

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2018

Department of the Treasury
Internal Revenue Service

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.

Open to Public Inspection

A For the 2018 calendar year, or tax year beginning **JUL 1, 2018** and ending **JUN 30, 2019**

B Check if applicable:

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

C Name of organization
DOMINICAN REPUBLIC EDUCATION AND MENTORING PROJECT, INC.

Doing business as **DREAM PROJECT**

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
13 WINTER LANE

City or town, state or province, country, and ZIP or foreign postal code
MILTON, VT 05468

F Name and address of principal officer: **MICHEL ZALESKI**
SAME AS C ABOVE

D Employer identification number
**** - *** 2565**

E Telephone number
607-216-4697

G Gross receipts \$ **2,258,502.**

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)

H(c) Group exemption number

I Tax-exempt status: 501(c)(3) 501(c) () (insert no. 4947(a)(1) or 527)

J Website: **WWW.DOMINICANDREAM.ORG**

K Form of organization: Corporation Trust Association Other

L Year of formation: **2000** **M** State of legal domicile: **VT**

Part I Summary			
1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O			
2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
Activities & Governance	3 Number of voting members of the governing body (Part VI, line 1a)	3	15
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	14
	5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	5
	6 Total number of volunteers (estimate if necessary)	6	0
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, line 38	7b	0.
	Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year
9 Program service revenue (Part VIII, line 2g)		1,075,382.	1,361,969.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		296,850.	528,027.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		337.	43,488.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		327,927.	212,475.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,700,496.	2,145,959.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	54,215.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
16a Professional fundraising fees (Part IX, column (A), line 11e)		529,685.	713,651.
b Total fundraising expenses (Part IX, column (D), line 25)		0.	0.
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		918,484.	1,069,295.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,448,169.	1,837,161.
19 Revenue less expenses. Subtract line 18 from line 12	252,327.	308,798.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	2,333,494.	2,784,217.
	22 Net assets or fund balances. Subtract line 21 from line 20	150,580.	297,362.
		2,182,914.	2,486,855.

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: **MICHEL ZALESKI, PRESIDENT** Date: _____

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: **CONNIE FELLION** Preparer's signature: _____ Date: _____

Check if self-employed PTIN: **P01875413**

Firm's name: **MCSOLEY MCCOY & CO.** Firm's EIN: **** - *** 7374**

Firm's address: **118 TILLEY DRIVE, STE. 202 SOUTH BURLINGTON, VT 05403** Phone no. **(802) 658-1808**

DOMINICAN REPUBLIC EDUCATION AND MENTORING PROJECT, INC.

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

ALL CHILDREN AND YOUTH IN THE DOMINICAN REPUBLIC WILL HAVE EQUAL OPPORTUNITIES TO LEARN AND REALIZE THEIR FULL POTENTIAL THROUGH

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 [X] No

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

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 \$ 871,581. including grants of \$) (Revenue \$ 588,723.) SEE SCHEDULE O

4b (Code:) (Expenses \$ 368,378. including grants of \$ 54,215.) (Revenue \$) SEE SCHEDULE O

4c (Code:) (Expenses \$ 377,110. including grants of \$) (Revenue \$) SEE SCHEDULE O

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 1,617,069.

**DOMINICAN REPUBLIC EDUCATION AND
MENTORING PROJECT, INC.**

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)? <i>If "Yes," complete Schedule A</i>	<input checked="" type="checkbox"/>	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	<input checked="" type="checkbox"/>	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		<input checked="" type="checkbox"/>
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		<input checked="" type="checkbox"/>
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part I</i>		<input checked="" type="checkbox"/>
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		<input checked="" type="checkbox"/>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part IV</i>		<input checked="" type="checkbox"/>
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part VI</i>	<input checked="" type="checkbox"/>	
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? <i>If "Yes," complete Schedule D, Part VII</i>		<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part VIII</i>		<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part IX</i>		<input checked="" type="checkbox"/>
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	<input checked="" type="checkbox"/>	
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)? <i>If "Yes," complete Schedule D, Part X</i>	<input checked="" type="checkbox"/>	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	<input checked="" type="checkbox"/>	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		<input checked="" type="checkbox"/>
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		<input checked="" type="checkbox"/>
14a Did the organization maintain an office, employees, or agents outside of the United States?	<input checked="" type="checkbox"/>	
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	<input checked="" type="checkbox"/>	
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	<input checked="" type="checkbox"/>	
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule G, Part I</i>		<input checked="" type="checkbox"/>
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	<input checked="" type="checkbox"/>	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		<input checked="" type="checkbox"/>
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule I, Parts I and II</i>		<input checked="" type="checkbox"/>

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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, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity 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 Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <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 in 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 Compliance

Check 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		12
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

DOMINICAN REPUBLIC EDUCATION AND MENTORING PROJECT, INC.

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 <u>5</u>		
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)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		
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)?	X	
b	If "Yes," enter the name of the foreign country: DOMINICAN REPUBLIC 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?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
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?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
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?		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
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?		
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.		
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?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		
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.		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.		X

DOMINICAN REPUBLIC EDUCATION AND MENTORING PROJECT, INC.

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 in 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

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a <u>15</u> 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 in Schedule O.		
b	Enter the number of voting members included in line 1a, above, who are independent 1b <u>14</u>		
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	<input checked="" type="checkbox"/>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3	<input checked="" type="checkbox"/>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	<input checked="" type="checkbox"/>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	<input checked="" type="checkbox"/>
6	Did the organization have members or stockholders?	6	<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	8a	<input checked="" type="checkbox"/>
b	Each committee with authority to act on behalf of the governing body?	8b	<input checked="" type="checkbox"/>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	<input checked="" type="checkbox"/>

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	<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	<input checked="" type="checkbox"/>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	<input checked="" type="checkbox"/>
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	<input checked="" type="checkbox"/>
13	Did the organization have a written whistleblower policy?	13	<input checked="" type="checkbox"/>
14	Did the organization have a written document retention and destruction policy?	14	<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/>
b	Other officers or key employees of the organization	15b	<input checked="" type="checkbox"/>
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	<input checked="" type="checkbox"/>
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 in Schedule O)
- 19** Describe in 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 ► EMILY MACDOWELL - 607-216-4697
13 WINTER LANE, MILTON, VT 05468

**DOMINICAN REPUBLIC EDUCATION AND
MENTORING PROJECT, INC.**

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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 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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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) MICHEL ZALESKI CHAIRMAN	10.00	X		X			0.	0.	0.	
(2) MARIE JOSEE BARSHI PRESIDENT	20.00	X		X			0.	0.	0.	
(3) WILLIAN FRIEDMAN TREASURER/SECRETARY	1.00	X		X			0.	0.	0.	
(4) DARLENE CORDERO BOARD MEMBER	1.00	X					0.	0.	0.	
(5) ADRIANO ESPAILLAT BOARD MEMBER	1.00	X					0.	0.	0.	
(6) KARLA FARACH BOARD MEMBER	1.00	X					0.	0.	0.	
(7) SPENCER KIMBALL BOARD MEMBER	1.00	X					0.	0.	0.	
(8) SCOTT SIEGEL BOARD MEMBER	1.00	X					0.	0.	0.	
(9) BENJAMIN DE MENIL BOARD MEMBER	1.00	X					0.	0.	0.	
(10) CYNTHIA CARRION BOARD MEMBER	1.00	X					0.	0.	0.	
(11) LUCY FRIEDMAN BOARD MEMBER	1.00	X					0.	0.	0.	
(12) ANA GALAN BOARD MEMBER	1.00	X					0.	0.	0.	
(13) MIRTHA MCQUILLING BOARD MEMBER	1.00	X					0.	0.	0.	
(14) KATHY ROMERO BOARD MEMBER	1.00	X					0.	0.	0.	
(15) CATHERINE DELAURA EXECUTIVE DIRECTOR	50.00			X			64,449.	0.	0.	

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Part VIII Statement of Revenue

Check 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	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	15,795.				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,346,174.				
	g Noncash contributions included in lines 1a-1f: \$		90,820.				
	h Total. Add lines 1a-1f			1,361,969.			
	Program Service Revenue	2 a <u>STUDENT GROUPS</u>	Business Code 611710	509,382.	509,382.		
b <u>PROJECT SERVICE FEES</u>		611710	18,645.	18,645.			
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f				528,027.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		43,488.			43,488.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)					
		d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)					
		d Net gain or (loss)					
	8 a Gross income from fundraising events (not including \$ 15,795. of contributions reported on line 1c). See Part IV, line 18	a	264,322.				
	b Less: direct expenses	b	112,543.				
	c Net income or (loss) from fundraising events			151,779.			151,779.
	9 a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses	b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	a						
b Less: cost of goods sold	b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code				
11 a <u>RC22</u>		900099	42,450.	42,450.			
b <u>TUITION</u>		900099	8,588.	8,588.			
c <u>PROCESSING DONATION</u>		900099	5,500.	5,500.			
d All other revenue		900099	4,158.	4,158.			
e Total. Add lines 11a-11d			60,696.				
12 Total revenue. See instructions			2,145,959.	588,723.	0.	195,267.	

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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 X

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(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	54,215.	54,215.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	71,711.	53,892.	7,620.	10,199.
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	499,116.	375,097.	53,038.	70,981.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	61,703.	58,021.	3,260.	422.
10 Payroll taxes	81,121.	64,130.	12,392.	4,599.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	15,845.		15,845.	
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 Sch O.)	180.			180.
12 Advertising and promotion				
13 Office expenses	4,327.	669.	2,131.	1,527.
14 Information technology				
15 Royalties				
16 Occupancy	16,711.	9,807.	6,904.	
17 Travel	88,045.	80,615.	1,816.	5,614.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	35,605.	32,045.	1,068.	2,492.
23 Insurance	4,059.	4,059.		
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a SERVICE LEARNING TRIPS	274,136.	274,136.		
b OVERHEAD ALLOCATION	164,007.	189,383.	-48,577.	23,201.
c SCHOOL SUPPLIES	94,034.	93,730.	304.	
d MEALS AND ENTERTAINMENT	52,277.	49,790.	1,981.	506.
e All other expenses SEE SCH O	320,069.	277,480.	27,856.	14,733.
25 Total functional expenses. Add lines 1 through 24e	1,837,161.	1,617,069.	85,638.	134,454.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

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Part X Balance Sheet

Check 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	389,228.	1	625,143.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	134,297.	4	120,369.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	943.	9	1,913.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	754,758.		
	b Less: accumulated depreciation	400,841.		
	11 Investments - publicly traded securities	359,653.	10c	353,917.
	12 Investments - other securities. See Part IV, line 11	1,424,213.	11	1,656,988.
	13 Investments - program-related. See Part IV, line 11		12	
	14 Intangible assets		13	
	15 Other assets. See Part IV, line 11	25,160.	14	25,887.
16 Total assets. Add lines 1 through 15 (must equal line 34)	2,333,494.	15	2,784,217.	
17 Accounts payable and accrued expenses	63,252.	16	98,470.	
18 Grants payable		17		
19 Deferred revenue		18		
20 Tax-exempt bond liabilities		19		
21 Escrow or custodial account liability. Complete Part IV of Schedule D		20		
22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		21		
23 Secured mortgages and notes payable to unrelated third parties		22		
24 Unsecured notes and loans payable to unrelated third parties		23		
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	87,328.	24	198,892.	
26 Total liabilities. Add lines 17 through 25	150,580.	25	297,362.	
27 Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
27 Unrestricted net assets	1,908,233.	26	2,083,893.	
28 Temporarily restricted net assets	274,681.	27	402,962.	
29 Permanently restricted net assets		28		
30 Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.		29		
30 Capital stock or trust principal, or current funds		30		
31 Paid-in or capital surplus, or land, building, or equipment fund		31		
32 Retained earnings, endowment, accumulated income, or other funds		32		
33 Total net assets or fund balances	2,182,914.	33	2,486,855.	
34 Total liabilities and net assets/fund balances	2,333,494.	34	2,784,217.	

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Part XI Reconciliation of Net Assets

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

1 Total revenue (must equal Part VIII, column (A), line 12)	1	2,145,959.
2 Total expenses (must equal Part IX, column (A), line 25)	2	1,837,161.
3 Revenue less expenses. Subtract line 2 from line 1	3	308,798.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,182,914.
5 Net unrealized gains (losses) on investments	5	-10,455.
6 Donated services and use of facilities	6	5,598.
7 Investment expenses	7	
8 Prior period adjustments	8	
9 Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,486,855.

Part XII Financial Statements and Reporting

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

		Yes	No
1 Accounting method used to prepare the Form 990: <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 in Schedule O.			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
b Were the organization's financial statements audited by an independent accountant?	2b	X	
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 checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
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?	2c	X	
If the organization changed either its oversight process or selection process during the tax year, explain in 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?	3a		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

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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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,519,636.	1,210,423.	1,056,721.	1,075,382.	1,361,969.	6,224,131.
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	1,519,636.	1,210,423.	1,056,721.	1,075,382.	1,361,969.	6,224,131.
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)						1,863,628.
6 Public support. Subtract line 5 from line 4.						4,360,503.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	1,519,636.	1,210,423.	1,056,721.	1,075,382.	1,361,969.	6,224,131.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	6,721.	360.	330.	337.	43,488.	51,236.
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.)	-482.	14,731.	13,423.	58,099.	60,696.	146,467.
11 Total support. Add lines 7 through 10						6,421,834.
12 Gross receipts from related activities, etc. (see instructions)				12		
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here					<input type="checkbox"/>	

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	67.90 %
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	61.37 %
16a 33 1/3% support test - 2018. 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 - 2017. 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 - 2018. 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 - 2017. 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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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 in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ►

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2018. 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 ►

b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and 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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the 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 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</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 in 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 in 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 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 in (b) and (c) below, the governing body of a supported organization?		
11a		
b A family member of a person described in (a) above?		
11b		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		
11c		

Section B. Type I Supporting Organizations

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

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 in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's 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 government entity (see instructions).		
2 Activities Test. Answer (a) and (b) 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.		
2a		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
2b		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? 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 (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
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).		

DOMINICAN REPUBLIC EDUCATION AND

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)	
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 2018 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-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, 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 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

Name of the organization

**DOMINICAN REPUBLIC EDUCATION AND
MENTORING PROJECT, INC.**

Employer identification number

**** - *** 2565**

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

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

General Rule

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

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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

Name of organization

DOMINICAN REPUBLIC EDUCATION AND MENTORING PROJECT, INC.

Employer identification number

**** - *** 2565**

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>		\$ <u>69,168.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>		\$ <u>80,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>		\$ <u>77,417.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>		\$ <u>300,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>		\$ <u>30,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>6</u>		\$ <u>37,984.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

DOMINICAN REPUBLIC EDUCATION AND MENTORING PROJECT, INC.

Employer identification number

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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>7</u>		\$ <u>62,249.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>8</u>		\$ <u>34,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>9</u>		\$ <u>50,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>10</u>		\$ <u>50,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>11</u>		\$ <u>35,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>12</u>		\$ <u>50,202.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

DOMINICAN REPUBLIC EDUCATION AND MENTORING PROJECT, INC.

Employer identification number

**** - *** 2565**

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

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

Name of organization

Employer identification number

DOMINICAN REPUBLIC EDUCATION AND MENTORING PROJECT, INC.

**** - *** 2565**

Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

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

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

2018

Open to Public Inspection

Name of the organization **DOMINICAN REPUBLIC EDUCATION AND MENTORING PROJECT, INC.**

Employer identification number
****-***2565**

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).
 Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 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?

Yes No

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)?

Yes No

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 SFAS 116 (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 SFAS 116 (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 SFAS 116 (ASC 958) relating to these items:

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

▶ \$ _____

b Assets included in Form 990, Part X

▶ \$ _____

DOMINICAN REPUBLIC EDUCATION AND MENTORING PROJECT, INC.

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 are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other _____
- 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:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 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

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** Temporarily restricted 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:
- | | Yes | No |
|------------------------------------|---------------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
- b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? **3b**

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		44,763.		44,763.
b Buildings		329,507.	95,049.	234,458.
c Leasehold improvements				
d Equipment		206,866.	177,789.	29,077.
e Other		173,622.	128,003.	45,619.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				353,917.

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. (Col. (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. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, 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) STUDENT DEPOSITS	198,892.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	198,892.

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

DOMINICAN REPUBLIC EDUCATION AND
MENTORING PROJECT, INC.

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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	1,996,038.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a Net unrealized gains (losses) on investments	2a	-10,455.	
b Donated services and use of facilities	2b	134,670.	
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIII.)	2d		
e Add lines 2a through 2d	2e	124,215.	
3 Subtract line 2e from line 1		3	1,871,823.
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	274,136.	
c Add lines 4a and 4b	4c	274,136.	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	2,145,959.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

1 Total expenses and losses per audited financial statements		1	1,692,097.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a Donated services and use of facilities	2a	129,072.	
b Prior year adjustments	2b		
c Other losses	2c		
d Other (Describe in Part XIII.)	2d		
e Add lines 2a through 2d	2e	129,072.	
3 Subtract line 2e from line 1		3	1,563,025.
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	274,136.	
c Add lines 4a and 4b	4c	274,136.	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	1,837,161.

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.

PART X, LINE 2:

AS EVALUATED AGAINST CRITERIA ESTABLISHED BY PROFESSIONAL STANDARDS,

MANAGEMENT BELIEVES THERE ARE NO SIGNIFICANT TAX POSITIONS REQUIRING

ACCOUNTING RECOGNITION IN THE FINANCIAL STATEMENTS. THE ORGANIZATION'S

FEDERAL FORMS 990 ARE GENERALLY SUBJECT TO EXAMINATIONS BY THE INTERNAL

REVENUE SERVICE FOR THE YEARS ENDED JUNE 2018, 2017, AND 2016.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

PROGRAM SERVICE EXPENSES 274,136.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

PROGRAM SERVICE EXPENSES 274,136.

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2018

Department of the Treasury
Internal Revenue Service

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

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

Open to Public
Inspection

Name of the organization

**DOMINICAN REPUBLIC EDUCATION AND
MENTORING PROJECT, INC.**

Employer identification number

****-***2565**

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,	8	66	PROGRAM	YOUTH SERVICES	1,419,095.
CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,	2	13	ADMINISTRATION	MANAGING OPERATIONS	83,516.
CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,	1	3	FUNDRAISING	DEVELOPING SUPPORT	153,877.
3 a Subtotal	11	82			1,656,488.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	11	82			1,656,488.

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

Schedule F (Form 990) 2018

DOMINICAN REPUBLIC EDUCATION AND MENTORING PROJECT, INC.

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? ...
2 Did the organization have an interest in a foreign trust during the tax year? ...
3 Did the organization have an ownership interest in a foreign corporation during the tax year? ...
4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? ...
5 Did the organization have an ownership interest in a foreign partnership during the tax year? ...
6 Did the organization have any operations in or related to any boycotting countries during the tax year? ...

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

DREAM STAFF IN THE DR WORK CLOSELY WITH THE SCHOOLS THAT RECEIVE GRANT FUNDS AND WITH SCHOLARSHIP GRANTEEES AS A MEANS OF MONITORING THE USE OF SUCH FUNDS.

PART I, LINE 3:

ACCRUAL ACCOUNTING; US GAAP

DOMINICAN REPUBLIC EDUCATION AND

Schedule G (Form 990 or 990-EZ) 2018 **MENTORING PROJECT, INC.**

-*2565 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		SUENOS NYC FUNDRAISER (event type)	SANTO DOMINGO (event type)	2 (total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	209,702.	21,279.	49,136.	280,117.
	2 Less: Contributions	0.		15,795.	15,795.
	3 Gross income (line 1 minus line 2)	209,702.	21,279.	33,341.	264,322.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	87,372.	786.	24,385.	112,543.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				112,543.
11 Net income summary. Subtract line 10 from line 3, column (d)				151,779.	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

DOMINICAN REPUBLIC EDUCATION AND

Schedule G (Form 990 or 990-EZ) 2018 MENTORING PROJECT, INC.

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
- ▶ **Attach to Form 990.**
- ▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Name of the organization **DOMINICAN REPUBLIC EDUCATION AND MENTORING PROJECT, INC.** Employer identification number ****-***2565**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications	X		29,803.	PURCHASE PRICE
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (TRAVEL ITEMS)	X	22	61,017.	MARKET VALUE
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2018

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2018

Open to Public
Inspection

Name of the organization

DOMINICAN REPUBLIC EDUCATION AND
MENTORING PROJECT, INC.

Employer identification number
-*2565

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

THE DREAM PROJECT IMPROVES THE EDUCATION OF IMPOVERISHED DOMINICAN
REPUBLIC YOUTH. PROGRAMS FOR EARLY CHILDHOOD THROUGH YOUNG ADULTHOOD
EMPOWER AT-RISK CHILDREN AND YOUTH TO CREATE BETTER FUTURES THROUGH
QUALITY EDUCATION, YOUTH DEVELOPMENT AND COMMUNITY ENRICHMENT.

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

TRANSFORMATIVE EDUCATION PROGRAMS THAT COMBAT THE EFFECTS OF POVERTY.

WE BELIEVE LEARNING CHANGES LIVES. OUR PROGRAMS EXTEND FROM EARLY
CHILDHOOD THROUGH YOUNG ADULTHOOD, EMPOWERING AT-RISK CHILDREN AND
YOUTH TO CREATE A BETTER FUTURE FOR THEMSELVES AND THEIR FAMILIES
THROUGH HIGH QUALITY EDUCATION, YOUTH DEVELOPMENT, AND COMMUNITY
ENRICHMENT.

WE ENSURE SUCCESSFUL RESULTS THROUGH CAREFUL ANALYSIS, A COMMITMENT TO
LEARNING, AND CONTINUOUS IMPROVEMENT. OUR INNOVATIVE APPROACH
EFFECTIVELY ADDRESSES LOCAL NEEDS AND CAN BE REPLICATED THROUGHOUT HIGH
POVERTY GLOBAL COMMUNITIES.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

YOUTH PROGRAMS:

YOUNG STARS IS AN EXTRACURRICULAR PROGRAM THAT SUPPORTS THE ACADEMIC
GROWTH AND PERSONAL DEVELOPMENT OF 1ST - 8TH GRADE STUDENTS FROM LOCAL
PUBLIC SCHOOLS. YOUNG STARS PLACES A STRONG EMPHASIS ON LITERACY AND
DEVELOPING A CULTURE OF READING, USING AGE-APPROPRIATE LEVELED BOOKS,
GUIDED READING, AND BALANCED LITERACY METHODOLOGY TO INCREASE READING
FLUENCY AND COMPREHENSION. IN ADDITION, STUDENTS HAVE EXTENSIVE

Name of the organization DOMINICAN REPUBLIC EDUCATION AND MENTORING PROJECT, INC.	Employer identification number **_***2565
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OPPORTUNITIES TO DEVELOP THEIR PERSONAL INTERESTS THROUGH SPECIAL PROJECTS, EDUCATIONAL WORKSHOPS, FIELD TRIPS, CULTURAL EVENTS, AND COMMUNITY SERVICE. IN SOME COMMUNITIES THE PROGRAM OPERATES LIKE AN AFTERSCHOOL PROGRAM AND IN OTHER COMMUNITIES INSIDE THE PUBLIC SCHOOLS AS READING INTERVENTION PROGRAMS. STUDENTS ENROLLED IN THE YOUNG STARS PROGRAM SIGNIFICANTLY INCREASE THEIR ACADEMIC SKILLS IN LITERACY AND MATH, IMPROVE THEIR ABILITIES TO THINK INDEPENDENTLY AND CRITICALLY, ENGAGE IN PERSONAL GROWTH AND DEVELOPMENT, AND PARTNER WITH THEIR FAMILIES TO REINFORCE LEARNING IN THE HOME. THIS PROGRAM REACHES MORE THAN 350 STUDENTS ACROSS 5 DREAM-AFFILIATED SCHOOL SITES PER YEAR. INTENSIVE SUMMER SCHOOLS AND CAMPS TARGET STUDENTS AGES 8 - 14 WHO ARE MOST AT-RISK OF DROPPING OUT, INCREASING THEIR POTENTIAL TO GRADUATE FROM PRIMARY SCHOOL AND BECOME LIFELONG LEARNERS. THE FOUR-WEEK, HALF-DAY PROGRAM EMPHASIZES LITERACY AND MATH SKILLS DEVELOPMENT AND PROMOTES CRITICAL THINKING. IN ADDITION TO ACADEMIC CLASSES, STUDENTS PARTICIPATE IN A VARIETY OF ENRICHMENT ACTIVITIES INCLUDING ART, SPORTS, SWIMMING, MUSIC, AND LIFE SKILLS. THE SUMMER SCHOOL AND CAMP IS ALSO DESIGNED AS AN INTENSIVE TEACHER TRAINING EXPERIENCE FOR LOCAL PUBLIC SCHOOL TEACHERS. SELECTED TEACHERS CO-TEACH WITH EXPERIENCED PROFESSIONAL DEVELOPMENT COACHES, WHO MODEL NEW INSTRUCTIONAL AND CLASSROOM MANAGEMENT STRATEGIES AND HELP FACILITATE STUDENT-CENTERED LEARNING ENVIRONMENTS. THIS MODEL ENABLES PUBLIC SCHOOL TEACHERS TO ULTIMATELY IMPROVE THEIR INSTRUCTION, INCREASING STUDENT LEARNING THROUGHOUT THE SCHOOL YEAR. MORE THAN 800 STUDENTS ACROSS FIVE DREAM SITES PARTICIPATE IN THE SUMMER SCHOOLS AND CAMPS EACH YEAR. A GANAR, A YOUTH WORKFORCE DEVELOPMENT PROGRAM IMPLEMENTED IN MORE THAN 16 COUNTRIES ACROSS LATIN AMERICA AND THE CARIBBEAN, WAS DEVELOPED BY PARTNERS OF THE AMERICAS. DREAM CURRENTLY WORKS WITH FUNDS FROM THE

Name of the organization DOMINICAN REPUBLIC EDUCATION AND MENTORING PROJECT, INC.	Employer identification number **-***2565
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UNITED STATES AGENCY FOR INTERNATIONAL DEVELOPMENT (USAID) UNDER THE ALERTA JOVEN PROJECT TO REPLICATE THE PROGRAM ALONG THE NORTH COAST. THE PROGRAM UTILIZES SOCCER AND OTHER TEAM SPORTS TO PROVIDE YOUTH WITH THE TRAINING, SUPPORT, AND SKILLS NEEDED TO SECURE A JOB AND/OR RE-ENTER THE FORMAL EDUCATION SYSTEM. A GANAR IS COMPOSED OF FOUR PHASES THAT FOCUS ON EMPLOYABILITY SKILLS, MARKET-DRIVEN TECHNICAL AND VOCATIONAL SKILLS, SUPERVISED PROFESSIONAL INTERNSHIPS, AND FOLLOW-UP COACHING RELATED TO JOB PREPARATION, SEARCH, AND PLACEMENT. DREAM IS ONE OF SEVERAL IMPLEMENTING ORGANIZATIONS IN THE DOMINICAN REPUBLIC. OUR WORK ON THE NORTH COAST HAS GRADUATED MORE THAN 750 AT-RISK YOUTH AGES 17 - 24 VIA SIX INTENSIVE COURSES COMPRISED OF 375 HOURS EACH. OUR ENGLISH AS A SECOND LANGUAGE (ESL) PROGRAM EMPLOYS EXPERIENCED ESL TEACHERS AND VOLUNTEERS TO LEAD LANGUAGE CLASSES THAT EMPHASIZE CONVERSATION AND AUTHENTIC COMMUNICATION. NATIVE ENGLISH SPEAKERS MODEL THE LANGUAGE AND PROVIDE STUDENTS WITH OPPORTUNITIES TO BUILD THEIR CONFIDENCE IN SPEAKING A NEW LANGUAGE WHILE PRACTICING NEW WORDS AND PHRASES. ENGLISH CLASSES REGULARLY PROVIDE OPPORTUNITIES FOR STUDENTS TO PUT THEIR SKILLS TO THE TEST THROUGH ROLE-PLAYS, INTERVIEWS AND OTHER REAL-LIFE SCENARIOS. ESL CLASSES ARE OFFERED FREE TO COMMUNITY MEMBERS AND ARE ALSO INTEGRATED INTO OTHER YOUTH PROGRAMS. IN 2017, DREAM STARTED TEACHER TRAINING FOR ESL TEACHERS IN THE PUERTO PLATA PUBLIC SCHOOLS THROUGH A PARTNERSHIP WITH THE US EMBASSY AND WORLD LEARNING.

DEPORTES PARA LA VIDA (DPV) FOCUSES ON CHANGING THE KNOWLEDGE, ATTITUDES, AND PRACTICES OF YOUTH IN ORDER TO MINIMIZE THE SPREAD OF HIV/AIDS AND ENCOURAGE HEALTHY DECISION-MAKING. THE PROGRAM RECOGNIZES THAT YOUTH LEARN BEST THROUGH INTERACTIVE ACTIVITIES. THE FUN OF SPORTS AND GAMES IS LEVERAGED TO TEACH STUDENTS ABOUT HIV TRANSMISSION AND ITS

Name of the organization DOMINICAN REPUBLIC EDUCATION AND MENTORING PROJECT, INC.	Employer identification number **_***2565
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EFFECTS ON THE BODY, WHILE ALSO TEACHING THEM HOW TO AVOID RISKY PARTNERS, MANAGE RISKY SITUATIONS, REDUCE STIGMA AND DISCRIMINATION, AND ELIMINATE GENDER-BASED VIOLENCE. THE PROGRAM USES A PEER-TO-PEER EDUCATION MODEL, WHERE LOCAL YOUTH TRAINED AS DPV COACHES DELIVER THE CURRICULUM, SERVE AS MENTORS, AND DEVELOP THEIR OWN LEADERSHIP ABILITIES. THROUGH A COLLABORATION WITH PEACE CORPS, MORE THAN 350 COACHES HAVE BEEN TRAINED SINCE 2010 WITH NEARLY 2,500 YOUTH PARTICIPATING IN DPV PROGRAMS ON AN ANNUAL BASIS. THE PROGRAM HAS BEEN EXTENDED TO INCLUDE A GIRLS' CURRICULUM, UNICA, AND BOYS' CURRICULUM, LUCHADORES POR EL CAMBIO.

THE MUSIC EDUCATION PROGRAM HAS TWO STRANDS: THE IASO BACHATA ACADEMY @ DREAM, FOUNDED BY BOARD MEMBER BENJAMIN DE MENIL, AND THE CONTEMPORARY MUSIC PROGRAM. THE TWO PROGRAMS HAVE WORKED ALONG-SIDE EACH OTHER SINCE JANUARY 2013, FORMALIZING THEIR CURRICULUM AND TEACHING METHODOLOGY TO FORM YOUNG MUSICIANS ACCORDING TO EACH PROGRAM'S PARTICULAR NEEDS. IASO FOCUSES ON GUITAR, PERCUSSIONS (CONGA, TAMBURA) AND SAXOPHONE, AND THE CONTEMPORARY MUSIC PROGRAM FOCUSES ON GUITAR, BASS, DRUMS, AND PIANO.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

COMMUNITY PROGRAMS:

DREAM PUBLIC LIBRARIES ARE BUILT DIRECTLY INTO DREAM EDUCATION CENTERS OR PUBLIC SCHOOLS, SERVING STUDENTS, FAMILIES, AND COMMUNITY MEMBERS WITH A VAST SELECTION OF CHILDREN'S BOOKS AND YOUNG ADULT LITERATURE. OVER 350 STUDENTS ATTEND LIBRARY PROGRAMS, AND TEACHERS IN THE PUBLIC SCHOOLS USE THE BOOKS IN THEIR CLASSROOMS.

TEACHER TRAINING AND PROFESSIONAL DEVELOPMENT PROGRAMS ENSURE THAT TEACHERS ARE EQUIPPED WITH INNOVATIVE STRATEGIES, HAVE ACCESS TO OTHER

Name of the organization DOMINICAN REPUBLIC EDUCATION AND MENTORING PROJECT, INC.	Employer identification number **_***2565
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EFFECTIVE TEACHERS, AND RECEIVE THE REGULAR SUPPORT THAT IS CRITICAL TO DEVELOPING THEIR SKILLS AS EDUCATORS. DREAM'S TEACHER TRAINING PROGRAMS TARGET PUBLIC SCHOOL TEACHERS, FUTURE TEACHERS STUDYING EDUCATION, AND CURRENT TEACHERS IN DREAM PROGRAMS. OUR PROGRAMS USE A COMBINATION OF EXPERIENTIAL LEARNING, LESSON MODELING, WORKSHOPS, AND COACHING TO DEVELOP HIGHLY QUALIFIED TEACHERS.

THE LUCEROS (LUCHANDO POR DERECHOS HUMANOS) DOCUMENTATION PROGRAM HELPS SECURE BIRTH CERTIFICATES FOR CHILDREN AND YOUTH WHO LACK IDENTITY DOCUMENTS. DEDICATED STAFF WORK WITH FAMILIES TO COLLECT NECESSARY PAPERWORK, PROVIDING STEP-BY-STEP GUIDANCE THROUGH THE PROCESS OF DECLARING THEIR CHILD. IN ADDITION TO RESOLVING CASES, DREAM FOCUSES ON PREVENTION BY FACILITATING EDUCATIONAL WORKSHOPS ABOUT THE IMPORTANCE OF BIRTH CERTIFICATES AND THE NEED TO DECLARE CHILDREN ON TIME. DREAM ALSO ADVOCATES PROTECTING THE RIGHT TO AN IDENTITY AND A NATIONALITY FOR DOMINICAN CHILDREN OF HAITIAN DESCENT, WHOSE ACCESS TO DOCUMENTATION IS PARTICULARLY SUSCEPTIBLE TO DISCRIMINATORY PRACTICES. OUR PARENT EDUCATION PROGRAM ENCOURAGES PARENTS TO BE ACTIVE PARTNERS IN THE EDUCATION OF THEIR CHILD. THE PROGRAM FOCUSES ON SPECIFIC STRATEGIES THAT PARENTS CAN USE TO SUPPORT CHILD DEVELOPMENT, CREATE A POSITIVE HOME ENVIRONMENT, AND REINFORCE WHAT THEIR CHILD IS LEARNING AT SCHOOL. PARENT EDUCATION IS A CORE FEATURE OF THE MONTESSORI EARLY CHILDHOOD EDUCATION AND YOUNG STARS AT-RISK YOUTH PROGRAMS. REGULAR WORKSHOPS AND SPECIAL EVENTS KEEP PARENTS CONNECTED WITH THE SCHOOL. IN ADDITION, MONTESSORI PARENTS MUST COMPLETE SEVERAL HOURS OF VOLUNTEER SERVICE TO THE SCHOOL EACH MONTH. THE ESCUELITA DE PADRES PROGRAM TARGETS MOTHERS OF 2-YEAR OLDS WHO WILL EVENTUALLY ENROLL IN EARLY CHILDHOOD EDUCATION PROGRAMS. THESE INTERACTIVE SESSIONS HELP STIMULATE THE EARLY LEARNING AND DEVELOPMENT OF FUTURE MONTESSORI STUDENTS, AND

Name of the organization DOMINICAN REPUBLIC EDUCATION AND MENTORING PROJECT, INC.	Employer identification number **-***2565
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ALLOW PARENTS TO PRACTICE TECHNIQUES THAT FOSTER HEALTHY PARENT-CHILD RELATIONSHIPS AND EFFECTIVE COMMUNICATION. HOME VISITS BY TRAINED PROFESSIONALS ENSURE THAT PARENTS ARE ABLE TO SUCCESSFULLY IMPLEMENT AT HOME WHAT THEY LEARNED IN THE PROGRAM.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

MONTESSORI EARLY CHILDHOOD EDUCATION PROGRAM; DREAM'S EARLY CHILDHOOD EDUCATION PROGRAM IS BASED ON THE MONTESSORI METHOD, A CHILD-CENTERED EDUCATIONAL APPROACH DEVELOPED BY DR. MARIA MONTESSORI THAT IS BASED ON SCIENTIFIC OBSERVATIONS OF CHILDREN FROM BIRTH TO ADULTHOOD. THE MONTESSORI PHILOSOPHY IS THAT CHILDREN ARE NATURALLY EAGER FOR KNOWLEDGE AND CAPABLE OF INITIATING LEARNING IN A SUPPORTIVE, THOUGHTFULLY PREPARED LEARNING ENVIRONMENT. THE MONTESSORI APPROACH VALUES THE HUMAN SPIRIT AND THE DEVELOPMENT OF THE WHOLE CHILD - PHYSICAL, SOCIAL, EMOTIONAL, AND COGNITIVE. CERTIFIED MONTESSORI TEACHERS FACILITATE A SAFE LEARNING ENVIRONMENT IN WHICH STUDENTS CAN GROW AND DEVELOP AT THEIR OWN PACE, DEVELOPING SELF-CONFIDENCE AND DISCIPLINE AS THEY EXPLORE THE WORLD AROUND THEM. CHILDREN ARE ALSO PROVIDED WITH A HEALTHY SNACK TO FULFILL THEIR NUTRITIONAL NEEDS DURING THE DAY. MORE THAN 500 CHILDREN AGES 3-7 BENEFIT FROM MONTESSORI EARLY CHILDHOOD EDUCATION PROGRAMS AT FIVE DIFFERENT DREAM-AFFILIATED SCHOOL SITES. DREAM ALSO SUPPORTS THREE ADDITIONAL SCHOOLS IN THE COUNTRY TO GROW THEIR OWN HIGH QUALITY PROGRAM.

GLOBAL CONNECTION GROUPS: THESE TRIPS ARE OFFERED TO SCHOOLS ABROAD (USUALLY IN THE US AND CANADA) TO SEND PARTICIPANTS TO THE DOMINICAN REPUBLIC TO COMPLETE COMMUNITY SERVICE PROJECTS. PROJECTS INCLUDE TEACHING SUBJECTS IN LOCAL SCHOOLS, PROVIDING IN-SERVICE TRAINING FOR LOCAL TEACHERS, CONSTRUCTION, REPAIRS, AND PAINTING IN LOCAL

Name of the organization **DOMINICAN REPUBLIC EDUCATION AND
MENTORING PROJECT, INC.**

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****_***2565**

COMMUNITIES, AMONG OTHER PROJECTS.

FORM 990, PART VI, SECTION A, LINE 8B:

NO COMMITTEES HAVE AUTHORITY TO ACT ON BEHALF OF THE BOARD OF DIRECTORS.

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

FOR 990 IS REVIEWED BY THE PRESIDENT OF THE BOARD PRIOR TO FILING.

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

CONFLICT OF INTEREST STATEMENTS MUST BE UPDATED ANNUALLY.

FORM 990, PART VI, SECTION B, LINE 15:

**THE BOARD REVIEWS AND APPROVES THE BUDGET ANNUALLY, AND REIEWS AND UPDATES
COMPENSATION FOR KEY EMPLOYEES AT THAT TIME.**

FORM 990, PART VI, SECTION C, LINE 18:

**FINANCIAL STATEMENTS AND OTHER DOCUMENTS ARE AVAILABLE UPON REQUEST TO OUR
OFFICE. FINANCIAL STATEMENTS ARE AVAILABLE THROUGH OUR WEBSITE AND THROUGH
GUIDESTAR.ORG**

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

**FINANCIAL STATEMENTS AND OTHER DOCUMENTS ARE AVAILABLE UPON REQUEST TO OUR
OFFICE. FINANCIAL STATEMENTS ARE AVAILABLE THROUGH OUR WEBSITE AND THROUGH
GUIDESTAR.ORG.**

FORM 990, PART IX, LINE 24E, ALL OTHER FUNCTIONAL EXPENSES:

VOLUNTEER EXPENSES:

PROGRAM SERVICE EXPENSES

40,202.

Name of the organization	DOMINICAN REPUBLIC EDUCATION AND MENTORING PROJECT, INC.	Employer identification number	**_***2565
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MANAGEMENT AND GENERAL EXPENSES 194.

FUNDRAISING EXPENSES 4,001.

TOTAL EXPENSES 44,397.

COMMUNITY SUPPORT:

PROGRAM SERVICE EXPENSES 43,417.

MANAGEMENT AND GENERAL EXPENSES 933.

FUNDRAISING EXPENSES 0.

TOTAL EXPENSES 44,350.

IN-KIND TRAVEL AND SUPPLIES:

PROGRAM SERVICE EXPENSES 40,988.

MANAGEMENT AND GENERAL EXPENSES 0.

FUNDRAISING EXPENSES 0.

TOTAL EXPENSES 40,988.

STAFF DEVELOPMENT:

PROGRAM SERVICE EXPENSES 33,242.

MANAGEMENT AND GENERAL EXPENSES 2,991.

FUNDRAISING EXPENSES 1,694.

TOTAL EXPENSES 37,927.

UNIFORMS:

PROGRAM SERVICE EXPENSES 30,598.

MANAGEMENT AND GENERAL EXPENSES 2,372.

FUNDRAISING EXPENSES 0.

TOTAL EXPENSES 32,970.

Name of the organization	DOMINICAN REPUBLIC EDUCATION AND MENTORING PROJECT, INC.	Employer identification number	**_***2565
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EVENTS AND TRIPS:

<u>PROGRAM SERVICE EXPENSES</u>	<u>28,237.</u>
<u>MANAGEMENT AND GENERAL EXPENSES</u>	<u>0.</u>
<u>FUNDRAISING EXPENSES</u>	<u>0.</u>
<u>TOTAL EXPENSES</u>	<u>28,237.</u>

REPAIR AND MAINTENANCE:

<u>PROGRAM SERVICE EXPENSES</u>	<u>22,838.</u>
<u>MANAGEMENT AND GENERAL EXPENSES</u>	<u>3,755.</u>
<u>FUNDRAISING EXPENSES</u>	<u>196.</u>
<u>TOTAL EXPENSES</u>	<u>26,789.</u>

PRINTING:

<u>PROGRAM SERVICE EXPENSES</u>	<u>20,264.</u>
<u>MANAGEMENT AND GENERAL EXPENSES</u>	<u>1,302.</u>
<u>FUNDRAISING EXPENSES</u>	<u>85.</u>
<u>TOTAL EXPENSES</u>	<u>21,651.</u>

MISCELLANEOUS:

<u>PROGRAM SERVICE EXPENSES</u>	<u>3,511.</u>
<u>MANAGEMENT AND GENERAL EXPENSES</u>	<u>1,973.</u>
<u>FUNDRAISING EXPENSES</u>	<u>7,488.</u>
<u>TOTAL EXPENSES</u>	<u>12,972.</u>

PHONE AND INTERNET:

<u>PROGRAM SERVICE EXPENSES</u>	<u>6,777.</u>
<u>MANAGEMENT AND GENERAL EXPENSES</u>	<u>2,058.</u>
<u>FUNDRAISING EXPENSES</u>	<u>1,117.</u>

Name of the organization	DOMINICAN REPUBLIC EDUCATION AND MENTORING PROJECT, INC.	Employer identification number	**_***2565
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TOTAL EXPENSES 9,952.

BANK FEES:

PROGRAM SERVICE EXPENSES 129.

MANAGEMENT AND GENERAL EXPENSES 9,644.

FUNDRAISING EXPENSES 0.

TOTAL EXPENSES 9,773.

POSTAGE AND SHIPPING:

PROGRAM SERVICE EXPENSES 4,985.

MANAGEMENT AND GENERAL EXPENSES 226.

FUNDRAISING EXPENSES 152.

TOTAL EXPENSES 5,363.

UTILITIES:

PROGRAM SERVICE EXPENSES 2,292.

MANAGEMENT AND GENERAL EXPENSES 2,408.

FUNDRAISING EXPENSES 0.

TOTAL EXPENSES 4,700.

TOTAL OTHER EXPENSES ON FORM 990, PART IX, LINE 24E, COL A 320,069.

AMENDED FORM 990 - REASON FOR AMENDING

THE TAXPAYER IS AMENDING THE RETURN AS A RESULT OF THE INDEPENDENT

AUDITED FINANCIAL STATEMENTS ISSUED FOLLOWING THE ORIGINAL FILING OF

THE FORM 990. THE AMENDMENTS MADE AS A RESULT OF COMPLETED AUDIT

PROCEDURES AND ISSUANCE OF INDEPENDENT AUDITED FINANCIAL STATEMENTS ARE

AS FOLLOWS:

Name of the organization	DOMINICAN REPUBLIC EDUCATION AND MENTORING PROJECT, INC.	Employer identification number	** - ***2565
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FORM 990, PAGE 1, BOX G - GROSS RECEIPTS ARE CHANGED FROM \$2,119,956 TO \$2,258,502

FORM 990, PAGE 1, PART I, LINE 8 - CHANGED FROM \$1,314,129 TO \$1,361,969

FORM 990, PAGE 1, PART I, LINE 9 - CHANGED FROM \$479,594 TO \$528,027

FORM 990, PAGE 1, PART I, LINE 10 - CHANGED FROM \$508 TO \$43,488

FORM 990, PAGE 1, PART I, LINE 11 - CHANGED FROM \$213,182 TO \$212,475

FORM 990, PAGE 1, PART I, LINE 17 - CHANGED FROM \$1,004,068 TO \$1,069,295

FORM 990, PAGE 1, PART I, LINE 18 - CHANGED FROM \$1,771,934 TO \$1,837,161

FORM 990, PAGE 1, PART I, LINE 19 - CHANGED FROM \$235,479 TO \$308,798

FORM 990, PAGE 1, PART I, LINE 21 - CHANGED FROM \$345,795 TO \$297,362

FORM 990, PAGE 1, PART I, LINE 22 - CHANGED FROM \$2,438,422 TO \$2,486,855

FORM 990, PAGE 2, PART III, LINE 4A - EXPENSES CHANGED FROM \$846,186 TO \$871,581 AND REVENUES CHANGED FROM \$540,997 TO \$588,723

Name of the organization	DOMINICAN REPUBLIC EDUCATION AND MENTORING PROJECT, INC.	Employer identification number	** - ***2565
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FORM 990, PAGE 2, PART III, LINE 4B - EXPENSES CHANGED FROM \$349,151 TO \$368,378

FORM 990, PAGE 2, PART III, LINE 4C - EXPENSES CHANGED FROM \$374,502 TO \$377,110

FORM 990, PAGE 2, PART III, LINE 4E - TOTAL PROGRAM EXPENSES CHANGED FROM \$1,569,839 TO \$1,617,069

FORM 990, PAGE 3, PART IV, LINE 12A - THE CHECKBOX IS CHECKED "YES" ON THE AMENDED RETURN AS A RESULT OF THE COMPLETED INDEPENDENT AUDIT.

FORM 990, PAGE 9, PART VIII, LINE 1F - CHANGED FROM \$1,298,334 TO \$1,361,969

FORM 990, PAGE 9, PART VIII, LINE 1G - CHANGED FROM \$0 TO \$90,820

FORM 990, PAGE 9, PART VIII, LINE 2A - CHANGED FROM \$460,949 TO \$509,382

FORM 990, PAGE 9, PART VIII, LINE 3 - CHANGED FROM \$508 TO \$43,488

FORM 990, PAGE 9, PART VIII, LINE 1D - CHANGED FROM \$4,865 TO \$4,158

FORM 990, PAGE 9, PART VIII, LINE 12, COLUMN A - CHANGED FROM \$2,007,413 TO \$2,145,959

FORM 990, PAGE 9, PART VIII, LINE 12, COLUMN B - CHANGED FROM \$540,997

Name of the organization	DOMINICAN REPUBLIC EDUCATION AND MENTORING PROJECT, INC.	Employer identification number	** - ***2565
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TO \$588,723

FORM 990, PAGE 9, PART VIII, LINE 12, COLUMN D - CHANGED FROM \$152,287

TO \$195,267

FORM 990, PAGE 10, PART IX, LINE 24A, COLUMN B - CHANGED FROM \$265,695

TO \$274,136

FORM 990, PAGE 10, PART IX, LINE 24B, COLUMN B - CHANGED FROM \$191,582

TO \$189,383

FORM 990, PAGE 10, PART IX, LINE 24B, COLUMN C - CHANGED FROM (\$66,574)

TO (\$48,577)

FORM 990, PAGE 10, PART IX, LINE 24E, COLUMN B - CHANGED FROM \$236,492

TO \$277,480

FORM 990, PAGE 10, PART IX, LINE 25, COLUMN B - CHANGED FROM \$1,569,839

TO \$1,617,069

FORM 990, PAGE 10, PART IX, LINE 25, COLUMN C - CHANGED FROM \$67,641 TO

\$85,638

FORM 990, PAGE 11, PART X, LINE 25, COLUMN B - CHANGED FROM \$247,325 TO

\$198,892

FORM 990, PAGE 11, PART X, LINE 26, COLUMN B - CHANGED FROM \$345,795 TO

\$297,362

Name of the organization	DOMINICAN REPUBLIC EDUCATION AND MENTORING PROJECT, INC.	Employer identification number	**_***2565
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FORM 990, PAGE 11, PART X, LINE 27, COLUMN B - CHANGED FROM \$2,076,781 TO \$2,083,893

FORM 990, PAGE 11, PART X, LINE 28, COLUMN B - CHANGED FROM \$361,641 TO \$402,962

FORM 990, PAGE 11, PART X, LINE 33, COLUMN B - CHANGED FROM \$2,438,422 TO \$2,486,855

FORM 990, PAGE 12, PART XI, LINE 1 - CHANGED FROM \$2,007,413 TO \$2,145,959

FORM 990, PAGE 12, PART XI, LINE 2 - CHANGED FROM \$1,771,934 TO \$1,837,161

FORM 990, PAGE 12, PART XI, LINE 3 - CHANGED FROM \$235,479 TO \$308,798

FORM 990, PAGE 12, PART XI, LINE 5 - CHANGED FROM \$0 TO (\$10,455)

FORM 990, PAGE 12, PART XI, LINE 6 - CHANGED FROM \$20,029 TO \$5,598

FORM 990, PAGE 12, PART XI, LINE 10 - CHANGED FROM \$2,438,422 TO \$2,486,855

FORM 990, PAGE 12, PART XII, LINE 2B - MARKED "YES" ON AMENDED RETURN AND BOX CHECKED FOR "SEPARATE BASIS"

Name of the organization **DOMINICAN REPUBLIC EDUCATION AND
MENTORING PROJECT, INC.**

Employer identification number
****_***2565**

FORM 990, PAGE 12, PART XII, LINE 2C - MARKED "YES" ON AMENDED RETURN

**SCHEDULE A, PAGE 2, PART II, SECTION A, LINE 1, COLUMN E - CHANGED FROM
\$1,314,129 TO \$1,361,969**

**SCHEDULE A, PAGE 2, PART II, SECTION A, LINE 5, COLUMN F - CHANGED FROM
\$1,929,507 TO \$1,863,628**

**SCHEDULE A, PAGE 2, PART II, SECTION B, LINE 8, COLUMN E - CHANGED FROM
\$508 TO \$43,488**

**SCHEDULE A, PAGE 2, PART II, SECTION B, LINE 10, COLUMN E - CHANGED
FROM \$61,403 TO \$60,696**

**SCHEDULE A, PAGE 2, PART II, SECTION C, LINE 14 - CHANGED FROM 67.07%
TO 67.90%**

**SCHEDULE B - JETBLUE WAS RECORDED AS A CONTRIBUTOR ON THE ORIGINAL
FILING WITH NONCASH CONTRIBUTIONS OF \$67,475. THE ACTUAL AMOUNT OF
CONTRIBUTION IS \$16,020 FOR TAX YEAR 2018 WHICH IS BELOW THE REQUIRED
REPORTING THRESHOLD AND OMITTED FROM THE AMENDED SCHEDULE B.**

**SCHEDULE D, PAGE 4, PARTS XI AND XII ARE NOW COMPLETED AS A RESULT OF
THE COMPLETED INDEPENDENT AUDITED FINANCIAL STATEMENTS.**

**SCHEDULE F, PAGE 1, PART I, LINE 1 - MARKED "YES" ON THE AMENDED
RETURN, INADVERTENTLY MARKED "NO" ON ORIGINAL FILING.**

