complete Schedule C, Par	activities or have a	section 501(h) elec	ction in effe	ct during the	tax		
48	Is the organization a school as described i			4-0-1-0			-	1
49a	Did the organization make any transfers	n section 170(b)(1)(A)(i	ritable related orga	ite Schedule	E	. 48	-	1
b	If "Yes," was the related organization a si	ection 527 organization	າກ?			401	+	1
50	Complete this table for the organization's	five highest compen	sated employees (	other than a	ffinana alle- et			L ke
	employees) who each received more that	n \$100,000 of comper	nsation from the or	ganization.	If there is non	e, enter "N	lone."	,
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MIS	contributi benefit pla	alth benefits, ons to employee ins, and deferred spensation	(e) Estimate other con		
None								
f	Total number of other employees paid ov	er \$100 000						
51	Complete this table for the organization	s five highest compe	ensated independe	ent contract	ore who each	received	moro	than
	\$100,000 of compensation from the orga	nization. If there is no	ne, enter "None."			received	more	ulai
	(a) Name and business address of each independ	tent contractor	(b) Type of s	service	(c)	Compensati	on	
None								
				Service days a service delicated and a service approximately and a service approximately a service approximately and a service approximately a service and a service and a service approximately a service and a s				
-	,			Hallandaria and the same and th	<del> </del> .			
		***************************************						
	Total number of other independent contra			. >				
52	Did the organization complete Scheducompleted Schedule A	ile A? Note: All se						
Under p	enalties of perjury, I declare that I have examined this	eturn, including accompany	ving schedules and state	ements and to	the best of my len	· Yes	l l	40
true, cor	rect, and complete. Declaration of preparer (other than	officer) is based on all info	rmation of which prepar	er has any kno	wledge.	owieuge and	beller,	II IS
0:	D/86	Lan			5/11/20	7		
Sign Here	Signature of officer  Moshe Ohayon, Executive Director  Type or print name and title				Date '			4
Deid	Print/Type preparer's name	Preparer's signature		Date		PTIN		
Paid Prepa					Check self-employ	if		
Use (	l			1	firm's EIN ▶	, 53		
	Firm's address ▶				hone no.			
iviay th	e IRS discuss this return with the preparer	shown above? See in	nstructions		1	► ☐ Yes	П	lo

# **Educational Justice**

## **BALANCE SHEET**

As of June 30, 2017

	TOTAL
ASSETS	
Current Assets	
Bank Accounts	
5 EJ Account (6623)	233,431.14
Total Bank Accounts	\$233,431.14
Total Current Assets	\$233,431.14
TOTAL ASSETS	\$233,431.14
LIABILITIES AND EQUITY	
Total Liabilities	
Equity	
Opening Balance Equity	4,557.33
Retained Earnings	81,758.06
Net Income	147,115.75
Total Equity	\$233,431.14
TOTAL LIABILITIES AND EQUITY	\$233,431.14



0791364.09

bschell ADD

Elaine N. Walker, Secretary of State Received and Filed: 5/11/2011 10:37 AM Fee Receipt: \$8.00

# COMMONWEALTH OF KENTUCKY ELAINE N. WALKER, SECRETARY OF STATE

Division of Business Filings Business Filings PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov

# Articles of Incorporation Non-profit Corporation

NAI

(502) 564-3490 www.sos.ky.gov	Please note: This form does not comply Service prior to filing the Articles of Incor		contact the Internal	Revenue
Pursuant to KRS 14A and KRS 273	the undersigned applies to qualify and t	or that purpose submits the f	following statemen	nts:
Article I: The name of the corporatio	n is Educational 3	Justice Inc	-	
Article II: The purpose for which the	corporation is organized ed Vcut	Jonal Charita	ible	
Article III: The name of the registere	NA al =	hayon		
and the street address of the corpor 4050 Westport Doc Street Address (No Post Office Box N		y is Julie Kentur	cky 4	0207 ode
Article IV: The mailing address of the 1050 West port Roa Street or PO Box Number	d, Svite 209 Louse	Me Kenty	cky L	10207 ode
	ninimum of three (3) required) constitutir			
Moshe Ohayon 4050 Name Salley 350 Name Street or Matthew Bradshaw 14	of the persons who are to serve as the in West Dort Road, Ste: 20 PO Box Number  A Gladden Drive PO Box Number HHVIST DOUME AVENU PO Box Number	Itial board of directors are as  Market Lovisy   le  City  Lovisy   le  Gity  Lovisy   le  City  City	State  Kenvik  State  Kenvik  State  Kenvik	4 40207 Zip Code 4 40218 Zip Code 4 40004 Zip Code
Article VI: The name and mailing ad MOSM ONCYPH Street Ad	dress of the incorporator is  SO Westport Road, Ste.  Idress or Post Office Box Number	209 LOUSHILE	Kentruk State	4 40207 Zip Code
Name Street Ad	dress or Post Office Box Number	City	State	Zip Code
Name Street Ad	dress or Post Office Box Number	City	State	Zip Code
	ffective upon filing, unless a delayed effe or to the date the application is filed. Th	e date and/or time is		
I/We declare under penalty of perjur	y under the laws of the state of Kentucky	y that the foregoing is true an		or time)
Signature of Incorporator	Moshe (	Overyon, director	5-10	-11
Malia	cons	ent to serve as the registered		of the corporation.
Signature of Registered Agent	pon Moshe	Ohayon, director		0-11

INTERNAL REVENUE SERVICE P. O. BOX 2508 CINCINNATI, OH 45201

Date: AUG 3 0 2011

EDUCATIONAL JUSTICE INC C/O MOSHE OHAYON 110 WEIST PL LOUISVILLE, KY 40206 Employer Identification Number:

DLN:

17053193349041 Contact Person: ROGER W VANCE

ID# 31173

Contact Telephone Number: (877) 829-5500 Accounting Period Ending:

December 31
Public Charity Status:

170(b)(1)(A)(vi)
Form 990 Required:

Yes

Effective Date of Exemption:

May 11, 2011

Contribution Deductibility:

Yes

Addendum Applies:

No

#### Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

#### EDUCATIONAL JUSTICE INC

We have sent a copy of this letter to your representative as indicated in your power of attorney.

Sincerely,

this f. Herner

Director, Exempt Organizations

Enclosure: Publication 4221-PC

Form (Rev. December 2014)
Department of the Treasury

# Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

	nent of the Treasury Revenue Service			
	Name (as shown on your income tax return). Name is required on this line; do no	it leave this line blank.		
	2 Business name/disregarded entity name, if different from above			
6				
page	3 Check appropriate box for federal tax classification; check only one of the follow	ving seven boxes:		4 Exemptions (codes apply only to certain entities, not individuals; see
Ĕ		Partnership Trust	/estate	instructions on page 3):
15.0	Individual/sole proprietor of			Exempt payee code (if any)
yp	Limited liability company. Enter the tax classification (C=C corporation, S=5 c	orporation, P=partnersnip)		Exemption from FATCA reporting
or t	Note. For a single-member LLC that is disregarded, do not check LLC; check	the appropriate box in the line al	pove for	code (if any)
Print or type	the tax classification of the single-member owner.			(Applies to accounts maintained outside the U.S.)
P C	Other (see instructions) ►  5 Address (number, street, and apt. or suite no.)	Requeste	r's name a	and address (optional)
Ċ.				
Spe	4060 Westport Road Svite 200			
Print or type See Specific Instructions on	6 City, state, and ZIP code			
Ś	Louisville, Ky 40207			
	7 List account number(s) here (optional)			
	No see (TIN)			
Pa	Taxpayer Identification Number (TIN)	given on line 1 to avoid	Social se	curity number
	r your TIN in the appropriate box. The TIN provided must match the name up withholding. For individuals, this is generally your social security number of the Port Linest vertices.			
entit	es, it is your employer identification number (EIN). If you do not have a na-	TIDON, OCC / TON TO BET -	or	
TIN	on page 3.	r		r identification number
Note	<ul> <li>If the account is in more than one name, see the instructions for line 1 are elines on whose number to enter.</li> </ul>	id the chart on page 1 to		
guia	BILLIAS OIT MILOSE HOURDER TO EFFICI.			
	O. difference			
	rt II Certification			
Una	er penalties of perjury, I certify that: he number shown on this form is my correct taxpayer identification numbe	er (or I am waiting for a numb	er to be i	ssued to me); and
2. [	am not subject to backup withholding because: (a) I am exempt from back service (IRS) that I am subject to backup withholding as a result of a failure	to report all interest or divide	ends, or (	c) the IRS has notified me that I am
r	o longer subject to backup withholding; and			
3 1	am a U.S. citizen or other U.S. person (defined below); and			
	and a second in direction that I am exempt	from FATCA reporting is con	ect.	
				ntly subject to backup withholding
bec	ause you have failed to report all interest and dividends on your tax returns	t the anti-butions to on ind	ividual re	tirement arrangement (IRA), and
inte	rest paid, acquisition or abandonment of secured property, cancellation of erally, payments other than interest and dividends, you are not required to	sign the certification, but you	ı must pr	ovide your correct TIN. See the
gen	ructions on page 3.			
Sig			_	
He		Date ► ∠		
Ge	eneral Instructions	<ul> <li>Form 1098 (home mortgage in (tuition)</li> </ul>	iterest), 10	98-E (student loan interest), 1098-T
Sec	tion references are to the Internal Revenue Code unless otherwise noted.	<ul> <li>Form 1099-C (canceled debt)</li> </ul>		
Fut	ure developments. Information about developments affecting Form W-9 (such	<ul> <li>Form 1099-A (acquisition or a</li> </ul>	bandonme	ent of secured property)
as I	egislation enacted after we release it) is at www.iis.gov/iws.	provide your correct TIN.		rson (including a resident alien), to
	rpose of Form ndividual or entity (Form W-9 requester) who is required to file an information	If you do not return Form W-S to backup withholding. See Wh	to the red at is backu	quester with a TIN, you might be subject up withholding? on page 2.
retu	rn with the IRS must obtain your correct taxpayer identification in the IRS must obtain your correct taxpayer identification in the IRS must obtain your correct taxpayer identification	By signing the filled-out form	, you:	
	the attack adoption to an identification number (A) (N), Or CHIDIOYCI		giving is	correct (or you are waiting for a number
	noer (This), adoption taxipper lectimeters in the amount paid to interest amount paid to interest amount reportable on an information return. Examples of information or other amount reportable on an information return.	to be issued),	-ittn bn	olan withholding or
yoı reti	rns include, but are not limited to, the following:	Certify that you are not sultant     Claim exemption from back	kun withh	olding if you are a U.S. exempt payee. If
• F	orm 1099-INT (interest earned or paid)	liable you are also certiful	na that as	a LLS, nerson, your allocable share or
• F	orm 1099-DIV (dividends, including those from stocks or mutual funds)		IIS trade	or business is not subject to the of effectively connected income, and
• F	orm 1099-MISC (various types of income, prizes, awards, or gross proceeds)	4. Contifue that EATCA codale	antered o	on this form (if any) indicating that you are
bro	orm 1099-B (stock or mutual fund sales and certain other transactions by kers)	exempt from the FATCA report page 2 for further information.	ing, Is con	rect. See What is FATCA reporting? on
	orm 1099-S (proceeds from real estate transactions)	F-0		
A F	orm 1099-K (merchant card and third party network transactions)			

#### **EDUCATIONAL JUSTICE INC.**

#### **General Information**

Organization Number 0791364

Name EDUCATIONAL JUSTICE INC.

**Profit or Non-Profit** N - Non-profit

Company Type KCO - Kentucky Corporation

Status A - Active
Standing G - Good

State KY

 File Date
 5/11/2011

 Organization Date
 5/11/2011

 Last Annual Report
 4/25/2017

Principal Office 4050 WESTPORT ROAD

SUITE 209

LOUISVILLE, KY 40207

Registered Agent MOSHE OHAYON

4050 WESTPORT ROAD

SUITE 209

LOUISVILLE, KY 40207

#### **Current Officers**

CEO MOSHE OHAYON
Director MOSHE OHAYON
Director SARAH Jackson
Director KARA DAMON

## Individuals / Entities listed at time of formation

**Director** REBECCA SALLEY

**Director** <u>MATTHEW BRADSHAW</u>

DirectorMOSHE OHAYONIncorporatorMOSHE OHAYON

#### Images available online

Documents filed with the Office of the Secretary of State on September 15, 2004 or thereafter are available as scanned images or PDF documents. Documents filed prior to September 15, 2004 will become available as the images are created.

Annual Report	4/25/2017	1 page	<u>PDF</u>	
Annual Report	7/5/2016	1 page	PDF	
Annual Report	6/15/2015	1 page	PDF	
Annual Report	6/30/2014	1 page	<u>PDF</u>	
Annual Report	6/27/2013	1 page	PDF	
Annual Report	6/28/2012	1 page	tiff	PDF
<u>Amendment</u>	6/27/2011	1 page	<u>tiff</u>	PDF
<u>Amendment</u>	5/25/2011	1 page	tiff	PDF

**Articles of Incorporation** 

5/11/2011

1 page

tiff

PDF

## **Assumed Names**

# **Activity History**

Filing	File Date	Effective Date	Org. Referenced
Annual report	4/25/2017 4:51:28 PM	4/25/2017 4:51:28 PM	
Annual report	7/5/2016 8:40:52 PM	7/5/2016 8:40:52 PM	
Annual report	6/15/2015 10:26:43 PM	6/15/2015 10:26:43 PM	
Annual report	6/30/2014 9:47:42 PM	6/30/2014 9:47:42 PM	
Annual report	6/27/2013 3:02:03 PM	6/27/2013 3:02:03 PM	
Annual report	6/28/2012 3:23:21 PM	6/28/2012	
Amendment - Miscellaneous amendments	6/27/2011 10:54:26 AM	6/27/2011	
Amendment - Miscellaneous amendments	5/25/2011 10:00:24 AM	5/25/2011	
Add	5/11/2011 10:37:15 AM	5/11/2011	

# **Microfilmed Images**

#### Hinson, Erin

To:

Katherine Six

Subject:

RE: Educational Justice - Funding Request

From: Katherine Six [mailto:katherine@educationaljustice.org]

Sent: Friday, July 21, 2017 10:51 AM

To: Hinson, Erin

**Cc:** Mike Mays; Moshe Ohayon; Hannah Lewis **Subject:** Re: Educational Justice - Funding Request

Hi Erin,

Please find the cost proposal for the purchase of the Scholastic Reading and Math Inventories for 100 students attached.

Each inventory costs \$5.50 per student, so for both the reading and math inventories we will be paying \$11 per student. We plan to serve 250 Achievers in the upcoming school year, but since we recruited over our intended goal last year, the amount in the previously submitted project budget is for 300 students (\$3,300) and includes the \$700 start up fee for the two inventories.

The cost proposal attached is only for 100 students who we plan to test in the first round of recruitment this fall. We will be purchasing the remaining 150-200 subscriptions in September or October., as we continue to recruit and supply underserved students with tutoring scholarships.

Please let me know if you need any additional information from us.

Have a great day,

Katherine Six
Program Administration Coordinator
Educational Justice
www.EducationalJustice.org



# **Houghton Mifflin Harcourt**

Cost Proposal
Prepared For

# **Educational Justice**

4050 Westport Rd Ste 200 Louisville KY 40207-3139

For the Purchase of:

# **Reading Inventory**

Prepared By Jeffrey Federman jeffrey.federman@hmhco.com

PLEASE SUBMIT THIS PROPOSAL WITH YOUR PURCHASE ORDER.



**Houghton Mifflin Harcourt** 

Attention: Hannah Lewis hannah@educationaljustice.org

HMH Confidential and Proprietary

Intervention Solutions Group 255 38th St. Suite L St. Charles, IL 60174 FAX: 800-724-4716

InterventionSolutionsOrders@hmhco.com

#### Expiration Date:7/21/2017

\$400.06

# Proposal for **Educational Justice Reading Inventory**

	ICDM Till.	List	Discount	Sale		Purchase
	ISBN Title	Price	%	Price	Quantity	Amount
=						
	Materials and Services					
02801	9781328015327 Math Inventory Web Start up fee	\$350.00		\$350.00	1	\$350.00
002802	9781328015334 Reading Inventory Web Start up fee	\$350.00		\$350.00	1	\$350.00
001447	9780545369527 Reading Inventory Subscription License (50-249)	\$7.50	26.7%	\$5.50	100	\$550.00
(when	purchasing 50-249 licenses)					
001470	9780545381574 SMI Subscription Student License (50-249)	\$7.50	26.7%	\$5.50	100	\$550.00
When	purchasing 50-249 licenses					
	Total for Materials and Services					\$1,800.00
Tota	l for -					\$1,800.00

\$1,800.00

Total Savings: Subtotal Purchase Amount:

\$0.00

Shipping & Handling (0.00%):

Total Cost of Proposal (PO Amount):

\$1,800.00

\*\*Please add proper sales tax to your order\*\*



**Houghton Mifflin Harcourt** 

Attention: Hannah Lewis hannah@educationaljustice.org

**HMH Confidential and Proprietary** 

Intervention Solutions Group 255 38th St. Suite L St. Charles, IL 60174 FAX: 800-724-4716

InterventionSolutionsOrders@hmhco.com

#### Expiration Date:7/21/2017

# Proposal for **Educational Justice Reading Inventory**

**Total Cost of Proposal (PO Amount):** 

\$ 1,800.00

This is a cost proposal only.

This cost proposal is subject to HMH's Standard Terms and Conditions ("Ts & Cs") below:

<a href="http://www.hmhco.com/common/terms-conditions">http://www.hmhco.com/common/terms-conditions</a>

Ts & Cs are also found on HMH invoices.

HMH reserves the right to modify its Ts & Cs from time to time and agrees to notify you prior to such modifications becoming effective.

Date of Proposal: 6/6/2017

Proposal Expiration Date:7/21/2017



# **Houghton Mifflin Harcourt**



**Houghton Mifflin Harcourt** 

Attention: Hannah Lewis hannah@educationaljustice.org

**HMH Confidential and Proprietary** 

Intervention Solutions Group 255 38th St. Suite L St. Charles, IL 60174 FAX: 800-724-4716

InterventionSolutionsOrders@hmhco.com



## Acer: New Order # 100089738

Acer Store <noreply@acer.com>
To: Moshe Ohayon <katherine@educationaljustice.org>

Thu, Jul 20, 2017 at 12:36 PM



Hey There Moshe Ohayon!

Your order has been confirmed. You'll get another email shortly once its shipped with tracking information. Below are the confirmation details.

You can check the status of your order anytime on the Acer Store website.

**Order Number: 100089738** 

Order Date: July 20, 2017 11:36:17 AM CDT

#### **Billing Information:**

Moshe Ohayon 4050 Westport Rd Ste 200 Louisville, Kentucky, 40207-3139 United States T: 8653149344

#### **Shipping Information:**

Katherine Six 4050 Westport Rd Ste 200 Louisville, Kentucky, 40207-3139 United States T: 8653149344

#### **Payment Method:**

Credit Card Type
Visa
Credit Card Number
xxxx-1747

#### **Shipping Method:**

Shipping Option - Ground (5 to 7 Business Days)

Item	Sku	Qty	Subtotal
Chromebook 11 - CB3-131-C3SZ	NX.G85AA.001	20	\$3,599.80
		Subtotal	\$3,599.80
	Shipping & Handling		\$125.00
	Grand Total (Excl.Tax)		\$3,724.80
	US-KY-40207-Rate 1 (6%)		\$223.49
		Tax	\$223,49

Item Sku Qty Subtotal
Grand Total (Incl.Tax) \$3,948.29

If you have any questions about your order please contact us at ecommerce@acer.com or call us at 1-800-910-2237 Monday - Friday, 8AM - 6PM CT.

Cheers! The Team @ Acer

Cancellation Policy Overview: Orders can be cancelled free-of-charge prior to shipment. Once shipped, products can be returned within fifteen days of receipt. Returns for a small number of products (see individual product pages) are subject to a restocking fee of 25%. Additional details can be found online in our return and cancellation policy document.