


The White Family Foundation
Grant Request #809
Achieve Plant City
March 28, 2023

Date of grant proposal submission	Tuesday, March 28, 2023
Are you an IRS compliant 501(c)3 public charity/nonprofit?	Yes
Legal name of organization	Learn Tampa Bay Inc
DBA Name if Applicable	Achieve Plant City
Address	 202 W Reynolds St. Plant City, FL 33563 United States
Website	http://www.achieveplantcity.org
Telephone	8137524010
Fax	8134368714
Organization Director/Title	Angelica Ibarra/Founder and Executive Director
Contact Person/Title	Angelica Ibarra/Founder and Executive Director
Contact Person's Telephone	813 7524010
Contact Person's Email	angelica@learntampabay.org
Grant Request Amount	\$10,000.00

Please provide us with a brief description of your organization (no more than 500 words).

Achieve Plant City empowers at-risk children and their families in Eastern Hillsborough County to achieve success through education. Since 2011, our intergenerational model of learning has developed literacy skills, improved parent-child interactions, and instilled habits to maintain learning gains, creating lifelong learners within the family unit. We are committed to meeting the needs of all families in our community. However, more families hear about us each year, and we have reached capacity. We seek a \$10,000 grant to expand our educational programs and increase access for more families in our community. A capacity-building grant will allow us to acquire additional classroom space and increase the number of educators to support our growing population of children and their families.

Grant Purpose (one paragraph)

An expansion will benefit the early childhood education program for children aged 18 months to five years, the reading and homework assistance program for children aged kindergarten through fifth grade, and the parenting education workshops. These workshops provide topics to support the educational growth and strengthen the family unit for all families with young children. This growth will improve life for these families now and for future generations. Achieve Plant City is a leading force in changing lives, one family at a time, by building a solid foundation of literacy and educational support for our families. Former student Paola says of Achieve, "This program is not just about teaching a language. It is about giving people a voice in this country. A voice to stand up for their children because they don't want their children to have to do it alone. A voice to contribute to this society and make a change, a voice to advance themselves in this community." Our organization is readily prepared to expand on the foundation of ending the cycle of illiteracy in our community. Thank you for your time and consideration of this letter of intent.

Annual Organization Budget	\$352,300.00
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Grant Proposal

The White Family Foundation from Achieve Plant City

Date of proposal submission: May 31, 2023

Legal Name: Learn Tampa Bay

DBA: Achieve Plant City

Address: 202 W. Reynolds Street, Plant City, FL 33563, U.S.A.

Website: achieveplantcity.org

Telephone: 813 752-4010

Fax: 813-436-8714

Organization Director/Title: Angelica Ibarra/Executive Director,
angelica@learntampabay.org

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Case Statement

1. Who are you?

Achieve Plant City is a non-profit organization established by a middle school dropout who changed her life through education and wants to pay it forward to help others achieve their educational goals. The organization has been providing literacy services in East Hillsborough County since 2011, originally as The Family Literacy Academy of Tampa Bay established and managed by executive director, Angelica Ibarra, under the auspices of the Barbara Bush Foundation for Family Literacy. In 2014 the organization, then named Learn Tampa Bay, received 501(c)(3) status and is now called Achieve Plant City. The organization's philosophy is that through education and support, all individuals can reach their potential.

Achieve Plant City's mission is to empower families to help them achieve success through education. Our goal is to improve the quality of life of children and families by providing literacy classes and support to the family unit, and by doing that, break the cycle of illiteracy and poverty.

2. What problem do you solve?

The problem we aim to solve is illiteracy in the areas of Eastern Hillsborough County. For over twelve years, Achieve Plant City has worked to break the cycle of illiteracy and poverty by providing successful educational programs to not just children but also their parents. Our families are low-income immigrants in their thirties with young children, 18 months to ten years old, whose first language is not English.

The recent poverty rate for Hispanics in Plant City is 30.34% compared to 8.34% for the White non-Hispanic population. Seventy one point one percent of Plant City residents speak only English, while 28.9% speak other languages. The non-English language spoken by the largest group is Spanish, which is spoken by 26.48% of the population (The Plant City Population Review, 2023). Our programs have typically served Hispanics families from Mexico and Central America. However, in recent years, we have enrolled families from other countries which include Cuba, Puerto Rico, Venezuela, Colombia, Nigeria and most recently Russia and Ukraine. The parents served by our programs do not have the skills necessary to support their children's education. They cannot help them with their homework or communicate with the teachers. The result is that each year we see their children fall further and further behind in school. The Hillsborough County School District launched the Transformation Network during the summer of 2020 in an effort to help the struggling schools reach academic success for the children.

The Network focuses its efforts on serving 45 schools, including over 3,500 teachers and staff and 27,000 students; 89% students of color, 92% receive free and reduced lunch,

and 17.5% students with disabilities. The Transformation Network model focuses on ensuring that every school and every child is supported by 5 key levers of school change:

1. High Quality Instruction
2. Effective Leaders
3. Collaborative Leaders
4. Safe Supportive Environments
5. Engaged Families

Four out of the eleven schools in East Hillsborough that are a part of the Network are in our community, and we serve families from all four schools. Achieve Plant City focuses on helping parents gain the skills needed so that they can obtain employment or pursue higher education and support their children's learning in conjunction with working with the children to overcome barriers to learning. In immigrant populations, specifically, those who are English speakers of other languages, literacy is vital to engage and prosper in their new community (Piccinin & Del Maso, 2021).

3. How do you solve this problem and how do you measure success?

Achieve Plant City attacks the illiteracy problem by providing educational support to both children and their families. We support parents in their role as the child's first teacher and concentrate on the importance of education beginning in the home. Senechal and Lefevre (2002) found that children whose parents read with them from an early age experienced more positive outcomes in future comprehension and language development. By cultivating parents' participation in their child's education and increasing the quality of parent-child interactions, our programs create lifelong learners. Pre-reading skills are developed in preschool-aged children, elementary students strengthen reading skills, and adult learners build a literacy foundation, ensuring future academic success. A mother's reading skill is the greatest determinant of her children's future academic success, outweighing other factors, such as neighborhood and family income (U.S. Department of Health & Human Services. (2010, October 25).

Our Programs:

- **Adult Literacy** includes English for Speakers of Other Languages (ESOL) classes, Adult Basic Education (ABE) classes, and basic computer skills instruction. The adult literacy program typically serves 35 adults who attend morning or evening classes each semester. The Ventures Adult Education Curriculum is implemented with five levels for standards-based English for Speakers of Other Languages (ESOL). Students learn practical communication skills for application in community, family, and workplace settings, exposing students to interesting topics with the capacity for transitioning to higher education.

- **Child Literacy** includes early childhood education for children ages 18 months to 5 years and reading and homework assistance for children in kindergarten through fifth grade.
 - **The Preschool Classes** are four mornings a week during the school year. “Preschool attendance outside of the home for at least 20 hours per week has been shown to improve literacy skills in preschool-aged children (Lee et al., 2018).” The program serves 15 children aged 18 months to five years. Using the Literacy Express Curriculum, preschoolers learn beginning concepts in language, math, science, socio-emotional development, and emerging literacy. Preschoolers join their parents for group activities, providing an opportunity for parents to learn the importance of interacting with their children and how to foster a desire for educational success.
 - **The After-School Program** serves elementary students in kindergarten through fifth grade by offering a tutoring program to maintain or increase their educational skills and abilities. Three state certified schoolteachers engage students during homework help time, practice common phrases and sight words, journal writing prompts, sound out words, phonics, and spelling, and conversational skill-building games. The After School Tutoring Program includes approximately 30 students in kindergarten through fifth grade.
- **Parenting Education** includes workshops that focus on supporting parents in their role as their child’s teacher and topics that strengthen the family unit. Parenting sessions include workshops provided by Success for Kids and Families, The Extension Services, University of South Florida, Suncoast Credit Union, and others provided by our family literacy coordinator. Currently, we serve 35 participants in this program.
- **Intergenerational Literacy Activities** includes activities where 15 parents and 15 children work together daily on reading and literacy activities. Parents have the opportunity to see what their children are learning in the early childhood classroom and the early childhood facilitators model literacy techniques that the parents can reinforce at home. Programs to encourage shared reading among varied age groups within the home will benefit emerging youth literacy (Bus et al., 1995).

To measure the success of programs, Achieve Plant City currently uses the CATS online system that was developed to be used by funded agencies of the Children’s Board of Hillsborough County. Achieve Plant City collects both quantitative and qualitative data on all its family literacy participants. We use the CASAS assessment for adults to measure their reading and listening skills and the Get Ready to Read assessment for preschool aged children to measure their reading readiness for kindergarten. Parents also complete the

parent/teacher compact and the home literacy checklist. These tools measure home literacy environments and parent involvement in their children's education. Participant entrance questionnaires, assessments results, attendance hours, and exit questionnaires are also entered into a data collection system, which is entered at regular intervals throughout the program term by the staff responsible for entering all data and meeting all deadlines. The parents of the children enrolled in the after school project complete intake forms as a requirement of the project. They are asked to bring any information received from their children's schools and we will conduct our own assessments. We use the MyON program to measure the children's reading levels. The teachers also use other tools found in the curriculum books used to determine the children's skills and progress made. The parents bring current report cards and at the end of the project the children are evaluated by using the MyON program and the end-of-year report cards or notice of summer promotions. For over three decades, MyON has provided evidence-and research-based solutions that assess each student's grasp of essential reading and math skills to determine the next best step in their academic journey. The intake form includes a question on the number of times a child reads per week and that serves as the starting point. During the project, the children complete monthly reading logs that indicate the number of times per week that they read. The parents need to initial the reading logs to confirm that the children read on those days. At the end of the project, the average is obtained to see the increase in reading days.

We conduct the pre-assessments at the beginning of the project and conduct a mid-term assessment in December. The final assessments take place in May at the end of the project term. The project staff monitors the children's challenges and gains by coordinating with their day teachers and the parents. The program assistant works closely with the parents to make sure that they are involved in their children's learning. The coordinator and the teachers work with children doing small group activities and that helps identify any challenges the children might be having. Corrective actions take place throughout the project to make sure that we are on target with our intended outcomes. We have staff meetings weekly to make sure that each child's learning is reviewed and make any modifications needed to their learning plans. This school year's successes include:

- 100% of After-School Elementary Tutoring students who were pre and post tested achieved growth in Foundation^{al} Reading Skills
- 80% of our Early Childhood Education preschoolers achieved average or above average pre-reading skills.
- 55% of our Adult Learners increased reading skills by the equivalent of at least one grade level in reading.
- 100% of parents with pre-k children indicated that their Home Literacy Environments Had Many or Most of the Necessary Supportive Elements to help their children get ready to read after completing our parenting workshops.

- At the end of the project, 82% of parents with children in kindergarten through fifth grade indicated being involved in their children's school and overall education after attending our parenting workshops.
- Using the “Fry Instant Phrases Word List” to test the most common fluency phrases by phrases per minute, students achieved a 38% increase in fluency of phrases.
- In sight word identification, 100% of students who were pre and post tested showed an increase.

4. What do you need from The White Family Foundation to help you solve this problem and be successful in executing your mission?

We want to add more students and their families into our programs. With The White Family Foundation’s help, we can do just that. Achieve Plant City has experienced exponential growth since 2020. As more students enter our program and experience success, they share by word of mouth, social media, and other channels with potential students. Additionally, last year we launched an outreach program called Story Time on the Go. This program of bringing books and supplies into the community proved to be a significant tool in recruiting new families to join our programs. Our classrooms are full, but our community continues to demonstrate a need for family education resources. Our current building has classroom space available for rent, which would enable all our programs to grow and fulfill our community’s needs. An expansion will benefit all programs at the Achieve Plant City Center by providing an additional, larger classroom space and additional education staff to teach adult literacy, family workshops, and more.

Specifically, an expansion will benefit the early childhood education program for children aged 18 months to five years, the reading and homework assistance program for children aged kindergarten through fifth grade, and the parenting education workshops. These workshops provide topics to support educational growth and strengthen the family unit for all families with young children. This growth will improve life for these families now and for future generations. Achieve Plant City is a leading force in changing lives, one family at a time, by building a solid foundation of literacy and educational support for our families. Former student Paola says of Achieve, *“This program is not just about teaching a language. It is about giving people a voice in this country. A voice to stand up for their children because they don’t want their children to have to do it alone. A voice to contribute to this society and make a change, a voice to advance themselves in this community.”* Our organization is readily prepared to expand on the foundation of ending the cycle of illiteracy in our community.

Financials

• Organization and Program Annual Budget (current year).

Because Achieve Plant City focuses on providing holistic family literacy services, our organization and project annual budgets are the same.

Achieve Plant City 2022-2023

Achieve Plant City

2022-2023 Agency Budget

REVENUES:

Children's Board of Hillsborough County	297,300
Foundation Grants	25,000
Fundraising/Donations	6,365
School District of Hillsborough County (in-kind/adult literacy teacher salary)	21,060
TOTAL REVENUE	349,725

EXPENDITURES:

Salaries	225,558
FICA	17,255
Unemployment Compensation	871

Workers' Compensation	2,256
Subtotal Benefits	20,382

Building Lease/Rent (includes utilities)	30,000
Janitorial Expense	2,880
Telephone/Internet	1,260
Subtotal Occupancy Costs	34,140

Training/Conference Expense & Travel	790
Insurance	4,800
Postage	90
Printing & Copying	750
Outreach	600
Office Supplies	1,200
Computer Supplies	1,600
Operating Supplies	1,020
Educational/Curriculum Supplies	3,450
Client/Participant Supplies	2,895
Community Activities & Events	900
Family Advisory Council	2,000
Subtotal Other Operating Costs	20,095

Total Direct Expenditures	300,175
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Administrative/Indirect Cost	49,550
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TOTAL EXPENDITURES	349,725
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05/30/23

Accrual Basis

Learn Tampa Bay Inc
Profit & Loss
 July 2021 through June 2022

	Jul '21 - Jun 22
Ordinary Income/Expense	
Income	
607 · Unrestricted	
Contributions	
Board Members	13,667.79
Clubs/Churches	11,950.00
Corporations	12,727.44
Foundations	1,000.00
Individuals	4,335.50
Total Contributions	43,680.73
Fundraising	380.00
Special Events	16,339.64
Tuition/Program Fees	928.42
Total 607 · Unrestricted	61,328.79
610 · Contributions - Temp. Restrict.	
Foundation Grants	33,000.00
Government Grants	220,392.15
Total 610 · Contributions - Temp. Restrict.	253,392.15
612 · Checking Interest Earned	2.25
Total Income	314,723.19
Gross Profit	314,723.19
Expense	
Payroll Expenses - Admin	14,926.26
Payroll Expenses - Program	62,135.10
Payroll Taxes	
FICA	13,826.15
FUTA	299.83
SUTA	47.50
Payroll Taxes - Other	-197.56
Total Payroll Taxes	13,975.92
Repairs/Maintenance	
Janitorial	300.00
Total Repairs/Maintenance	300.00
66000 · Payroll Expenses	103,672.11
751 · Fund Raising Expense	6,600.09
850 · Audit/Accounting Expense	
Accounting Expenses	1,770.00
850 · Audit/Accounting Expense - Other	3,860.00
Total 850 · Audit/Accounting Expense	5,630.00
854 · Advertising	
Marketing	600.00
Website & Emails	622.00
Total 854 · Advertising	1,222.00
859 · Banking Fees	61.72

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05/30/23

Accrual Basis

Learn Tampa Bay Inc
Profit & Loss
 July 2021 through June 2022

	Jul '21 - Jun 22
862 · Books/Materials/Supplies	
Client/Participant Supplies	1,207.31
Educational/Curriculum Supplies	5,293.87
Operating Supplies	896.88
Training Supplies	121.67
862 · Books/Materials/Supplies - Other	495.94
Total 862 · Books/Materials/Supplies	8,015.67
873 · Computer Expense	
Information Technology Expense	1,097.50
Software	517.40
873 · Computer Expense - Other	7,872.56
Total 873 · Computer Expense	9,487.46
874 · Events/Meetings	
Community Events/Activities	10.99
874 · Events/Meetings - Other	291.70
Total 874 · Events/Meetings	302.69
875 · Corp. Dues/Fees/Subscriptions	275.00
877 · Fundraising & Grant Writers	4,060.00
878 · Depreciation Expense	545.88
881 · Furniture	306.58
883 · Equipment Lease	104.52
904 · Insurance	
904.1 · General Liability	4,603.45
904 · Insurance - Other	1,044.96
Total 904 · Insurance	5,648.41
918 · Office Supplies	770.69
924 · Postage/Delivery	60.90
925 · Printing & Copying	56.64
926 · Promotional Items/Outreach	586.75
928 · Rent/Utilities	30,000.00
940 · Telecommunications	1,242.14
Total Expense	269,986.53
Net Ordinary Income	44,736.66
Net Income	44,736.66

Learn Tampa Bay Inc
Profit & Loss
July 2021 through June 2022

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Ordinary Income/Expense	
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Net Income	44,736.66

Forms 990 / 990-EZ Return SummaryFor calendar year 2021, or tax year beginning **07/01/21**, and ending **06/30/22****46-5045258****LEARN TAMPA BAY INC****Net Asset / Fund Balance at Beginning of Year** **57,245****Revenue**

Contributions	<u>305,652</u>
Program service revenue	<u> </u>
Investment income	<u>2</u>
Capital gain / loss	<u> </u>
Fundraising / Gaming:	
Gross revenue	<u> </u>
Direct expenses	<u> </u>
Net income	<u> </u>
Other income	<u>0</u>

Total revenue**305,654****Expenses**

Program services	<u>240,203</u>
Management and general	<u>16,395</u>
Fundraising	<u>10,660</u>

Total expenses**267,258****Excess / (deficit)****38,396**Changes **Net Asset / Fund Balance at End of Year****95,641****Reconciliation of Revenue**Total revenue per financial statements **305,654**

Less:

Unrealized gains	<u> </u>
Donated services	<u> </u>
Recoveries	<u> </u>
Other	<u> </u>

Plus:

Investment expenses	<u> </u>
Other	<u> </u>

Total revenue per return **305,654****Reconciliation of Expenses**Total expenses per financial statements **267,258**

Less:

Donated services	<u> </u>
Prior year adjustments	<u> </u>
Losses	<u> </u>
Other	<u> </u>

Plus:

Investment expenses	<u> </u>
Other	<u> </u>

Total expenses per return **267,258****Balance Sheet**

	Beginning	Ending	Differences
Assets	<u>61,664</u>	<u>105,725</u>	
Liabilities	<u>4,419</u>	<u>10,084</u>	
Net assets	<u>57,245</u>	<u>95,641</u>	<u>38,396</u>

Miscellaneous Information

Amended return

Return / extended due date **05/15/23**Failure to file penalty

Form **8879-TE****IRS e-file Signature Authorization
for a Tax Exempt Entity**

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service
Name of filerFor calendar year 2021, or fiscal year beginning **7/01**, 2021, and ending **6/30**, 20**22**▶ **Do not send to the IRS. Keep for your records.**
▶ **Go to www.irs.gov/Form8879TE for the latest information.****2021****LEARN TAMPA BAY INC**

EIN or SSN

46-5045258Name and title of officer or person subject to tax **ANGELICA IBARRA
EXEC DIR****Part I Type of Return and Return Information**

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line **1a**, **2a**, **3a**, **4a**, **5a**, **6a**, **7a**, **8a**, **9a**, or **10a** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b**, **2b**, **3b**, **4b**, **5b**, **6b**, **7b**, **8b**, **9b**, or **10b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a Form 990 check here	▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	305,654
2a Form 990-EZ check here	▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here	▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here	▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here	▶ <input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b	
6a Form 990-T check here	▶ <input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b	
7a Form 4720 check here	▶ <input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b	
8a Form 5227 check here	▶ <input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b	
9a Form 5330 check here	▶ <input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b	
10a Form 8038-CP check here	▶ <input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b	

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that ☒ I am an officer of the above entity or ☐ I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

☒ I authorize **Amy Diamond CPA** to enter my PIN **33563** as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax ▶

Date ▶ **01/13/23****Part III Certification and Authentication**

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

59602785798

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ **Gayla B Russell, CPA**Date ▶ **01/13/23****ERO Must Retain This Form — See Instructions****Do Not Submit This Form to the IRS Unless Requested To Do So**

For Privacy Act and Paperwork Reduction Act Notice, see back of form.

Form **8879-TE** (2021)

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

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

OMB No. 1545-0047

2021**Open to Public Inspection****A For the 2021 calendar year, or tax year beginning 07/01/21, and ending 06/30/22****B** Check if applicable:

- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization**LEARN TAMPA BAY INC**

Doing business as

ACHIEVE PLANT CITY

Number and street (or P.O. box if mail is not delivered to street address)

202 W REYNOLDS ST

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

PLANT CITY**FL 33563****D** Employer identification number**46-5045258****E** Telephone number**813-752-4010****G** Gross receipts \$ **305,654****F** Name and address of principal officer:**ANGELICA IBARRA****202 REYNOLDS ST****PLANT CITY****FL 33563****H(a)** Is this a group return for subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. See instructions

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ **NONE****H(c)** Group exemption number ▶**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation:**M** State of legal domicile:**Part I Summary**

Activities & Governance	1 Briefly describe the organization's mission or most significant activities:		
	PUBLIC CHARITY LITERACY PROGRAM		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	6
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	6
	5 Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	10
	6 Total number of volunteers (estimate if necessary)	6	0
Revenue	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0
	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	277,994	305,652
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0
Expenses	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	37,400	0
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	315,394	305,654
	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	181,537	194,709
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 10,660		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	82,017	72,549
	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	263,554	267,258
Net Assets or Fund Balances	19 Revenue less expenses. Subtract line 18 from line 12	51,840	38,396
	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	61,664	105,725
	22 Net assets or fund balances. Subtract line 21 from line 20	4,419	10,084
		57,245	95,641

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date		
	ANGELICA IBARRA		EXEC DIR		
Paid Preparer Use Only	Print/Type preparer's name		Preparer's signature	Date	Check <input type="checkbox"/> if PTIN
	Gayla B Russell, CPA		Gayla B Russell, CPA	01/13/23	self-employed P00185798
	Firm's name ▶ Amy Diamond CPA		Firm's EIN ▶ 47-3007789		
	Firm's address ▶ 13799 Park Blvd # 195 Seminole, FL 33776-3402		Phone no. 727-828-9554		

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No**For Paperwork Reduction Act Notice, see the separate instructions.**Form **990** (2021)

Part III Statement of Program Service Accomplishments

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

**1** Briefly describe the organization's mission:**PUBLIC CHARITY LITERACY PROGRAM****2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code:) (Expenses \$ **240,203** including grants of \$) (Revenue \$)**ENHANCEMENT OF 3 TO 10 YEAR OLDS READING COMPREHENSION****4b** (Code:) (Expenses \$ including grants of \$) (Revenue \$)**N/A****4c** (Code:) (Expenses \$ including grants of \$) (Revenue \$)**N/A****4d** Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **240,203**

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	X	

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a 0	
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	10
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17	

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

Section A. Governing Body and Management

	1a	6	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b Enter the number of voting members included on line 1a, above, who are independent	1b	6		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			2	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?			3	X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			4	X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?			5	X
6 Did the organization have members or stockholders?			6	X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?			7a	X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			7b	X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?			8a	X
b Each committee with authority to act on behalf of the governing body?			8b	X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9	X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X
b Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	X
13 Did the organization have a written whistleblower policy?	13	X
14 Did the organization have a written document retention and destruction policy?	14	X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a	X
b Other officers or key employees of the organization	15b	X
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► **None**

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records ►
ANGELICA IBARRA
202 REYNOLDS ST
PLANT CITY
FL 33563
813-752-4010

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) GREGORY BUCKNER	0.00									
VP	0.00	X		X				0	0	0
(2) ERIKA CARVALHO	0.00									
SECRETARY	0.00	X		X				0	0	0
(3) ANGELICA IBARRA	0.00									
EXEC DIR	0.00	X		X				0	0	0
(4) SHANE KARLSON	0.00									
TREASURER	0.00	X		X				0	0	0
(5) ANGEL MILLER	0.00									
DIRECTOR	0.00	X						0	0	0
(6) DAVID MOORE	0.00									
DIRECTOR	0.00	X						0	0	0
(7) ALEXANDER M LERNER	0.00									
PRES	0.00			X				0	0	0
(8)										
(9)										
(10)										
(11)										

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	305,652				
	f All other contributions, gifts, grants, and similar amounts not included above	1f					
	g Noncash contributions included in lines 1a-1f	1g	\$				
	h Total. Add lines 1a-1f						
Program Service Revenue			Business Code				
	2a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			2	2		
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	6a	(i) Real (ii) Personal				
	b Less: rental expenses	6b					
	c Rental inc. or (loss)	6c					
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities (ii) Other				
	b Less: cost or other basis and sales exps.	7b					
	c Gain or (loss)	7c					
	d Net gain or (loss)						
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a					
	b Less: direct expenses	8b					
	c Net income or (loss) from fundraising events						
	9a Gross income from gaming activities. See Part IV, line 19	9a					
	b Less: direct expenses	9b					
	c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code				
	11a						
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions			305,654	2	0	0	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	180,536	165,610	14,926	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	14,173	13,004	1,169	
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	5,630	5,630		
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion	12,469	1,809		10,660
13 Office expenses	1,300	1,300		
14 Information technology	4,529	4,529		
15 Royalties				
16 Occupancy	31,542	31,542		
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	300		300	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	5,648	5,648		
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a BOOKS, MAT'LS & SUPPLIES	8,016	8,016		
b DEPRECIATION EXP	2,778	2,778		
c TAXES & LICENSES	275	275		
d BANK SERVICE CHARGES	62	62		
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	267,258	240,203	16,395	10,660
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	31,377	1	67,850
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	20,636	4	26,042
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 27,776		
	b Less: accumulated depreciation	10b 15,943	9,651	10c 11,833
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 33)	61,664	16	105,725	
Liabilities	17 Accounts payable and accrued expenses	163	17	5,517
	18 Grants payable		18	
	19 Deferred revenue		19	4,567
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	4,256	25	
	26 Total liabilities. Add lines 17 through 25	4,419	26	10,084
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	57,245	27	95,641
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	57,245	32	95,641
33 Total liabilities and net assets/fund balances	61,664	33	105,725	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	305,654
2	Total expenses (must equal Part IX, column (A), line 25)	2	267,258
3	Revenue less expenses. Subtract line 2 from line 1	3	38,396
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	57,245
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	95,641

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990)Department of the Treasury
Internal Revenue Service**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ **Attach to Form 990 or Form 990-EZ.**▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2021**Open to Public
Inspection**

Name of the organization

LEARN TAMPA BAY INC

Employer identification number

46-5045258**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☒ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations:
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

Schedule A (Form 990) 2021

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	188,651	298,152		277,994	305,652	1,070,449
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	188,651	298,152		277,994	305,652	1,070,449
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						1,070,449

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	188,651	298,152		277,994	305,652	1,070,449
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	8,527			37,400		45,927
11 Total support. Add lines 7 through 10						1,116,376

12 Gross receipts from related activities, etc. (see instructions)	12	2
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>		

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f) divided by line 11, column (f))	14	95.89 %
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	95.33 %
16a 33 1/3% support test—2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input checked="" type="checkbox"/>		
b 33 1/3% support test—2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	%
19a 33 1/3% support tests—2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 33 1/3% support tests—2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ <input type="checkbox"/>		

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		Yes	No
2a			
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
2b			
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.			
3a			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
3b			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	
Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D – Distributions		Current Year	
1	Amounts paid to supported organizations to accomplish exempt purposes		
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity		
3	Administrative expenses paid to accomplish exempt purposes of supported organizations		
4	Amounts paid to acquire exempt-use assets		
5	Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)		
6	Other distributions (describe in Part VI). See instructions.		
7	Total annual distributions. Add lines 1 through 6.		
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.		
9	Distributable amount for 2021 from Section C, line 6		
10	Line 8 amount divided by line 9 amount		

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2021			
a From 2016			
b From 2017			
c From 2018			
d From 2019			
e From 2020			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2021 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017			
b Excess from 2018			
c Excess from 2019			
d Excess from 2020			
e Excess from 2021			

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

Part II, Line 10 - Other Income Detail

Other income \$ 45,927

**SCHEDULE D
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**▶ Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2021**Open to Public
Inspection**

Name of the organization

LEARN TAMPA BAY INC

Employer identification number

46-5045258**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (for example, recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

- a** ☐ Public exhibition **d** ☐ Loan or exchange program
b ☐ Scholarly research **e** ☐ Other

c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

- c** Beginning balance
d Additions during the year
e Distributions during the year
f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐ Yes ☐ No

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment ▶ %
b Permanent endowment ▶ %
c Term endowment ▶ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** Unrelated organizations
(ii) Related organizations

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		27,776	15,943	11,833
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶				11,833

Part VII Investments – Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments – Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ☐

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	305,654
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	305,654
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	305,654

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1 Total expenses and losses per audited financial statements		1	267,258
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a Donated services and use of facilities	2a		
b Prior year adjustments	2b		
c Other losses	2c		
d Other (Describe in Part XIII.)	2d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1		3	267,258
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII.)	4b		
c Add lines 4a and 4b		4c	
5 Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	267,258

Part XIII Supplemental Information.

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

**SCHEDULE O
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021**Open to Public
Inspection**

Name of the organization

LEARN TAMPA BAY INC

Employer identification number

46-5045258**Form 990, Part III, Line 4d - All Other Accomplishments****ENHANCEMENT OF 3 TO 10 YEAR OLDS READING COMPREHENSION****Form 990, Part VI, Line 11b - Organization's Process to Review Form 990****ORGANIZATION HAS AUDITED FINANCIAL STATEMENTS. TAX RETURN IS FILED AFTER
AUDIT IS COMPLETE. TAX RETURN MIRRORS AUDITED FINANCIAL STATEMENTS.****Form 990, Part VI, Line 15a - Compensation Process for Top Official****COMPARED TO OTHER ORGANIZATIONS OF THE SAME SIZE AND SIMILAR PROGRAMS****Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation****ALL GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST.**

Form 990	Two Year Comparison Report		2020 & 2021
For calendar year 2021, or tax year beginning 07/01/21 , ending 06/30/22			
Name LEARN TAMPA BAY INC			Taxpayer Identification Number 46-5045258

			2020	2021	Differences
Revenue	1. Contributions, gifts, grants	1.			
	2. Membership dues and assessments	2.			
	3. Government contributions and grants	3.	277,994	305,652	27,658
	4. Program service revenue	4.			
	5. Investment income	5.		2	2
	6. Proceeds from tax exempt bonds	6.			
	7. Net gain or (loss) from sale of assets other than inventory	7.			
	8. Net income or (loss) from fundraising events	8.			
	9. Net income or (loss) from gaming	9.			
	10. Net gain or (loss) on sales of inventory	10.			
	11. Other revenue	11.	37,400		-37,400
	12. Total revenue. Add lines 1 through 11	12.	315,394	305,654	-9,740
Expenses	13. Grants and similar amounts paid	13.			
	14. Benefits paid to or for members	14.			
	15. Compensation of officers, directors, trustees, etc.	15.			
	16. Salaries, other compensation, and employee benefits	16.	181,537	194,709	13,172
	17. Professional fundraising fees	17.			
	18. Other professional fees	18.	5,718	5,630	-88
	19. Occupancy, rent, utilities, and maintenance	19.	33,432	31,542	-1,890
	20. Depreciation and Depletion	20.			
	21. Other expenses	21.	42,867	35,377	-7,490
	22. Total expenses. Add lines 13 through 21	22.	263,554	267,258	3,704
	23. Excess or (Deficit). Subtract line 22 from line 12	23.	51,840	38,396	-13,444
Other Information	24. Total exempt revenue	24.	315,394	305,654	-9,740
	25. Total unrelated revenue	25.			
	26. Total excludable revenue	26.	37,400	2	-37,398
	27. Total assets	27.	61,664	105,725	44,061
	28. Total liabilities	28.	4,419	10,084	5,665
	29. Retained earnings	29.	57,245	95,641	38,396
	30. Number of voting members of governing body	30.	10	6	
	31. Number of independent voting members of governing body	31.	10	6	
	32. Number of employees	32.	10	10	
	33. Number of volunteers	33.			

Form 990	Tax Return History	2021
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Name LEARN TAMPA BAY INC	Employer Identification Number 46-5045258
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	2017	2018	2019	2020	2021	2022
Contributions, gifts, grants		298,152		277,994	305,652	
Membership dues						
Program service revenue						
Capital gain or loss						
Investment income					2	
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue				37,400		
Total revenue		298,152		315,394	305,654	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.						
Other compensation		193,023		181,537	194,709	
Professional fees		4,780		5,718	5,630	
Occupancy costs		39,165		33,432	31,542	
Depreciation and depletion						
Other expenses		38,103		42,867	35,377	
Total expenses		275,071		263,554	267,258	
Excess or (Deficit)		23,081		51,840	38,396	
Total exempt revenue		298,152		315,394	305,654	
Total unrelated revenue						
Total excludable revenue				37,400	2	
Total Assets		18,018		61,664	105,725	
Total Liabilities		3,740		4,419	10,084	
Net Fund Balances		14,278	14,278	57,245	95,641	

Federal Statements**Schedule A, Part II, Line 1(e)**

Description	Amount
DONATIONS AND GRANTS	\$ 305,652
Total	\$ 305,652

Schedule A, Part II, Line 10(e)

Description	Amount
PPP GRANT	\$
Total	\$ 0

Schedule A, Part II, Line 12 - Current year

Description	Amount
Taxable Interest on Savings and Temporary Cash Investments	\$ 2
Total	\$ 2

- **Organization Balance Sheet/Profit & Loss Statements** See attachment.
- **Program Budget** (This is the same as the organization budget above.) • **Your most recent IRS 990 tax filing** (should be no more than two years old). See attachment.

Board Members & Staff:

- **Detailed description of executive staff members, qualifications, and duration with the organization.**
- **Angelica Ibarra** is the executive director and founder of Achieve Plant City. Angelica has more than 25 years of experience in education having worked with adult literacy students as well as family literacy participants through the Hillsborough County School's Adult and Community Education Department for more than six years. She provided family literacy services in the West Tampa community for over eight years. She obtained a Bachelor of Arts degree in International Studies from the University of South Florida and completed a graduate certificate program in nonprofit management from the University of Tampa.

Having lived in the targeted community herself for over 30 years, Angelica knows firsthand the challenges the population faces. She migrated with her family, traveling to several states picking farm crops, until she was in her mid-twenties. She dropped out of school at an early age and went back to school as an adult, seeking a second chance in life. She found a community program that gave her the support she needed to pursue her education. It is now her goal to create the same community center that gives others in East Hillsborough County their second chance in life.

- **Jenny Kime** began working at Achieve Plant City in December 2021. She has a Master's in Educational Leadership, Bachelor's in Elementary Education, Florida Teaching Certificate, ESOL and Reading endorsement. She previously worked for the Plant City Family YMCA as the Youth and Teen Coordinator, managing programs such as After School care, Summer Camps, The Ophelia Project Girls Circles, and Teen Leaders Club. She even chaperoned a group of students on a trip to North Carolina for two consecutive summers to visit the YMCA Blue Ridge Leaders School. She worked for the YMCA for six years beginning as a camp counselor to becoming a leader over many programs for six years and remained on staff for an extra year for consulting purposes. Once she completed her college education, she began working at a title one school as a 4th grade teacher and continued in this position for six years until she moved to another title one school that opened as a new school. There she was a writing resource teacher for two years. She has raised her own children from the baby, toddler, preschool, and now elementary ages, which is not the likely position to put on a resume but has taught her a great many things that has given her compassion for working with other parents and bringing family friendly opportunities to her community like Story Time on the Go. She realizes the need to gather people

together towards a positive goal and recognizes the impact that has on families which betters the entire community.

- **Detailed description of the Board Members, qualifications, duration on the Board**

Achieve Plant City's governing authority is held by a six-member board (four white men, one white woman, one Hispanic woman) that is comprised of business and community leaders. The current board chair, Dr. Alexander Lerner, was instrumental in establishing Achieve Plant City and has been with the organization since it was established. His contributions to the organization include obtaining legal counsel to help set up the corporation and help us obtain our 501 (c)(3) status, providing the necessary funding to make sure we had the resources needed to provide our services, and volunteering his time to provide trainings for our staff and counseling services for our families. Our board vicechair and treasurer have worked very closely with our executive director to develop financial goals for the organization. They are both local business owners, members of Plant City Rotary Club, have provided resources and valuable contacts within our community that have brought more resources and funding to our organization. Our secretary has a similar background as some of our families. She understands the struggles they encounter and is passionate in making a difference for the families we serve. All contribute financially to the organization. Membership is representative of the service area of the organization and reflects ethnic and professional diversity. The board establishes policy, approves the budget, and sets organizational goals and objectives. Board meetings are held every six weeks. Professional affiliations include: Retired medical doctor and entrepreneur, local business owners, community advocates, and marketing professionals. There is a written code of professional ethics in place that governs the purchase of services and products to ensure compliance in relation to the financial gain or benefit to board or staff. The majority of our board members have been with the organization for over 7 years. One of the six members was recently added.

See attachment for names and affiliations for each board member.

- **Board Member service and contribution requirements**

While Achieve Plant City does not have written policies regarding board member service and contributions, all our board members make significant contributions, both monetary and in support of our programming and fundraising efforts. Our bylaws require us to have a minimum of three board members and a maximum of fifteen. In fiscal year 2021 – 2022, 100% of the board members donated to the organization. They contributed a total of \$13,667.



2021-2022 Board of Directors

<p>Alexander Lerner, President Retired Medical Doctor 3507 Bayshore Blvd. Unit 1202 Tampa, FL 33629 (813) 546-8282 amlerner@me.com</p>	<p>Gregory L. Buckner, Vice-president GT Grandstands, president 2810 Sydney Road Plant City, FL 33566 (813) 355-6032 gbuckner@gtgrandstands.com</p>	<p>Shane Karlson, Treasurer Your Green Team, president 902 W Dr. MLK Jr. Blvd. Suite 2 Plant City, FL 33563 (813) 643-7378 shane@yourgreenteam.com</p>
<p>Erika Carvalho, Secretary Edward Jones Branch Office Administrator 4116 Barret Avenue Plant City, FL 33566 (813) 967-2955</p>	<p>Angel Miller Keller Williams Realtor 704 W. Russell Drive Plant City, FL 33563 (813) 546-9863</p>	<p>Jeanette Mack Aromatic Harmony Business Owner 4002 Smith Ryals Rd. Lot 15 Plant City, FL 33567 (813) 727-5724</p>
<p>Dave Moore 2916 Forest Club Drive Plant City, FL 33566 dwmre@hotmail.com</p>		

IN THE NEWS



2020 ACHIEVE PLANT CITY HERITAGE FESTIVAL

CLICK ON THE IMAGE
TO VIEW THE NEWS VIDEO

Video Courtesy:
Lizbeth Gutierrez, Focus Magazine

FUNDRAISER HELPS ACHIEVE SCHOOL TO PROSPER

CLICK ON THE IMAGE TO VIEW
THE PLANT CITY OBSERVER NEWS ARTICLE

Photo Courtesy:
Deanna Hurley Photography



ACHIEVE PLANT CITY FALL 2023 NEWSLETTER

CLICK ON THE IMAGE TO VIEW
ACHIEVE PLANT CITY'S
FALL 2023 NEWSLETTER

Photo Courtesy:
Achieve Plant City



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

DEPARTMENT OF THE TREASURY

Date: JUL 14 2014

LEARN TAMPA BAY INC
C/O ANGELICA M IBARRA
1303 E SPENCER ST
PLANT CITY, FL 33563

Employer Identification Number:
46-5045258
DLN:
17053119395034
Contact Person:
CUSTOMER SERVICE ID# 31954
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
June 30
Public Charity Status:
170(b)(1)(A)(vi)
Form 990 Required:
Yes
Effective Date of Exemption:
March 1, 2014
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.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,



Director, Exempt Organizations

DIVISION OF CONSUMER SERVICES
(850) 410-3800



THE RHODES BUILDING
2005 APALACHEE PARKWAY
TALLAHASSEE, FLORIDA 32399-6500

FLORIDA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES

COMMISSIONER WILTON SIMPSON

April 10, 2023

Refer To: CH40674

LEARN TAMPA BAY, INC.
202 W REYNOLDS ST
PLANT CITY, FL 33563-3200

RE: LEARN TAMPA BAY, INC.
REGISTRATION#: CH40674
EXPIRATION DATE: April 7, 2024

Dear Sir or Madam:

The above-named organization/sponsor has complied with the registration requirements of Chapter 496, Florida Statutes, the Solicitation of Contributions Act. A COPY OF THIS LETTER SHOULD BE RETAINED FOR YOUR RECORDS.

Every charitable organization or sponsor which is required to register under s. 496.405 must conspicuously display the registration number issued by the Department and in capital letters the following statement on every printed solicitation, written confirmation, receipt, or reminder of a contribution:

"A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE (800-435-7352) WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE."

The Solicitation of Contributions Act requires an annual renewal statement to be filed on or before the date of expiration of the previous registration. The Department will send a renewal package approximately 30 days prior to the date of expiration as shown above.

Thank you for your cooperation. If we may be of further assistance, please contact the Solicitation of Contributions section.

Sincerely,

Deleah J Sims
Regulatory Consultant
850-410-3719
Fax: 850-410-3804
E-mail: deleah.sims@fdacs.gov