EXTENDED TO MAY 16, 2022

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

<u>A I</u>	For the	2020 calendar year, or tax year beginning JUL I, 2020 and	ل ending	<u>UN 30, 2021</u>					
В	Check if applicable:	THREEFOLD EDUCATION FOUNDATION		D Employer identif	ication number				
	Address change	AND SCHOOL							
	Name change	Doing business as		13-61962	91				
	Initial return	Number and street (or P.O. box if mail is not delivered to street address) 260 HUNGRY HOLLOW ROAD	Room/suite	E Telephone number 845-352-5020					
_	☐return/ termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$ 10,105,707.					
Г	Amende			H(a) Is this a group r					
F	Applica tion			for subordinate					
_	pending	260 HUNGRY HOLLOW ROAD, CHESTNUT RIDGE,	NY	H(b) Are all subordinates					
$\overline{}$	Γαν.ΑνΑ	mpt status: $X = 501(c)(3)$ $S01(c)(0)$ $S01(c)(0)$ $S01(c)(0)$		1	a list. See instructions				
		WWW.THREEFOLD.ORG	01 021	H(c) Group exemption					
		organization: X Corporation Trust Association Other	I Vear		M State of legal domicile; NY				
		Summary	L 16ai	or formation. ±303	Wi State of legal dominione, 14 1				
	_	Briefly describe the organization's mission or most significant activities: THRE	EEOLD	EDIICATTONAI.	FOIINDATTON				
e S	' 2	AND SCHOOL SERVES AND ADVANCES CULTURAL R							
Governance	1 2 5	Check this box if the organization discontinued its operations or dispose							
ēr	2 (6				
Š	3 1			<u>3</u>	1				
		Number of independent voting members of the governing body (Part VI, line 1b)			209				
Activities &	5 7	otal number of individuals employed in calendar year 2020 (Part V, line 2a)			203				
Ē	6 7	otal number of volunteers (estimate if necessary)							
Ä	/a	otal unrelated business revenue from Part VIII, column (C), line 12							
	l d	Net unrelated business taxable income from Form 990-T, Part I, line 11							
	, ,	Death leaf are and supply (Death MIII Fire Ale)		Prior Year 1,052,039.	Current Year 2,239,957.				
e	8 (Contributions and grants (Part VIII, line 1h)							
ē	9 F	Program service revenue (Part VIII, line 2g)		6,476,177.					
Revenue	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		411,728.					
	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,402,666.					
		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		9,342,610.					
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.				
	1	Senefits paid to or for members (Part IX, column (A), line 4)		0.	0.				
es	15 5	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		5,919,846.					
Expenses	16 a F	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.				
ă X	. b 1	otal fundraising expenses (Part IX, column (D), line 25)		2 201 460	2 171 622				
ш	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,281,469.					
	18	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		9,201,315.					
_		Revenue less expenses. Subtract line 18 from line 12		141,295.	472,646.				
Assets or			Ве	ginning of Current Year	End of Year				
Sset	20 1	otal assets (Part X, line 16)		14,614,226.	15,163,557.				
T A	-	otal liabilities (Part X, line 26)		2,364,372.	2,369,365.				
Net		Net assets or fund balances. Subtract line 21 from line 20		12,249,854.	12,794,192.				
	art II	Signature Block							
	-	ties of perjury, I declare that I have examined this return, including accompanying schedules			y knowledge and belief, it is				
true	, correct	, and complete. Declaration of preparer (other than officer) is based on all information of wh	iich preparer	has any knowledge.					
		Signature of officer		Data					
Sig		,		Date					
Her	e	ERIC SILBER, EXECUTIVE DIRECTOR Type or print name and title							
		7 31 1	T i	Data la l					
_	. L	Print/Type preparer's name Preparer's signature		Date Check [PTIN				
Paid	- F	N. THERESE WOLFE	2/28/22 self-emplo						
	·	Firm's name UHY ADVISORS NY, INC.	Firm's EIN ▶	14-1555429					
Use	Only	Firm's address ONE HUDSON CITY CENTRE, SUITE 20	4		0 000 1565				
		HUDSON, NY 12534		Phone no. 51	.8-828-1565				
May	the IR	S discuss this return with the preparer shown above? See instructions			X Yes No				

Га	Check if Schedule O contains a response or note to any line in this Part III
_	<u> </u>
1	Briefly describe the organization's mission: THREEFOLD EDUCATIONAL FOUNDATION AND SCHOOL SERVES AS THE UMBRELLA
	ORGANIZATION FOR GREEN MEADOW WALDORF SCHOOL, EURYTHMY SPRING VALLEY
	POND, FIBER CRAFT STUDIO, OTTO SPECHT SCHOOL, HOLDER HOUSE, AND
	PFEIFFER CENTER. THE ORGANIZATION PROVIDES SUPPORT SERVICES FOR THE
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 3,271,249. including grants of \$) (Revenue \$) (Revenue \$)
	GREEN MEADOW WALDORF SCHOOL: INDEPENDENT K-12 SCHOOL, SERVING
	APPROXIMATELY 225 STUDENTS DURING THE 2020-2021 FISCAL YEAR.
4b	(Code:) (Expenses \$ 1,089,298. including grants of \$) (Revenue \$ 1,391,051.)
	OTTO SPECHT SCHOOL: INDEPENDENT ELEMENTARY SCHOOL THAT SERVES CHILDREN
	WITH LEARNING DIFFERENCES.
4c	(Code:) (Expenses \$240,761. including grants of \$) (Revenue \$176,191.)
70	EURYTHMY SPRING VALLEY: AN ADULT EDUCATION PROGRAM AND PERFORMING
	ENSEMBLE.
	
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 1,751,943. including grants of \$) (Revenue \$ 1,978,251.)
4e	Total program service expenses ► 6,353,251.
	Form 990 (2020)

Form 990 (2020) AND SCHOOL
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
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? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	<u> </u>		
Ü	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	٣		
3	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
		9		x
40	If "Yes," complete Schedule D, Part IV	-		125
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40	х	
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	- 22	
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	l	37	
_	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			1 37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
		-		-

orm 990 (Cklist of Require	d Schedules	13-6196291	Page
i ditiv	Once	oklist of fiequile	a schedules _{(continue}	ea)	

THREEFOLD EDUCATION FOUNDATION

		$\overline{}$	Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			,,
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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? If "Yes," complete	23		x
24 a	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		1
2 70	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		x
b		24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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? If "Yes," complete			l
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			\ _{3,7}
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	07		x
20	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		
28	instructions, for applicable filing thresholds, conditions, and exceptions):			
•	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
а	"Yes," complete Schedule L, Part IV	28a		X
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			<u>-</u> -
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			,,
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	051		
26	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	36		x
37	If "Yes," complete Schedule R, Part V, line 2	30		1
31	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	-		<u></u> -
-	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai	rt 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	<u></u>		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
		_	$\alpha\alpha$	

Form 990 (2020) AND SCHOOL
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	209					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	Х			
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)						
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			За		X		
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	O		3b				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthority	over, a					
	financial account in a foreign country (such as a bank account, securities account, or other financial a	.ccount)?		4a		X		
b	If "Yes," enter the name of the foreign country							
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Advanced in the Financi	ccounts (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction			5b		X		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e organiz	ation solicit			,,		
	any contributions that were not tax deductible as charitable contributions?			6a		X		
b	If "Yes," did the organization include with every solicitation an express statement that such contribution							
_	were not tax deductible?			6b				
7	Organizations that may receive deductible contributions under section 170(c).			_		₹.		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser			7a		X		
D				7b				
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it wat to file Form 8282?	•		70		х		
٨		7d		7c		25		
d	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or			7e				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f				
	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								
		-		8				
9	Sponsoring organizations maintaining donor advised funds.							
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a				
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b				
10	Section 501(c)(7) organizations. Enter:							
а	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:							
		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						
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	I I		12a				
	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.			120				
а	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.			13a				
h	Enter the amount of reserves the organization is required to maintain by the states in which the							
b	organization is licensed to issue qualified health plans	13b						
c	Enter the amount of reserves on hand	13c						
	Did the second in the second of the description of the second of the sec			14a		Х		
	If "Yes," has it filed a Form 720 to report these payments? <i>If</i> "No," <i>provide an explanation on Schedul</i>			14b				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner							
	excess parachute payment(s) during the year?			15		х		
	If "Yes," see instructions and file Form 4720, Schedule N.			_				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	: income?	,	16		Х		
	If "Yes," complete Form 4720, Schedule O.							

Form 990 (2020) AND SCHOOL

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

<u> </u>							X
Sec	tion A. Governing Body and Management						
		ı	ı	٦ ـ ١		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		6			
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.						
b	Enter the number of voting members included on line 1a, above, who are independent	1b		4			
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		Х
3	Did the organization delegate control over management duties customarily performed by or under the	direc	t supervision				
	of officers, directors, trustees, or key employees to a management company or other person?				3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 wa	s filed?	¨ [4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's ass			`` Г	5		Х
6	Did the organization have members or stockholders?			`` Г	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap			•			
	more members of the governing body?				7a		Х
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, st			`			
-					7b		х
8	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the yea			٠ ١	75		
		-	=		8a	Х	
_				- 1	8b	X	
b	Each committee with authority to act on behalf of the governing body?			∵	OD	-22	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read				_		х
800	organization's mailing address? If "Yes," provide the names and addresses on Schedule O				9		Λ
360	tion B. Policies (This Section B requests information about policies not required by the Internal Re	<u>venue</u>	Code.)			.,	
	5111			٦		Yes	No X
	Did the organization have local chapters, branches, or affiliates?			·	10a		
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters	s, affiliates,				
	· · · · · · · · · · · · · · · · · · ·			⊦	10b		37
	Has the organization provided a complete copy of this Form 990 to all members of its governing body	/ betoi	re filing the form?	- 1	11a		Х
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.						
	Did the organization have a written conflict of interest policy? If "No," go to line 13				12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise				12b		X
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	'es," a	lescribe				
	in Schedule O how this was done			.	12c		X
13	Did the organization have a written whistleblower policy?			.	13	X	
14	Did the organization have a written document retention and destruction policy?			.	14		X
15	Did the process for determining compensation of the following persons include a review and approva	l by in	dependent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
	The organization's CEO, Executive Director, or top management official				15a		X
b	Other officers or key employees of the organization			.	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangements	nent w	vith a				
	taxable entity during the year?			. [16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat	e its p	articipation				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	izatior	า'ร				
	exempt status with respect to such arrangements?				16b		
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ▶NY						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar	nd 990	-T (Section 501(c)	(3)s	only)	availal	ble
	for public inspection. Indicate how you made these available. Check all that apply.						
	X Own website Another's website X Upon request Other (explain	on So	chedule O)				
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		,	and	financ	ial	
	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 boo	ks an	d records				
	LAUREN CIBORSKI - 845-352-5020		-				
	260 HUNGRY HOLLOW ROAD, CHESTNUT RIDGE, NY 10977						

AND SCHOOL

13-6196291

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Form 990 (2020) 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.

See instructions for the order in which to list the persons above.

Check this box if neither the organization	ation nor any related	orga	niza	tion	con	nper	sate	ed any current officer, d	irector, or trustee.	-
(A)	(B)		(C) Position					(D)	(E)	(F)
Name and title	Average	(do	not c	heck	more	than o	one	Reportable	Reportable	Estimated
	hours per	box, unless person is bot officer and a director/trus			is both or/trus	n an tee)	compensation	compensation	amount of	
	week	_	T			Π	, , , , , , , , , , , , , , , , , , ,	from the	from related organizations	other compensation
	(list any hours for	direct				_		organization	(W-2/1099-MISC)	from the
	related	ee or	stee			nsate		(W-2/1099-MISC)	(** 2, 1000 111100)	organization
	organizations	trust	nal tru		oyee	om pe		,		and related
	below	Individual trustee or director	Institutional trustee	Je	Key employee	Highest compensated employee	ner			organizations
	line)	lndi	lust	Officer	Key	High	Former			
(1) ERIC SILBER	40.00	-		l				04 006		- 100
EXECUTIVE DIRECTOR	0.00			Х		┝		91,286.	0.	5,138.
(2) JEANETTE RODRIGUEZ	2.00							60 240		4 015
DIRECTOR	0.00	Х				┝		69,349.	0.	4,015.
(3) ELIZABETH HALL	2.00							61 106		2 420
PRESIDENT	40.00	Х		Х		├		61,186.	0.	3,438.
(4) LAUREN CIBORSKI	40.00	-		х				EE 670	0.	_
CFO (5) ELSA MACAULEY	1.00			^				55,678.	0.	0.
VICE PRESIDENT	1.00	X		х				26,522.	0.	0.
(6) DORJE GLASSMAN	2.00							20,3220	•	
TREASURER		х		х				0.	0.	0.
(7) MELISSA LYONS	2.00									
RECORDING SECRETARY		Х		Х				0.	0.	0.
(8) MATT UPPENBRINK	1.00									
DIRECTOR		X						0.	0.	0.
(9) TARI STEINRUECK	1.00								_	_
DIRECTOR		Х		Х		_		0.	0.	0.
		-								
_		-				┢				
		-								
						_				
		-								
						\vdash				
		1								
						_				
		-								
			<u> </u>]			

AND SCHOOL Form 990 (2020)
Part VII Section 13-6196291 Page 8

ı aı	Section A. Officers, Directors, Trus	tees, Key Em	<u> oloy</u>	ees,	anc	<u> Hig</u>	ghes	st C	ompensated Employee	S (continued)				
	(A) Name and title	(B) Average hours per	Average Position (do not check more than one box, unless person is both an						(D) Reportable compensation	(E) Reportable compensation			(F) stimate nount	
		week (list any hours for related organizations below line)	tee or director	er lustitutional trustee	Officer		Highest compensated snatty		from the organization (W-2/1099-MISC)	from related organization (W-2/1099-MI	าร	fr org an	other pensa om the anizat d relate anization	e ion ed
		,	<u>=</u>	드	0	ž	工品	Ŧ.						
			<u> </u>											
			-											
			<u> </u>											
	0.14.4.4							L	304,021.		0.	1	2,5	0 1
	Subtotal Total from continuation sheets to Part VI								0.		0.		4, J.	0.
	Total (add lines 1b and 1c)							<u> </u>	304,021.		0.	1	2,5	91.
2	Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable	9			0
	compensation from the organization												Yes	No
3	Did the organization list any former officer,	•	,	,	•	,	,	٠		,				v
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su											3		X
	and related organizations greater than \$150	•		•								4		Х
5	Did any person listed on line 1a receive or a rendered to the organization? If "Yes." com									dual for services		5		Х
Sec	tion B. Independent Contractors	prote Corrodan		<u> </u>	,0,,,	<i></i>	011							
1	Complete this table for your five highest co the organization. Report compensation for										pensat	tion fro	om	
	(A)								(B)			((_
	Name and business	address	NC	ONE	<u> </u>				Description of s	ervices		ompe	nsatio	n
								+						
	Total number of independent contractors (ii	ncluding but n	 ot lir	nited	d to	thos	se lis	ted	above) who received mo	ore than				
	\$100,000 of compensation from the organization	· ·				(•					

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THREEFOLD EDUCATION FOUNDATION AND SCHOOL

Form 990 (2020) AND SCH
Part VIII Statement of Revenue

			Check if Schedule O contain	s a response o	or note to anv lin	e in this Part VIII			
						(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
							function revenue	business revenue	sections 512 - 514
SS	1	_	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues						
S S			Fundraising events		12,888.				
fts,			Related organizations		22,000.				
ij gi					1,201,982.				
ons,			Government grants (contribution		1,201,302.				
utio er (T	All other contributions, gifts, grants,		1 025 007				
ĕŧ			similar amounts not included above		1,025,087.				
ont		_	Noncash contributions included in lines 1a-1		62,893.	2 220 057			
O g		n	Total. Add lines 1a-1f			2,239,957.			
					Business Code	5 200 050	5 200 050		
<u>c</u> e	2 a TUITION INCOME, NET 611710 b FEE INCOME 611710					5,388,959.	5,388,959.		
erv		b	FEE INCOME		611710	845,654.	845,654.		
ı S.		С							
ran 3ev		d							
Program Service Revenue		е							
Ē		f	All other program service revenue	Э					
		g	Total. Add lines 2a-2f		>	6,234,613.			
	3		Investment income (including div	idends, intere	st, and				
			other similar amounts)			21,139.			21,139.
	4		Income from investment of tax-ex	empt bond p	roceeds				
	5		Royalties						
				(i) Real	(ii) Personal				
	6	а	Gross rents 6a	1,160,631.					
		b	Less: rental expenses 6b	0.					
		С	Rental income or (loss) 6c	1,160,631.					
		d	Net rental income or (loss)			1,160,631.	1,160,631.		
	7	а	Gross amount from sales of	i) Securities	(ii) Other				
			assets other than inventory 7a	328,245.	4,936.				
		b	Less: cost or other basis						
ē			and sales expenses 7b	282,126.	5,722.				
en		С	Gain or (loss) 7c	46,119.	-786.				
Şe			Net gain or (loss)			45,333.			45,333.
her Revenue			Gross income from fundraising event						
퉏	_		including \$ 12,88	I .					
			contributions reported on line 1c						
			Part IV, line 18	· I	0.				
		b	Less: direct expenses		0.				
			Net income or (loss) from fundrai			0.			
			Gross income from gaming activi						
	·	_	Part IV, line 19						
		h	Less: direct expenses						
			Net income or (loss) from gaming						
			Gross sales of inventory, less ret						
	10	а	and allowances						
		h							
			Less: cost of goods sold						
\dashv		Ü	Net income or (loss) from sales o	iniveniory	Business Code				
sn	4.4	_	OTHER INCOME		611710	86,603.	86,603.		
je on	11		SCHOOL LUNCH INCOME		611710	· · · · · · · · · · · · · · · · · · ·	29,583.		
Miscellaneous Revenue			SCHOOL LONCH INCOME		011/10	29,583.	23,303.		
sce Be		C	All all and an area						
Ξ̈́			All other revenue			116 106			
		e	Total. Add lines 11a-11d		P	116,186.	7 511 420		66 472
	12		Total revenue. See instructions			9,817,859.	7,511,430.	0.	66,472.

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 (B)
Program service
expenses (**D**)
Fundraising (C) Management and general expenses (A) Total expenses Do not include amounts reported on lines 6b. 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 304,021. 60,804. 228,016. 15,201. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and 3,546,514. 4,767,123. 823,878. 396,731. persons described in section 4958(c)(3)(B) Other salaries and wages 7 Pension plan accruals and contributions (include 131,412. 89,364. 31,844. 10,204. section 401(k) and 403(b) employer contributions) 47,298. 414,189. 147,600. 609,087. Other employee benefits 9 361,937. 246,122. 87,709. 28,106. 10 Payroll taxes 11 Fees for services (nonemployees): Management 27,930. 27,930. Legal 102,608. 102,608. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 169,873. 68,765. column (A) amount, list line 11g expenses on Sch O.) 238,638. 114,256. 103,373. 10,883. Advertising and promotion 12 153,871. 106,170. 35,391. 12,310. 13 Office expenses 89,961. 61,176. 21,800. 6,985. Information technology 14 Royalties 15 914,246. 535,981. 358,775. 19,490. 16 Occupancy 4,820. 4.820. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 19 39,057. 2,332. 36,725. 20 Payments to affiliates 21 483,265. 338,286. 140,147. 4,832. Depreciation, depletion, and amortization 22 258,159. 141,988. 113,591. 2,580. 23 Other expenses. Itemize expenses not covered 24 above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 239,357. 65,208. 22,681. 151,468. SUPPLIES STUDENT EXPENSES 171,778. 171,778. 105,607. 105,607. BAD DEBT 87,374. 87,374. COST OF GOODS SOLD 6,907. 140,706.119,405. 14,394. All other expenses 9,345,213. 6,353,251. 2,407,754. 584,208. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. if following SOP 98-2 (ASC 958-720)

Form 990 (2020)
Part X Balance Sheet

Pai	ιΛ	Balance Sneet				
		Check if Schedule O contains a response or note to any	line in this Part X		······	
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1,609,907.	1	2,710,965.
	2	Savings and temporary cash investments		555,273.	2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		1,047,440.	4	666,437.
	5	Loans and other receivables from any current or former				
		trustee, key employee, creator or founder, substantial co	ontributor, or 35%			
		controlled entity or family member of any of these perso	ns		5	
	6	Loans and other receivables from other disqualified pers	sons (as defined			
		under section 4958(f)(1)), and persons described in sect	ion 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
Ã	9	Prepaid expenses and deferred charges		112,230.	9	23,103.
	10a	Land, buildings, and equipment: cost or other	40 465 044			
			18,165,011.	10 150 060		10 001 100
	b		7,890,538.	10,450,062.	10c	10,274,473.
	11	Investments - publicly traded securities		818,619.	11	1,488,579.
	12	Investments - other securities. See Part IV, line 11			12	
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets		20 605	14	0
	15	Other assets. See Part IV, line 11		20,695.	15	15 163 557
	16	Total assets. Add lines 1 through 15 (must equal line 30	14,614,226.	16	15,163,557.	
	17	Accounts payable and accrued expenses		396,896.	17	216,849.
	18	Grants payable	230,499.	18 19	522,715.	
	19	Deferred revenue		230, 433.	20	322,713.
	20 21	Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of			21	
	22	Loans and other payables to any current or former office			-21	
Liabilities	22	trustee, key employee, creator or founder, substantial co				
billi		controlled entity or family member of any of these perso			22	
Lia	23	Secured mortgages and notes payable to unrelated third		629,118.	23	529,301.
	24	Unsecured notes and loans payable to unrelated third p		1,021,982.	24	1,004,545.
	25	Other liabilities (including federal income tax, payables to				
		parties, and other liabilities not included on lines 17-24).				
		of Schedule D		85,877.	25	95,955.
	26	Total liabilities. Add lines 17 through 25		2,364,372.	26	2,369,365.
		Organizations that follow FASB ASC 958, check here				
ses		and complete lines 27, 28, 32, and 33.				
anc	27	Net assets without donor restrictions		11,686,592.	27	11,978,587.
Bal	28	Net assets with donor restrictions	563,262.	28	815,605.	
pu		Organizations that do not follow FASB ASC 958, chec				
F		and complete lines 29 through 33.	J			
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds			29	
set	30	Paid-in or capital surplus, or land, building, or equipmen	t fund		30	
t As	31	Retained earnings, endowment, accumulated income, o		40.010.00	31	40 -01
Se	32	Total net assets or fund balances		12,249,854.	32	12,794,192.
	33	Total liabilities and net assets/fund balances		14,614,226.	33	15,163,557. Form 990 (2020)

THREEFOLD EDUCATION FOUNDATION AND SCHOOL

Form 990 (2020) AND SCHOOL 13-6196291 Page **12**

Pa	T XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		
			0 01	п о	- 0
1	Total revenue (must equal Part VIII, column (A), line 12)	1	9,81		
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,34		
3	Revenue less expenses. Subtract line 2 from line 1	3			<u>46.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	12,24		
5	Net unrealized gains (losses) on investments	5	7	<u>4,8</u>	<u>13.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	-	3,1	21.
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	12,79	4,1	92.
Pa	rt 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: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.			
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:				
	Separate basis Consolidated basis 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:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	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 on Scho	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?	-	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		1

Form **990** (2020)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public

THREEFOLD EDUCATION FOUNDATION **Employer identification number** Name of the organization AND SCHOOL 13-6196291 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 10 activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

Pa	art II Support Schedule for	Organizations	Described in	Sections 170(b)(1)(A)(iv) and	d 170(b)(1)(A)(vi)
	(Complete only if you checke			-	n failed to qualify	under Part III. If the	organization
<u> </u>	fails to qualify under the tests	listed below, plea	se complete Part I	II.)			
	ction A. Public Support		T	1	T	1	
	endar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
_	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization'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						
_	Total. Add lines 1 through 3						
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)						
	Public support. Subtract line 5 from line 4. ction B. Total Support						
		() 0040	41.0047	() 0040	(1) 0040	() 0000	(6) T
	endar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
_	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
_	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
40	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. Add lines 7 through 10	-1- (:				40	
	Gross receipts from related activities,	•	,			12	
13	First 5 years. If the Form 990 is for the	· ·		· ·	•		▶□
Sec	organization, check this box and stop ction C. Computation of Publi				•••••		
	Public support percentage for 2020 (I			column (f))		14	%
	Public support percentage from 2019					15	
	a 33 1/3% support test - 2020. If the o						
102	stop here. The organization qualifies					nore, check this box	
,	33 1/3% support test - 2019. If the		-				
	and stop here. The organization qual					o or more, check thi	
17-	a 10% -facts-and-circumstances test		• •				
.,,	and if the organization meets the fact						
	meets the facts-and-circumstances te				•	_	▶ □
ŀ	10% -facts-and-circumstances test	-	•		-	17a and line 15 is	
•	more, and if the organization meets the	-					. 5, 5 5.

organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization **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

Schedule A (Form 990 or 990-EZ) 2020

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.)

Se	ction A. Public Support	siow, piease comp	Diete Part II.)				
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	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 organ- ization's benefit and either paid to or expended on its behalf						
	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5	<u> </u>					
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						
t	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 Se	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
t	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	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 5 years. If the Form 990 is for the	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) organizatio	on,
_	check this box and stop here						>
	ction C. Computation of Publi					 	
	Public support percentage for 2020 (li			column (f))		15	<u>%</u>
	Public support percentage from 2019					16	%
	ction D. Computation of Inves					T T	
	Investment income percentage for 20					17	<u>%</u>
	Investment income percentage from 2					18	% 7 is not
198	19a 33 1/3% support tests - 2020. 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						
k	more than 33 1/3%, check this box ar 33 1/3% support tests - 2019. If the	=	-				▶ ∟
	line 18 is not more than 33 1/3%, chec						
20	Private foundation. If the organizatio	n did not check a	box on line 14, 19	a, or 19b, check th	nis box and see ins	structions	>

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **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)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? 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.
- 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)? 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **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? If "Yes," provide detail in Part VI.
- 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? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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))? If "Yes," provide detail in Part VI.
- **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? If "Yes." provide detail in **Part VI.**
- 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? If "Yes," provide detail in Part VI.
- 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)? If "Yes," answer line 10b below.
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
За		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9с		
10a		
401		
10b n 990 or 99	0-F7\	2020

	rt IV Supporting Organizations (continued)			age o
	Continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		100	110
	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
_	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion 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			
800	the supported organization(s). tion D. All Type III Supporting Organizations	1		
360	tion b. All Type in 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	1		
2	organization's governing documents in effect on the date of notification, to the extent not previously provided? Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
2	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 line 2, above, did the organization's supported organizations have a			
Ū	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		
Sec	tion 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)			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction	s).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	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 line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	OL.		
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

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Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Support	ing Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	Nov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu		•	
Sect	ion 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		
Sect	ion 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		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrate	d Type III supporting orga	nization (see

Schedule A (Form 990 or 990-EZ) 2020

instructions).

Fai	t v Type III Non-Functionally integrated 509	(a)(3) Supporting Organ	iizations (continu	<u>ied) </u>	
Sect	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported			
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose		3		
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2020	s	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
<u>a</u>	From 2015				
<u>b</u>	From 2016				
<u>c</u>	From 2017				
<u>d</u>	From 2018				
<u> e</u>	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
<u>h</u>	Applied to 2020 distributable amount				
i_	Carryover from 2015 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$				
	Applied to underdistributions of prior years				
	Applied to 2020 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, 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 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
8	and 4c. Breakdown of line 7:				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
_					

Schedule A (Form 990 or 990-EZ) 2020

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Schedule A (Form 990 or 990-EZ) 2020 AND SCHOOL 13-619<u>6291 Page 8</u> Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. Part VI (See instructions.)