

Moses & Schreiber LLP
One Huntington Quadrangle Suite 4S05
Melville, NY 11747
516-352-7700

January 26, 2021

CONFIDENTIAL

FRACTURED ATLAS, INC.
228 PARK AVENUE SOUTH #56651
NEW YORK, NY 10003

Dear Tim:

We have prepared the following returns from information provided by you without verification or audit.

Return of Organization Exempt From Income Tax (Form 990)
Annual Filing for Charitable Organizations (CHAR500)

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements. Attached are instructions for signing and filing each return. Please follow those instructions carefully.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

If you have any questions, or if we can be of assistance in any way, please call.

Sincerely,

Moses & Schreiber LLP

Filing Instructions

FRACTURED ATLAS, INC.

Exempt Organization Tax Return

Taxable Year Ended August 31, 2020

Date Due: July 15, 2021

Remittance: None is required. Your Form 990 for the tax year ended 8/31/20 shows no balance due.

Signature: You are using a Personal Identification Number (PIN) for signing your return electronically. Form 8879-EO, IRS *e-file* Signature Authorization for an Exempt Organization should be signed and dated by an authorized officer of the organization and returned by fax or mail:

Moses & Schreiber LLP
One Huntington Quadrangle Suite 4S05
Melville, NY 11747
516-352-7297

Important: Your return will not be filed with the IRS until the signed Form 8879-EO has been received by this office.

Other: Your return is being filed electronically with the IRS and is not required to be mailed. If you Mail a paper copy of your return to the IRS it will delay the processing of your return.

FRACTURED ATLAS, INC.
228 PARK AVENUE SOUTH #56651
NEW YORK, NY 10003

Department of the Treasury
Internal Revenue Service Center
Ogden, UT 84201-0027



Form **8879-EO**

**IRS e-file Signature Authorization
for an Exempt Organization**

OMB No. 1545-1878

For calendar year 2019, or fiscal year beginning 9/01 2019, and ending 8/31 20 20

2019

Department of the Treasury
Internal Revenue Service

**u Do not send to the IRS. Keep for your records.
u Go to www.irs.gov/Form8879EO for the latest information.**

Name of exempt organization

Employer identification number

FRACTURED ATLAS, INC.

11-3451703

Name and title of officer

**TIM CYNOVA
CO-CEO/BOARD MEMBER**

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a**, **2a**, **3a**, **4a**, or **5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b**, **2b**, **3b**, **4b**, or **5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a Form 990 check here	<input checked="" type="checkbox"/>	b Total revenue , if any (Form 990, Part VIII, column (A), line 12)	1b	25,733,892
2a Form 990-EZ check here	<input type="checkbox"/>	b Total revenue , if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here	<input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here	<input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here	<input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2019 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize **MOSES & SCHREIBER LLP** to enter my PIN **51703** as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature }

Date } **12/21/20**

Part III Certification and Authentication

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

11544271216

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2019 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature }

Date } **12/21/20**

ERO Must Retain This Form — See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2019)

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

THE MISSION OF FRACTURED ATLAS IS TO MAKE THE JOURNEY FROM INSPIRATION TO LIVING PRACTICE MORE ACCESSIBLE AND EQUITABLE FOR ARTISTS AND CREATIVES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **21,199,958** including grants of \$ **19,607,170**) (Revenue \$ **21,753**)
FRACTURED ATLAS, INC. CURRENTLY SERVES AS FISCAL SPONSOR TO OVER 3,750 ART GROUPS AND INDEPENDENT ARTISTS IN ALL DISCIPLINES ACROSS THE COUNTRY. BEYOND THE ANNUAL MEMBERSHIP DUES, THERE IS NO ADDITIONAL FEE TO APPLY, AND THE PROGRAM CHARGES A LOW 8% ADMIN FEE ON ALL FUNDS RAISED. CHARACTERIZED BY EFFICIENT ONLINE ACCESS AND ARTISTIC AUTONOMY, FRACTURED ATLAS SPONSORSHIP PROGRAM GOES BEYOND BASIC FISCAL OVERSIGHT TO PROVIDE A VARIETY OF TECHNICAL ASSISTANCE TOOLS THAT BUILD CAPACITY AND SUSTAINABILITY AMONG EMERGING ARTISTS AND ART ORGANIZATIONS.

4b (Code:) (Expenses \$ **277,585** including grants of \$) (Revenue \$ **179,650**)
PROCESSING CONSULTATION/NO OBJECTION LETTERS FOR O & P VISAS FOR INDIVIDUALS APPLYING TO WORK AS ARTISTS IN THE UNITED STATES.

4c (Code:) (Expenses \$ **677,635** including grants of \$) (Revenue \$ **210,000**)
ARTFUL.LY IS AN ONLINE SYSTEM TO MANAGE TICKETS, DONATIONS, AND CONTACTS. IT'S A SIMPLE, STREAMLINED WAY TO ARTISTS AND ARTS ORGANIZATIONS TO KEEP TRACK OF THEIR EVENTS AND CONNECT WITH PEOPLE WHO SUPPORT THEIR WORK.

4d Other program services (Describe on Schedule O.)

(Expenses \$ **449,507** including grants of \$) (Revenue \$ **85,779**)

4e Total program service expenses **u 22,604,685**

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>	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
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>		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>		X
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		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)? <i>If "Yes," complete Schedule D, Part X</i>		X
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>	X	
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>	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	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? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
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>		X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	X	
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	X	
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
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		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a 37		
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 on 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 u 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?	X	
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?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		X
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?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X

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

Section A. Governing Body and Management

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

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
10b	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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	X	
15b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	X	
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?	X	
16b	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?	X	

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **u AK, AL, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **u**

FRACTURED ATLAS, INC 228 PARK AVENUE SOUTH, #56651
NEW YORK NY 10003 212-277-8020

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 nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(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) SHAWN ANDERSON	40.00									
CTO/BOARD MEMBER	0.00	X		X			170,420	0	8,521	
(2) TIM CYNOVA	40.00									
CO-CEO/BOARD MEMBER	0.00	X		X			164,543	0	8,227	
(3) PALLAVI SHARMA	40.00									
CPO/BOARD MEMBER	0.00	X		X			170,420	0	0	
(4) LAUREN RUFFIN	40.00									
CERO/BOARD MEMBER	0.00	X		X			164,543	0	0	
(5) RAMPHIS CASTRO	0.00									
BOARD MEMBER	0.00	X					0	0	0	
(6) MUKTI KHAIRE	0.00									
BOARD MEMBER	0.00	X					0	0	0	
(7) CHRISTOPHER J. MACKIE, PHD	0.00									
BOARD MEMBER	0.00	X					0	0	0	
(8) ELIZABETH SCOTT	0.00									
TREASURER	0.00	X		X			0	0	0	
(9) HOLLY SIDFORD	0.00									
VICE CHAIR	0.00	X		X			0	0	0	
(10) E. ANDREW TAYLOR	0.00									
BOARD MEMBER	0.00	X					0	0	0	
(11) RUSSELL WILLIS TAYLOR	0.00									
CHAIR	0.00	X		X			0	0	0	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(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			
(12) LISA YANCEY	0.00									
SECRETARY	0.00	X		X			0	0	0	
1b Subtotal							669,926		16,748	
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							669,926		16,748	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **u4**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **u**

0

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	1a Federated campaigns	1a					
	b Membership dues	1b	728,001				
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	1,021,519				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	22,838,210				
	g Noncash contributions included in lines 1a-1f	1g	\$ 844,333				
	h Total. Add lines 1a-1f	u	24,587,730				
Program Service Revenue	2a PROGRAM SERVICE FEES	Business Code	497,599	497,599			
	b NON DEDUCTIBLE PORTION OF CON		102,151	102,151			
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f	u	599,750				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	u	191,364			191,364	
	4 Income from investment of tax-exempt bond proceeds	u					
	5 Royalties	u					
	6a Gross rents	(i) Real					
		(ii) Personal					
		6b Less: rental expenses	6b				
	c Rental inc. or (loss)	6c					
	d Net rental income or (loss)	u					
	7a Gross amount from sales of assets other than inventory	(i) Securities		4,643,696			
		(ii) Other					
		b Less: cost or other basis and sales exps.	7b	4,258,148	30,909		
	c Gain or (loss)	7c	385,548	-30,909			
	d Net gain or (loss)	u	354,639	354,639			
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a					
b Less: direct expenses		8b					
c Net income or (loss) from fundraising events	u						
9a Gross income from gaming activities. See Part IV, line 19	9a						
	b Less: direct expenses	9b					
c Net income or (loss) from gaming activities	u						
10a Gross sales of inventory, less returns and allowances	10a						
	b Less: cost of goods sold	10b					
c Net income or (loss) from sales of inventory	u						
Miscellaneous Revenue	11a MISCELLANEOUS	Business Code	409	409			
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d	u	409				
12 Total revenue. See instructions	u	25,733,892	954,798	0	191,364		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	12,499,407	12,499,407		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	7,029,964	7,029,964		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	77,798	77,798		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,488,865	1,617,762	373,330	497,773
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	86,071	55,946	12,911	17,214
9 Other employee benefits	169,677	110,290	25,451	33,936
10 Payroll taxes	178,751	116,188	26,813	35,750
11 Fees for services (nonemployees):				
a Management				
b Legal	44,320	31,239	5,606	7,475
c Accounting	16,100	10,465	2,415	3,220
d Lobbying				
e Professional fundraising services. See Part IV, line 7				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	507,966	393,399	49,427	65,140
12 Advertising and promotion	128,869	84,593	18,975	25,301
13 Office expenses	19,591	13,221	2,730	3,640
14 Information technology				
15 Royalties				
16 Occupancy	140,206	91,134	21,031	28,041
17 Travel	28,745	21,893	2,937	3,915
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	26,461	17,199	3,970	5,292
23 Insurance	14,399	9,359	2,160	2,880
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a SERVICE CHARGES & PROCESS	322,728	264,999	24,741	32,988
b TELECOM & INTERNET	107,591	71,760	15,356	20,475
c DUES & SUBSCRIPTIONS	98,830	66,371	13,911	18,548
d LICENSES AND PERMITS	15,884	11,395	1,924	2,565
e All other expenses	15,271	10,303	2,129	2,839
25 Total functional expenses. Add lines 1 through 24e	24,017,494	22,604,685	605,817	806,992
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance 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	2,588,748	1	2,674,035
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	221,668	4	159,432
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b	46,244	10c
	11 Investments—publicly traded securities	9,312,300	11	11,711,396
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets	466,259	14	455,134
	15 Other assets. See Part IV, line 11	819,575	15	69,284
16 Total assets. Add lines 1 through 15 (must equal line 33)	13,454,794	16	15,069,281	
Liabilities	17 Accounts payable and accrued expenses	326,694	17	38,862
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	202,500	25	
	26 Total liabilities. Add lines 17 through 25	529,194	26	38,862
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	-165,707	27	295,277
	28 Net assets with donor restrictions	13,091,307	28	14,735,142
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	12,925,600	32	15,030,419
33 Total liabilities and net assets/fund balances	13,454,794	33	15,069,281	

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	25,733,892
2	Total expenses (must equal Part IX, column (A), line 25)	2	24,017,494
3	Revenue less expenses. Subtract line 2 from line 1	3	1,716,398
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	12,925,600
5	Net unrealized gains (losses) on investments	5	388,421
6	Donated services and use of facilities	6	50,247
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-50,247
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	15,030,419

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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
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?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

u Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization

FRACTURED ATLAS, INC.

Employer identification number

11-3451703

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

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

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

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

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) u	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	19,997,281	23,201,947	24,974,010	27,451,046	24,587,730	120,212,014
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	19,997,281	23,201,947	24,974,010	27,451,046	24,587,730	120,212,014
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						120,212,014

Section B. Total Support

Calendar year (or fiscal year beginning in) u	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4	19,997,281	23,201,947	24,974,010	27,451,046	24,587,730	120,212,014
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	165,591	142,677	190,836	215,107	191,364	905,575
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.)						
11 Total support. Add lines 7 through 10						121,117,589
12 Gross receipts from related activities, etc. (see instructions)					12	1,522,236
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 2019 (line 6, column (f) divided by line 11, column (f))	14	99.25 %
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	99.23 %
16a 33 1/3% support test—2019. 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—2018. 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—2019. 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—2018. 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) u	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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) u	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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 2019 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2019. 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—2018. 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)*

- 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?
 - b** A family member of a person described in (a) above?
 - 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.*

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations

- 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.*
- 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.*

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

- 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).*

	Yes	No
1		

Section D. All Type III Supporting Organizations

- 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?
- 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).*
- 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.*

	Yes	No
1		
2		
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** 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.*
 - c** 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.*
 - 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.*
- 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.*
 - 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.*

	Yes	No
2a		
2b		
3a		
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).		

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 2019 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-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required-explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
a	From 2014			
b	From 2015			
c	From 2016			
d	From 2017			
e	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2015			
b	Excess from 2016			
c	Excess from 2017			
d	Excess from 2018			
e	Excess from 2019			

Schedule B
 (Form 990, 990-EZ,
 or 990-PF)
 Department of the Treasury
 Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

2019

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

Name of the organization FRACTURED ATLAS, INC.	Employer identification number 11-3451703
--	---

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 33¹/₃% 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).

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization FRACTURED ATLAS, INC.	Employer identification number 11-3451703
--	---

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
1	FIDELITY CHARITABLE GIFT FUND P.O. BOX 770001 CINCINNATI OH 45277	\$ 803,067	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	JESSICA CARES FOUNDATION 245 OLD HOOK ROAD STE 2A WESTWOOD NJ 07675	\$ 550,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

**SCHEDULE C
(Form 990 or 990-EZ)**

Political Campaign and Lobbying Activities

OMB No. 1545-0047

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2019

Department of the Treasury
Internal Revenue Service

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
 Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization FRACTURED ATLAS, INC.	Employer identification number 11-3451703
--	---

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) u \$
- 3 Volunteer hours for political campaign activities (see instructions)

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 u \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 u \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities u \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities u \$
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b u \$
- 4 Did the filing organization file Form 1120-POL for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

Schedule C (Form 990 or 990-EZ) 2019

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)	0													
b Total lobbying expenditures to influence a legislative body (direct lobbying)	0													
c Total lobbying expenditures (add lines 1a and 1b)	0													
d Other exempt purpose expenditures	0													
e Total exempt purpose expenditures (add lines 1c and 1d)	0													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:30%;">If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)														
h Subtract line 1g from line 1a. If zero or less, enter -0-														
i Subtract line 1f from line 1c. If zero or less, enter -0-														
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount	2,000				2,000
b Lobbying ceiling amount (150% of line 2a, column (e))					3,000
c Total lobbying expenditures				0	
d Grassroots nontaxable amount	600				600
e Grassroots ceiling amount (150% of line 2d, column (e))					900
f Grassroots lobbying expenditures				0	

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE C, PART I-A, LINE 1

IN PRIOR YEARS, FRACTURED ATLAS WORKED THROUGH LOBBY EFFORTS AT THE NEW YORK CITY AND NEW YORK STATE LEVEL TO EDUCATE POLICYMAKERS ABOUT THE IMPORTANCE OF CULTURAL SECTOR INFRASTRUCTURE AND FUNDING ON LOCAL, STATE, AND FEDERAL LEVELS. WE HAVE LOBBIED FOR POLICIES AND LEGISLATION THAT WILL HELP ARTISTS AND ARTS ORGANIZATIONS MAKE WORK AND CONTRIBUTE TO THEIR

Part IV Supplemental Information *(continued)*

COMMUNITIES. DURING THIS FISCAL YEAR, FRACTURED ATLAS DID NOT WORK WITH ANY LOBBYING SERVICES.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

u 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.

u Attach to Form 990.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization

Employer identification number

FRACTURED ATLAS, INC.

11-3451703

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.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 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?, 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?

Part II Conservation Easements.

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 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. (Sub-rows 2a-2d), 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year u, 4 Number of states where property subject to conservation easement is located u, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year u, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year u \$, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items., 1b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 u \$, (ii) Assets included in Form 990, Part X u \$, 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 u \$, b Assets included in Form 990, Part X u \$

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange program
 - 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 Yes No

Part V Endowment Funds.

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

- | | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|---|------------------|----------------|--------------------|----------------------|---------------------|
| 1a Beginning of year balance | | | | | |
| b Contributions | | | | | |
| c Net investment earnings, gains, and losses | | | | | |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | | | | | |
| f Administrative expenses | | | | | |
| g End of year balance | | | | | |
- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment **u**
 - b** Permanent endowment **u**
 - c** Term endowment **u**
- 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 | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

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

Part VII Investments – Other Securities.

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

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

Part VIII Investments – Program Related.

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

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

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.) ... u	

Part X Other Liabilities.

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

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

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

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

u Attach to Form 990.

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

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization

FRACTURED ATLAS, INC.

Employer identification number

11-3451703

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
CANADA					
(1)	1	1	GRANTS TO RECIPIENT		4,386
COLUMBIA					
(2)	1	1	GRANTS TO RECIPIENT		330
ISRAEL					
(3)	1	1	GRANTS TO RECIPIENT		10,400
UNITED KINGDOM					
(4)	1	1	GRANTS TO RECIPIENT		22,916
SLOVENIA					
(5)	1	1	GRANTS TO RECIPIENT		2,740
PUERTO RICO					
(6)	1	1	GRANTS TO RECIPIENT		4,660
SWEDEN					
(7)	1	1	GRANTS TO RECIPIENT		856
SPAIN					
(8)	1	1	GRANTS TO RECIPIENT		10
ITALY					
(9)	1	1	GRANT TO RECIPIENT		27,600
NETHERLANDS					
(10)	1	1	GRANT TO RECIPIENT		100
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal	10	10			73,998
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	10	10			73,998

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

Schedule F (Form 990) 2019

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **u** _____

3 Enter total number of other organizations or entities **u** _____

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) GRANTS FOR PROJECTS	CANADA	3	8,136				
(2) GRANTS FOR PROJECTS	COLUMBIA	1	330				
(3) GRANTS FOR PROJECTS	ISRAEL	2	10,400				
(4) GRANTS FOR PROJECTS	ITALY	1	27,600				
(5) GRANTS FOR PROJECTS	PUERTO RICO	1	4,660				
(6) GRANTS FOR PROJECTS	SPAIN	1	10				
(7) GRANTS FOR PROJECTS	SWEDEN	2	856				
(8) GRANTS FOR PROJECTS	UNITED KINGDOM	1	22,916				
(9) GRANTS FOR PROJECTS	NETHERLANDS	1	100				
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

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 3 - ACTIVITIES PER REGION

REGION	EXPENDITURES	INVESTMENTS
CANADA	\$ 4,386	\$ 0
COLUMBIA	\$ 330	\$ 0
ISRAEL	\$ 10,400	\$ 0
UNITED KINGDOM	\$ 22,916	\$ 0
SLOVENIA	\$ 2,740	\$ 0
PUERTO RICO	\$ 4,660	\$ 0
SWEDEN	\$ 856	\$ 0
SPAIN	\$ 10	\$ 0
ITALY	\$ 27,600	\$ 0
NETHERLANDS	\$ 100	\$ 0

PART V - ADDITIONAL INFORMATION

WHETHER THE FUNDED ARTIST IS OUTSIDE OR INSIDE THE UNITED STATES, THE PROCEDURE IS THE SAME. FRACTURED ATLAS REQUIRES SUPPORT FROM THE ARTIST FOR GRANT MONEY RELEASED TO THE ARTIST.

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
u Attach to Form 990.
u Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization

FRACTURED ATLAS, INC.

Employer identification number

11-3451703

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	23 ELEPHANTS THEATRE COMPANY PO BOX 1939 SAN ANSELMO CA 94979	81-5011533		11,939				
(2)	2D4D 7080 SW TIERRA DEL MAR DRIVE BEAVERTON OR 97007	83-2697631		15,178				
(3)	8-BALL COMMUNITY, INC. 59 EAST 4TH ST NEW YORK NY 10003	81-3963763		11,837				
(4)	A CAPPELLA ACADEMY 1880 CENTURY PARK EAST LOS ANGELES CA 90067	46-2987726		9,074				
(5)	A MZUNGU FILM LLC 86 HORATIO ST. NEW YORK NY 10014	81-0814793		11,415				
(6)	A NIGHT OF FIREFLIES PRODUCTIONS 3254 34TH STREET, 2ND FLOOR ASTORIA NY 11106	45-4662666		8,800				
(7)	A&A BALLET 310 S. MICHIGAN AVENUE CHICAGO IL 60604	81-3341406		31,168				
(8)	ACTING FOR KIDS AND TEENS 1633 NW GLISAN PORTLAND OR 97209	82-4589746		5,305				
(9)	ACTIVE VERB, LLC ERIN COLLEEN BUCKL 427 6TH STREET BROOKLYN NY 11215	84-4064951		19,370				

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **u 48**
- 3 Enter total number of other organizations listed in the line 1 table **u 990**

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

Schedule I (Form 990) (2019)

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
u Attach to Form 990.
u Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

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Inspection**

Name of the organization

FRACTURED ATLAS, INC.

Employer identification number

11-3451703

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	ACTOR'S EXPRESS, INC. 887 WEST MARIETTA STREET SUITE J-10 ATLANTA GA 30318	58-1808173		7,821				
(2)	ADAM MARKS, INC. 720 FORT WASHINGTON AVE. NEW YORK NY 10040	83-1833137		6,584				
(3)	AFRO HOUSE PRODUCTIONS, LLC 4431 HARCOURT ROAD BALTIMORE MD 21214	45-3950242		22,284				
(4)	AH FILMS 2146 SW HARBOR PLACE PORTLAND OR 97201	81-0964058		5,775				
(5)	AI FOR THE PEOPLE 666 HANCOCK STREET BROOKLYN NY 11233	84-3671638		18,400				
(6)	ALOFT DANCE 3428 W MCLEAN CHICAGO IL 60647	27-2819500		29,546				
(7)	ALOHA FRIDAY GALLERY LLC 3212 LOULU STREET HONOLULU HI 96822	81-4030388		8,078				
(8)	AMBASSABURGH MICROARTS D/B/A PHILLT 12121 FRANKSTOWN AVE PITTSBURGH PA 15235	84-4019533		13,414				
(9)	AMERICAN ABSTRACT ARTISTS C/O GARY GOLKIN NEW YORK NY 10012	13-3389638		43,384				

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **u**
- 3 Enter total number of other organizations listed in the line 1 table **u**

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

Schedule I (Form 990) (2019)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
u Attach to Form 990.
u Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization

FRACTURED ATLAS, INC.

Employer identification number

11-3451703

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	ANGELA HARRIELL 235 LEONARD STREET BROOKLYN NY 11211	27-2792860		6,348				
(2)	ANNA FRANTS 901 BRICKELL KEY BLVD MIAMI FL 33131	57-9173318		281,659				
(3)	APOYONLINE - ASSOCIATION FOR HERITA 11712 STONEWOOD LANE ROCKVILLE MD 20852	26-3676026		14,700				
(4)	AREA CAPITAL LLC DBA THE WORLD AROU 65 EAST 55TH STREET NEW YORK NY 10022	82-2963029		48,924				
(5)	ARKANSASSTAGED 129 S. GREGG FAYETTEVILLE AR 72701	81-4970940		19,811				
(6)	AROESTE MUSIC LLC 57 GREEN RIVER VALLEY ROAD ALFORD MA 01230	80-0009833		17,176				
(7)	ART HANDLER MAGAZINE LLC 29 HALSEY STREET BROOKLYN NY 11216	47-1633687		11,219				
(8)	ARTICULATE THEATRE COMPANY LLC 379 LEFFERTS AVE BROOKLYN NY 11225	46-4891932		16,150				
(9)	ARTISAN GALLERY 218 LLC 218 5TH STREET DES MOINES IA 50265	47-5022557		5,589				

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **u**
- 3 Enter total number of other organizations listed in the line 1 table **u**

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

Schedule I (Form 990) (2019)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
u Attach to Form 990.
u Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047
2019
**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization

FRACTURED ATLAS, INC.

Employer identification number

11-3451703

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	ARTISTIC DREAMS INTERNATIONAL, INC. 2753 BROADWAY 167 NEW YORK NY 10025	45-2558520		9,200				
(2)	ARTISTS AT PLAY, LLC P.O. BOX 572 ALHAMBRA CA 91802	46-5445311		5,717				
(3)	ARTRAGEOUS WITH NATE, LLC 326 N KENYON AVENUE INDIANAPOLIS IN 46219	45-5261857		48,950				
(4)	ARTS FOR ALL ABILITIES CONSORTIUM L 262 W. 107 STREET NEW YORK NY 10025	81-4976214		12,451				
(5)	ARTS.BLACK LLC. 1099 PARKER DETROIT MI 48214	81-4397217		45,521				
(6)	AS BALLETT NEW YORK LTD. 300 W. 38TH ST. NEW YORK NY 10018	45-3031889		18,328				
(7)	ASBURY PARK DANCE FESTIVAL 96 FRANKLIN AVENUE OCEAN GROVE NJ 07756	83-3232264		10,932				
(8)	ASPIRING YOUNG ARTISTS PROJECT 1324 SOUTH CLEVELAND STREET PHILADELPHIA PA 19146	81-2971664		5,985				
(9)	ASSOCIATION OF ARTS ADMINISTRATION 37 KNEELAND STREET CRANSTON RI 02905	95-3416945		35,000				

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **u**
- 3 Enter total number of other organizations listed in the line 1 table **u**

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Schedule I (Form 990) (2019)

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
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OMB No. 1545-0047
2019
**Open to Public
Inspection**

Name of the organization **FRACTURED ATLAS, INC.** Employer identification number **11-3451703**

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	ASYLUM FILM 2425 GOLDEN RAIN ROAD WALNUT CREEK CA 94595	84-2460592		9,300				
(2)	ATLANTA ART PAPERS, INC PO BOX 5748 ATLANTA GA 31107	58-1404850		7,625				
(3)	ATLANTA CHAMBER PLAYERS INC PO BOX 5438 ATLANTA GA 31107	58-1280281		5,002				
(4)	ATLANTA CONTEMPORARY ART CENTER INC 535 MEANS STREET NW ATLANTA GA 30318	58-1174492		13,534				
(5)	ATLANTA PRESERVATION CENTER INC. 327 ST. PAUL AVENUE ATLANTA GA 30312	58-1387857		5,286				
(6)	ATLANTA YOUNG SINGERS OF CALLANWOLD 1085 PONCE DE LEON AVENUE ATLANTA GA 30306	58-1249295		8,079				
(7)	AUTOMAT LLC 319 N 11TH STREET PHILADELPHIA PA 19107	47-3556508		5,232				
(8)	AZILIA FILMS LLC P. O. BOX 853 COLUMBUS GA 31902	81-3556400		13,500				
(9)	BABOON BABOON LLC 2261 MOUNTAIN OAK DR. LOS ANGELES CA 90068	84-2629660		46,500				

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(1)	BALLET AND BEYOND NYC INC. 309 W. 75TH ST. NEW YORK NY 10023	81-1705519		15,933				
(2)	BARCLAY BRASS 412 MARIETTA PL NW WASHINGTON DC 20011	81-1496387		9,862				
(3)	BATTLE SOUNDS, INC 68 JAY STREET BROOKLYN NY 11201	11-3487488		51,357				
(4)	BE MUSIC, LLC DBA CONSENSES 150 LAKE VIEW AVENUE CAMBRIDGE MA 02138	27-2938893		64,836				
(5)	BENJAMIN HOLLIDAY WARDELL 3508 W DIVERSEY AVE CHICAGO IL 60647	82-3773043		19,059				
(6)	BESPOKEPLAYS, LLC 9622 OLYMPIC BLVD BEVERLY HILLS CA 90212	83-2002656		6,372				
(7)	BEYOND CATEGORY PRODUCTIONS, LLC 739 MILFORD STREET LOS ANGELES CA 90042	82-5183409		19,328				
(8)	BGSQD 113 HENRY ST. NEW YORK NY 10002	46-0848189		5,116				
(9)	BIELLO MARTIN STUDIO LLC 148 N. 3RD STREET PHILADELPHIA PA 19106	22-3928886		5,492				

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(1)	BIRCH HOUSE IMMERSIVE LLC 4838 N DAMEN AVE CHICAGO IL 60625	37-1176311		5,345				
(2)	BLACK THEATRE COMMONS P.O. BOX 773 NEW YORK NY 10108	82-3372634		30,800				
(3)	BLACK WOMXN FLOURISH LLC 2410 N CHARLES STREET BALTIMORE MD 21218	85-0699007		7,225				
(4)	BLOOMBARS 3222 11TH STREET NW WASHINGTON DC 20001	27-0287369		15,800				
(5)	BMOREART LLC 648 REGESTER AVENUE BALTIMORE MD 21212	46-2443453		226,090				
(6)	BMOREART LLC 648 REGESTER AVENUE BALTIMORE MD 21212	46-2443453		19,490				
(7)	BOSTON FESTIVAL ORCHESTRA 59A STRATHMORE RD. APT. 2 BRIGHTON MA 02135	84-3601675		6,629				
(8)	BRAIN CHANGE FILM, LLC 422 ST MARKS AVE BROOKLYN NY 11238	80-3379871		29,697				
(9)	BRAND RENEWABLE LLC 6420 MAGENTA LANE AUSTIN TX 78739	84-2453807		8,881				

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(1)	BROADWAY CHAMBER PLAYERS, INC. 101 W12TH STREET NEW YORK NY 10011	46-4697187		9,452				
(2)	BROOKLYN METAL WORKS 640 DEAN ST. BROOKLYN NY 11238	27-1417593		10,400				
(3)	BROWN GIRL RECOVERY LLC 780 CONCOURSE VILLAGE WEST BRONX NY 10451	81-5313698		95,690				
(4)	BUILD-A-BAND MUSIC EDUCATION, INC. 545 LINCOLN HIGHWAY COATESVILLE PA 19320	27-3013255		7,384				
(5)	BUILDING BETTER PEOPLE PRODUCTIONS PO BOX 5912 ANNAPOLIS MD 21403	47-5127921		6,931				
(6)	BUILDING PERFORMANCE WORKSHOP P.O. BOX 87024 ATLANTA GA 30337	26-4205528		9,305				
(7)	BULLY MOVIE OUTREACH, INC. 38 MESEROLE STREET, APT. 2D BROOKLYN NY 11206	45-5570588		10,000				
(8)	BULLY MOVIE OUTREACH, INC. 18 W 27TH ST 2ND FLOOR NEW YORK NY 10023	45-5570588		5,500				
(9)	BURIED SEED PRODUCTIONS 3090 KING ST BERKELEY CA 94703	84-2592461		16,705				

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(1)	BURNAWAY INC. 928 PONCE DE LEON AVENUE NE ATLANTA GA 30306	27-1057775		6,003				
(2)	CABINET OF CURIOSITY 211 S TAYLOR OAK PARK IL 60302	83-1316132		22,400				
(3)	CAFE CIII LLC 103 WAVERLY PLACE NEW YORK NY 10011	13-4092564		13,250				
(4)	CAPE DANCE FESTIVAL, LLC 710 WARBURTON AVE 4D YONKERS NY 10701	46-2792328		14,034				
(5)	CARDINAL LLC 1758 PARK AVENUE BALTIMORE MD 21217	82-1595562		9,233				
(6)	CASTLE OF OUR SKINS, INC 7 BOWDOIN AVE DORCHESTER MA 02121	83-4164245		38,264				
(7)	CHAIR-O-PLANE MUSIC, INC. 400 WEST 43RD STREET NEW YORK NY 10036	86-1100404		14,020				
(8)	CHAPEL THEATER LLC 4107 SE HARRISON ST MILWAUKIE OR 97222	82-1455728		11,615				
(9)	CHILDREN'S MUSEUM OF ATLANTA, INC. 275 CENTENNIAL OLYMPIC PARK DRIVE N ATLANTA GA 30313	58-1785484		5,100				

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(1)	CHOCONUT CREEK INC. PO BOX 517 TIVOLI NY 12583	20-8501190		6,000				
(2)	CINEVECTOR, LLC 281 LEFFERTS AVENUE BROOKLYN NY 11225	83-3332223		9,913				
(3)	CIRCUSENSE 423 ATLANTIC AVE BROOKLYN NY 11217	81-4566698		21,375				
(4)	CLAPPING HANDS 3348 ALSTON CHAPEL ROAD PITTSBORO NC 27312	47-4098979		20,145				
(5)	CLOCKS IN MOTION PERCUSSION INC. 1218 BAY RIDGE RD. MADISON WI 53716	46-1481171		5,909				
(6)	COMBUSTION COLLECTIVE, LLC 7 DEKALB AVE BROOKLYN NY 11201	83-1109888		11,719				
(7)	COMMOTION - COMMUNITY IN MOTION 6704 WEIMER DRIVE RALEIGH NC 27617	84-4005067		7,211				
(8)	COMPLEXIONS PRODUCTIONS, INC. 22 WILSON DRIVE NEW ROCHELLE NY 10801	82-0836029		46,727				
(9)	CONSTELLATIONS CHAMBER CONCERTS 1768 LANG PL NE WASHINGTON DC 20002	84-2885513		9,050				

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(1)	COOPER-HEWITT, NATIONAL DESIGN MUSE 2 EAST 91ST ST. NEW YORK NY 10128	53-0206027		243,168				
(2)	CREATENET STUDIO LLC 223 SECOND AVENUE NEW YORK NY 10003	47-3862048		16,590				
(3)	CREATIVE CATALYST LLC 434 BRODERICK STREET SAN FRANCISCO CA 94117	84-3329306		10,580				
(4)	CREATIVE WRITING, INC. 12438 KILLION ST VALLEY VILLAGE CA 91607	95-4643017		13,500				
(5)	CRENSHAW DAIRY MART, LLC 8623 S. CRENSHAW BLVD INGLEWOOD CA 90350	84-3149208		105,365				
(6)	CRITICAL FREQUENCY, LLC P.O. BOX 277 KINGS BEACH CA 96143	82-4661886		28,100				
(7)	CROCODILE RIVER MUSIC & MEDIA, LLC 44 PORTLAND STREET WORCESTER MA 01608	90-0762449		148,065				
(8)	CULTUREHOUSE INCORPORATED 30 WALNUT STREET SOMERVILLE MA 02143	84-2003390		31,907				
(9)	CULTUREHOUSE INCORPORATED 30 WALNUT STREET SOMERVILLE MA 02143	84-2003390		5,382				

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(1)	CUTTME PRODUCTIONS LLC PO BOX 36120 DETROIT MI 48236	45-2401295		9,862				
(2)	DADS GARAGE, INC. 569 EZZARD STREET SE ATLANTA GA 30312	58-2244770		6,736				
(3)	DAFNISON MUSIC, INC. 5129 VAN BUREN STREET HOLLYWOOD FL 33021	26-2523288		33,145				
(4)	DANCE CANVAS INC 171 AUBURN AVENUE ATLANTA GA 30303	26-2425825		9,701				
(5)	DANCE KIDS INC. PO BOX 6225 CARMEL CA 93921	77-0334683		29,601				
(6)	DANSE THEATRE SURREALITY, INC. 5906 41ST AVE WOODSIDE NY 11377	84-2174148		23,017				
(7)	DARK STAR FROM HARLEM, LLC 432 EAST 88TH STREET, APT. 408 NEW YORK NY 10128	82-3203389		6,987				
(8)	DEATH OF CLASSICAL LLC 4615 CENTER BOULEVARD LONG ISLAND CITY NY 11109	83-2344591		25,625				
(9)	DIE JIM CROW INC 636 KOSCIUSZKO ST. BROOKLYN NY 11221	83-2361185		7,284				

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(1)	DIGITAL PILGRIM PRODUCTIONS, LLC 139 MARVIN AVENUE UNIONDALE NY 11553	83-4486757		8,487				
(2)	DIMENSIONAL DANCE LLC 32 FOXCROFT RUN AVON CT 06001	61-1782218		9,198				
(3)	DIRECTORS GATHERING 3308 W. QUEEN LN PHILADELPHIA PA 19129	46-5215656		14,078				
(4)	DISABILITY DANCE WORKS LLC ALICE J 3995 PAGE MILL ROAD LOS ALTOS CA 94022	47-3772433		41,815				
(5)	DNAWORKS, LLC 1617 PARK PLACE AVE FORT WORTH TX 76110	26-3181751		64,416				
(6)	DO GOOD LLC 368 BROADWAY NEW YORK NY 10013	47-2522555		54,671				
(7)	DONKEYSADDLE PROJECTS LLC 5932 42ND AVE SW SEATTLE WA 98136	30-1157615		94,362				
(8)	DPICT, LLC 117 WEST ST EASTHAMPTON MA 01027	30-0663414		6,500				
(9)	DRAG OUT THE VOTE 210 LEE BARTON DRIVE AUSTIN TX 78704	84-4397686		20,804				

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Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	DRAW TO HELP 77 BLUE DIAMOND LANE COLUMBUS NC 28722	32-0587483		5,544				
(2)	EARSACE ENSEMBLE 2101 NELSON ST. RALEIGH NC 27610	81-3685131		14,703				
(3)	EARTH AND AIR: STRING ORCHESTRA 33775 REDBRIDGE LANE SOLON OH 44139	83-2515222		5,500				
(4)	ECLECTIC BREW 215A CARROLL STREET SE ATLANTA GA 30312	27-0359275		147,853				
(5)	EDDIE ADAMS WORKSHOP ORGANIZATION, POB 499 JEFFERSONVILLE NY 12748	83-4540185		29,381				
(6)	EDGE IN MOTION PRODUCTIONS LLC 318 WEST 47TH STREET NEW YORK NY 10036	82-2633375		11,073				
(7)	EIDIA HOUSE INC. 426 EAST 9TH STREET #1C NEW YORK NY 10009	56-2420211		15,706				
(8)	ELISION PRODUCTIONS 3401 E. VIA PALOMITA TUCSON AZ 85718	81-4094804		46,810				
(9)	ELISION PRODUCTIONS 3401 E. VIA PALOMITA TUCSON AZ 85718	81-4094804		7,098				

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **u**
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Schedule I (Form 990) (2019)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
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Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
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OMB No. 1545-0047

2019

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization

FRACTURED ATLAS, INC.

Employer identification number

11-3451703

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(1)	ELMIRA RAHIM 9400 NATIONAL BLVD LOS ANGELES CA 90034	83-2894882		7,904				
(2)	ELYSIAN CAMERATA 1109 WALLACE DRIVE FORT WASHINGTON PA 19034	45-5104443		8,800				
(3)	ENACT, INC. 630 NINTH AVENUE NEW YORK NY 10036	13-3422660		14,172				
(4)	ENCOURAGE MEDIA LLC 11 HALES ROAD WESTPORT CT 06880	83-1813057		18,798				
(5)	ENDELCLOCK, INC. 411 ST. JOHNS PL.#7 BROOKLYN NY 11238	45-5491500		11,511				
(6)	ENDLESS FIELD 72 ELMORE AVE CROTON ON HUDSON NY 10520	82-3876073		12,794				
(7)	ENTER GRACE YOGA 311 WEST 127TH #406 NEW YORK NY 10027	46-3649450		6,600				
(8)	ESPERANZA DANCE PROJECT PO BOX 90064 TUCSON AZ 85752	82-2280520		15,180				
(9)	EUREKA ENSEMBLE CORPORATION 3 GERRY'S LANDING ROAD CAMBRIDGE MA 02138	81-4063626		28,365				

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(1)	EVIDENCE INC 1368 FULTON STREET BROOKLYN NY 11216	11-3334921		7,200				
(2)	FAITH MATTERS NETWORK LLC P.O. BOX 120801 NASHVILLE TN 37212	82-1994801		454,584				
(3)	FILM ETC LLC 89-19 89 AVENUE WOODHAVEN NY 11421	46-1264876		7,000				
(4)	FIREBOYS LLC 3785 PARKDALE ROAD CLEVELAND HEIGHTS OH 44121	81-3178560		10,712				
(5)	FLEMING CONSULTING INC. 10 RUTGERS ST. NEW YORK NY 10002	46-1795631		71,522				
(6)	FLUX PROJECTS, INC. 575 BOULEVARD #30 ATLANTA GA 30312	27-0347975		11,676				
(7)	FOUNDATION FOR DIVERSITY IN THE ART APT. 1D NEW YORK NY 10025-2919	83-0687806		14,910				
(8)	FOUNDATION FOR DIVERSITY IN THE ART 170 DARLING ROAD SALEM CT 06420	83-0687806		12,910				
(9)	FOXHOG PRODUCTIONS 220 EAST 73RD STREET NEW YORK NY 10021	81-0735143		43,799				

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(1)	FREE RANGE HUMANS INC 145 WICOMICO CT NEW MARKET MD 21774	84-5014680		18,553				
(2)	GARY INTERNATIONAL BLACK FILM FESTI 6515 52ND AVE. S. SEATTLE WA 98118	27-3892089		8,955				
(3)	GAS GALLERY LLC 715 S. NORMANDIE AVE LOS ANGELES CA 90005	82-2549536		8,300				
(4)	GATHERING ROOTS RETREAT, LLC 2201 S MAIN ST, APT 103 SEATTLE WA 98144	84-3594171		34,214				
(5)	GEORGIA LAWYERS FOR THE ARTS 887 W MARIETTA STREET NW SUITE J-10 ATLANTA GA 30318	51-0141509		13,646				
(6)	GLASS CEILINGS, LLC 9730 HAYVENHURST AVE NORTHRIDGE CA 91343	84-2249521		24,732				
(7)	GLO ATL, INC. 1054 KIRKWOOD AVE SE ATLANTA GA 30316	27-0272642		9,387				
(8)	GLORY EDIM, WELL-READ BLACK GIRL, L 165 COURT STREET BROOKLYN NY 11201	81-4165668		7,300				
(9)	GOSTIA LLC 411 14TH AVE E SEATTLE WA 98112	47-3724089		20,054				

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(1)	GRIFFIN THEATRE, CHRISTOPHER EVERET 142 BANFF ST BEAR DE 19701	84-2838224		10,649				
(2)	GRX IMMERSIVE LABS 17412 VENTURA BLVD. ENCINO CA 91316	83-1695649		81,682				
(3)	GUAYAKI SUSTAINABLE RAINFOREST PROJ 6782 SEBASTOPOL AVE SEBASTOPOL CA 95472	77-0560794		23,726				
(4)	HAMLET ISN'T DEAD 425 E 75TH ST NEW YORK NY 10021	46-2231944		8,597				
(5)	HAPPENSTANCE THEATER INC. 12718 VEIRS MILL RD. ROCKVILLE MD 20853	20-4639247		34,640				
(6)	HARLEM DANCE CLUB INC. 2816 8TH AVE NEW YORK NY 10039	82-1630347		8,060				
(7)	HARLEM9, INC. 141 WEST 128TH STREET NEW YORK NY 10027	47-4120850		14,000				
(8)	HARMONY IMAGE PRODUCTIONS, INC. 217 PELHAM ROAD PHILADELPHIA PA 19119	23-2916456		22,600				
(9)	HARRISON HOUSE MUSIC, ARTS & ECOLOG PO BOX 416 JOSHUA TREE CA 92252	81-2849984		116,947				

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(1)	HELIAND CONSORT PO BOX 15 BAKERSFIELD VT 05441	46-2943281		6,100				
(2)	HIC INCIPIIT PESTIS PRODUCTIONS 117 PACIFIC ST. BROOKLYN NY 11201	84-3000413		7,715				
(3)	HIP ENTERPRISES, LLC P.O. BOX 90645 SANTA BARBARA CA 93190	56-2507526		8,800				
(4)	HOLD FOR SCOOTER FILMS LLC 1227 PARK AVENUE BALTIMORE MD 21217-4135	83-3670099		7,940				
(5)	HOLD YOUR HORSES FILMS, LLC 4211 LATONA AVE NE SEATTLE WA 98105	83-3109052		18,322				
(6)	HOPE DIES LAST & MORIAH PATERSON 8435 NE GLISAN STREET MSC547 PORTLAND OR 97220	47-4084872		8,000				
(7)	HORIZON THEATRE COMPANY INCORPORATE 1083 AUSTIN AVENUE NE ATLANTA GA 30307	58-1576913		19,448				
(8)	HORSE TRADE THEATRE GROUP 85 E 4TH ST. NEW YORK CITY NY 10003	13-4031477		10,400				
(9)	HUBBUB INC. 377 S HARRISON STREET EAST ORANGE NJ 07018	22-3437756		32,787				

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(1)	HUNGER AND THIRST THEATRE COLLECTIV 215 E. 96TH STREET NEW YORK NY 10128	45-5017669		40,437				
(2)	HUP! PRODUCTIONS LLC 126 THOMAS ST. CRANFORD NJ 07016	47-5232985		7,700				
(3)	IAMRESIDENCY 2030 DELLWOOD AVE. JACKSONVILLE, FL 32204	82-1184793		9,300				
(4)	IBIS PRODUCTIONS, INC. 64 NORMAN AVENUE #2 BROOKLYN NY 11222	20-4884141		40,400				
(5)	IDEAS UNITED, LLC 200 ARIZONA AVE ATLANTA GA 30307	83-2989310		160,800				
(6)	IDEAS UNITED, LLC 200 ARIZONA AVENUE NORTHEAST, SUITE ATLANTA GA 30307	83-2989310		196,730				
(7)	INCEPTION TO EXHIBITION 300 W. 145TH ST. NEW YORK NY 10039	27-2581567		12,900				
(8)	INDIANRAGA INC ONE BROADWAY, 14TH FLOOR CAMBRIDGE MA 02142	46-0621928		31,068				
(9)	INDIGO ARTS ALLIANCE PO BOX 3652 PORTLAND ME 04104	83-1809512		7,061				

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(1)	INNOVOCATIVE THEATRE 18120 FALL CREEK DR LUTZ FL 33558	82-1351467		6,157				
(2)	INSPIRED MASSES 40 ELSON RD. WALTHAM MA 02451	84-2141217		6,100				
(3)	IRVINE MUSIC FESTIVAL 4790 IRVINE BLVD IRVINE CA 92620	47-2261319		9,670				
(4)	JOSHUA WILLIAM GELB 618 E. 9TH STREET NEW YORK NY 10009	11-7684915		19,755				
(5)	KATIES ART PROJECT INC 410 E BROADWAY LONG BEACH NY 11561	37-1886344		6,255				
(6)	KENDALL SQUARE ORCHESTRA INC 28 HOLYOKE RD. SOMERVILLE MA 02144	83-3633860		32,782				
(7)	KID'S CANVAS, INC. 1433 DEKALB AVE BROOKLYN NY 11237	27-3335011		24,250				
(8)	KIOSK GALLERY LLC 2509 SW BLAZING STAR PL LEE'S SUMMIT MO 64081	46-1763545		12,070				
(9)	KLAUSNER-LAZARIDIS 19-09 21ST RD 2ND FL ASTORIA NY 11105	83-1450657		6,847				

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(1)	KLEIN & ALVAREZ PRODUCTIONS LLC 3910 LINCOLN ROAD INDIANAPOLIS IN 46228	47-5364070		13,475				
(2)	LAKESIDE SHAKESPEARE THEATRE 3501 N. HOYNE #2 CHICAGO IL 60618	20-2012033		7,583				
(3)	LAST BITE FILMS, LLC 1595 MASSEY POINTE LANE MEMPHIS TN 38120	83-3416989		11,502				
(4)	LAURA BARAN 501 W. 52ND ST. NEW YORK NY 10019	14-9669685		6,672				
(5)	LAURA TAYLOR 2656 SUNDANCE CT WALNUT CREEK CA 94598	46-5064817		24,978				
(6)	LAUREN RUFFIN 324 12TH ST. NW ALBUQUERQUE NM 87102	83-2230474		192,068				
(7)	LEFT SIDE UP FILMS, LLC 2301 41ST STREET, NW WASHINGTON DC 20007	38-2945755		12,000				
(8)	LEGACY CONNECTIONS FILMS 2057-A GREEN BAY ROAD HIGHLAND PARK IL 60035	26-4368591		14,478				
(9)	LEGENDARY PRODUCTIONS 218 GRANT ST. REDLANDS CA 92373	82-3737158		15,133				

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(1)	LEST WE FORGET THE MISSION, LLC 8243 CATTAIL DRIVE LONGMONT CO 80503	81-2256295		80,761				
(2)	LIBERATION THEATRE COMPANY 1855 ADAM CLAYTON POWELL JR. BLVD NEW YORK NY 10026	22-2762164		10,440				
(3)	LIKEU 23 SOUTH PORTLAND AVE #3 BROOKLYN NY 11217	27-4555121		30,853				
(4)	LISTENING ROOM NETWORK LLC 300 FOURTH AVE S SAINT PETERSBURG FL 33701	46-4775296		23,127				
(5)	LITTLE SPOON, BIG SPOON PRODUCTIONS 33-25 90TH STREET JACKSON HEIGHTS NY 11372	81-3151047		16,282				
(6)	LITTLE YUD VENTURES, INC. 1450 CHURCH STREET NW WASHINGTON DC 20005	81-4849168		92,354				
(7)	LIZ LERMAN LLC 6424 E. GREENWAY PKWY SCOTTSDALE AZ 85254-2045	45-2311062		206,916				
(8)	LOVE PRODUCTIONS RECORDS 527 W. 149TH ST. NEW YORK NY 10031	26-4803555		23,682				
(9)	M3EP, INC 213 SOMERSET RD NORWOOD NJ 07648	45-4669892		86,781				

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OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization

FRACTURED ATLAS, INC.

Employer identification number

11-3451703

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
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(1)	MACI DUFFY PRODUCTIONS INC. 429 WEST 154TH STREET NEW YORK NY 10032	83-1893586		19,575				
(2)	MACK-MADE DBA BRIDGE ARTS FESTIVAL 199 BROADWAY BAYONNE NJ 07002	81-2305319		6,284				
(3)	MADBOOTS DANCE INC. 321 79TH STREET NORTH BERGEN NJ 07047	47-4146324		15,397				
(4)	MANNING MUSIC AND ARTS 758 GILMAN BERKELEY CA 94710	26-4314012		5,005				
(5)	MANUAL CINEMA LLC 2020 N CALIFORNIA AVE CHICAGO IL 60647	46-1827152		20,043				
(6)	MARGOT FONTEYN ACADEMY OF BALLET, I 5640 NORTH WILLIAMSON VALLEY ROAD PRESCOTT AZ 86301	84-3841262		93,940				
(7)	MAXWELL FILMWORKS 3224 CAMARIE AVE. MIDLAND TX 79705	46-2264395		16,719				
(8)	MICHELLE FILM LLC 78 TEN EYCK STREET BROOKLYN NY 11206	84-2506688		27,003				
(9)	MICRO LLC 445 HUMBOLDT STREET BROOKLYN NY 11211	81-4935296		323,051				

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **u**
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Schedule I (Form 990) (2019)

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(Form 990)**

Department of the Treasury
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(1)	MILES MCAFEE 315 EMPIRE BLVD BROOKLYN NY 11225	47-2222531		26,443				
(2)	MINT INC. PO BOX 5528 ATLANTA GA 31107	71-1011962		11,533				
(3)	MOUNT MO 29 AVENUE B NEW YORK NY 10009	83-3308626		6,993				
(4)	MOVEMENT MIGRATION, LLC 14311 REESE BLVD. A2 #307 HUNTERSVILLE NC 28078	82-3664217		10,912				
(5)	MULTISTAGES THEATRE, INC. 344 WEST 87TH STREET NEW YORK NY 10024	46-1664579		6,359				
(6)	MUSEUM OF CONTEMPORARY ART OF GEORG 75 BENNETT STREET ATLANTA GA 30309	58-2562811		8,994				
(7)	MUSICIVIC, INC. 68 N RIDGE AVE AMBLER PA 19002	83-1335015		8,770				
(8)	MUSICIVIC, INC. 68 N RIDGE AVE AMBLER PA 19002	83-1335015		35,104				
(9)	MYTH COMPLEX ART HOUSE LLC 205 21ST AVE SE ST PETERSBURG FL 33705	47-1780993		41,000				

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(1)	NAPOLEON RECORDS LLC PO BOX 11825 PORTLAND OR 97211	45-1488267		14,998				
(2)	NATIONAL BLACK ARTS FESTIVAL, INC 1429 FAIRMONT AVE., STE. J. ATLANTA GA 30318	58-1736780		6,227				
(3)	NATIONAL MUSEUM OF THE AMERICAN IND ONE BOWLING GREEN NEW YORK NY 10004	53-0206027		7,356				
(4)	NATURE THEATER OF OKLAHOMA LLC 2728 THOMSON AVENUE LONG ISLAND CITY NY 11101	45-2207312		57,339				
(5)	NEOSHO MUSIC INC. DBA BORROMEO MUSI P.O BOX 661389 LOS ANGELES CA 90066	82-3055986		10,827				
(6)	NETA RGV 512 S. 9TH ST. MCALLEN TX 78501	84-2803344		14,000				
(7)	NEW CIRCLE THEATRE COMPANY, INC. 140 WEST 44TH ST., #2 NEW YORK NY 10024	82-2130860		6,450				
(8)	NEW MOVEMENT COLLABORATIVE LLC 18 NEPONSET AVENUE ROSLINDALE MA 02131	47-4493232		31,404				
(9)	NEW MUSIC RADIO LLC 447 FORT WASHINGTON AVENUE NEW YORK NY 10033	82-3794258		18,342				

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(1)	NEW PLAZA CINEMA, INC. 142 WEST END AVENUE NEW YORK NY 10023	36-4905957		20,541				
(2)	NEXT EDGE ARTS, INC. 406 FRANK ST. RALEIGH NC 27604	84-3535421		15,217				
(3)	NICJOY ENTERPRISES, LLC PO BOX 6413 HILLSBOROUGH NJ 08844	20-3555389		7,134				
(4)	NORMAL AVE PRODUCTIONS LLC 31-53 35TH STREET ASTORIA NY 11106	82-0650354		5,952				
(5)	NORWALK METROPOLITAN YOUTH BALLET 96 INWOOD ROAD TRUMBULL CT 06611	46-4991269		114,716				
(6)	NOVA EARTH INSTITUTE 13918 E MISSISSIPPI AVE AURORA CO 80012	81-1197618		13,871				
(7)	OBB SOUND, LLC 155 N. LA PEER DRIVE WEST HOLLYWOOD CA 90048	84-2072549		23,250				
(8)	OCELOT 500 MERCER ST, SEATTLE WA 98109	83-1614625		13,202				
(9)	OCTAVIA PROJECT, INC 402 GRAND AVE BROOKLYN NY 11238	83-3975000		13,415				

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(1)	OFF CENTER PRODUCTIONS 315 FLATBUSH AVENUE BROOKLYN NY 11217	43-1991105		20,714				
(2)	OMNIDAWN CORPORATIO 1632 ELM AVE RICHMOND CA 94805-1614	68-0424529		28,587				
(3)	ORANGE BLUE GROUP, LLC 315 FLATBUSH AVE BROOKLYN NY 11217	81-4209829		543,765				
(4)	OUT OF HAND THEATER INC. 675 PONCE DE LEON AVENUE SUITE 8500 ATLANTA GA 30308	58-2619780		11,770				
(5)	OYE GROUP, INC. 1080 WYCKOFF AVE RIDGWOOD NY 11385	81-0963322		26,009				
(6)	PAPERS PLEASE INC. 3605 TILDEN STREET NW WASHINGTON DC 20008	83-1227096		13,524				
(7)	PARADYM ACADEMY INC. 91 CHAPMAN ST NEW BRITAIN CT 06051	81-3737797		46,175				
(8)	PARENT ARTIST ADVOCACY LEAGUE FOR T 2230 S JUNIPER ST PHILADELPHIA PA 19148	82-2042582		6,322				
(9)	PARRIS PICTURES 838 GREENWICH STREET NEW YORK NY 10014	47-1751207		10,000				

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(1)	PATIENT FORWARD, LLC 1169 GREENE AVE BROOKLYN NY 11221	84-1873597		268,518				
(2)	PEARLARTS STUDIOS, LLC 201 NORTH BRADDOCK AVENUE PITTSBURGH PA 15208	46-1122709		8,500				
(3)	PERFORMING ARTS STRATEGIES 6636 WILKINS AVENUE PITTSBURGH PA 15217	38-3842779		115,088				
(4)	PERSIMMON TREE, INC. 1600 S.E. 15TH ST. FORT LAUDERDALE FL 33316	82-4873168		12,479				
(5)	PHILADELPHIA ARGENTINE TANGO SCHOOL 2030 FRANKFORD AVE PHILADELPHIA PA 19125	80-0515661		7,038				
(6)	PHILADELPHIA WOMENS THEATRE FESTIVA 5009 CEDAR AVE APT. 3 PHILADELPHIA PA 19143	83-4467194		18,974				
(7)	PHOENIX ORCHESTRA LTD 1404 BEACON ST, APT 4 BROOKLINE MA 02446	47-1893398		16,190				
(8)	PHYSICAL FESTIVAL LLC 1508 N DAMEN AVE CHICAGO IL 60622	82-4452556		18,515				
(9)	PIANOS FOR PEACE, INC 1795 PEACHTREE STREET NE ATLANTA GA 30309	47-4784836		11,215				

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(1)	PIE HOLE LIVE ARTS LLC 244 JEFFERSON AVENUE, #1 BROOKLYN NY 11216	83-0658723		5,018				
(2)	PLANET CONNECTION, INC. 171 EAST 77TH ST. NEW YORK NY 10075	27-1848213		179,385				
(3)	PLAYDC LLC 475 K STREET NW WASHINGTON DC 20001	83-1317642		5,660				
(4)	PLAYER PIANO PRODUCTIONS LLC 203 BALTIC ST BROOKLYN NY 11201	46-3090596		48,000				
(5)	PLEIADES ARTS, INC. 109 E CHAPEL HILL STREET DURHAM NC 27701	82-1868413		5,176				
(6)	POLYPHONIC PRODUCTIONS, LLC DBA NEW 131 SAINT FELIX ST. BROOKLYN NY 11217	27-4562071		16,094				
(7)	POTLUCK PRODUCTIONS NETWORKS 640 SOUTH VAN NESS AVE. SAN FRANCISCO CA 94110	26-0086182		8,050				
(8)	PRIME PRODUCTIONS 8001 VICTORIA LANE ST LOUIS PARK MN 55426	30-1054214		13,170				
(9)	PROJECT LEGACIES, LLC 157 STARLING PASS ASHEVILLE NC 28804	82-3949607		22,649				

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(1)	PROJECT VOICE LLC 2 PRINCE STREET NEW YORK NY 10012	81-3298956		30,328				
(2)	Q CONCERTS 614 BEAUREGARD STREET CHARLESTON SC 29412	84-3936296		6,270				
(3)	QUANTUM DRAGON THEATRE 4218 GRAHAM ST. PLEASANTON CA 94566	47-4232553		5,595				
(4)	QUEEN MAB, INC. 53 ORVIS RD ARLINGTON MA 02474	83-4292735		14,723				
(5)	QUEER AS FUNDAMENTAL PRODUCTIONS 2324 NORTH SCHOFIELD STREET PORTLAND OR 97217	84-4809724	LL	13,150				
(6)	QUINTESSENCE OF DUST 101 W 90TH STREET NEW YORK NY 10024	84-3343430		13,456				
(7)	QUINTESSENTIAL PROJECT LLC 115 W 1ST ST SANFORD FL 32771	82-3492321		31,778				
(8)	RACES Y ACCIN INC. 301 E. 22ND ST. NEW YORK NY 10010	66-0931439		10,732				
(9)	RAINBOW MILITIA 1561 HOLLY STREET DENVER CO 80220	82-3351502		7,483				

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(1)	RAISON D'TRE DANCE PROJECT 19 HALO DRIVE BOZEMAN MT 59718	82-2850178		18,951				
(2)	RANDY BACON PHOTOGRAPHY, INC. 600 W. COLLEGE STREET SPRINGFIELD MO 65806	20-3059833		9,090				
(3)	READING THEATER PROJECT PO BOX 6712 READING PA 19610	71-0925966		24,953				
(4)	REAP WHAT YOU SEW LLC 327 SAINT NICHOLAS AVE. NEW YORK NY 10027	30-0461715		32,466				
(5)	RECOVERYDIA DIGITAL SERVICES LLC 11 A ST DERRY NH 03038	85-0495855		5,480				
(6)	RESPIRO OPERA NYC LLC 200 W 85TH STREET NEW YORK NY 10024	83-1898632		5,999				
(7)	RIGHTFULLY SEWN 1800 WYANDOTTE STREET KANSAS CITY MO 64108	47-4141377		142,913				
(8)	RIGHTFULLY SEWN 1800 WYANDOTTE ST KANSAS CITY MO 64108	47-4141377		20,000				
(9)	RISK IT PRODUCTIONS, LLC PO BOX 372 BETHPAGE NY 11714	81-4219342		6,735				

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(1)	ROOM TO MOVE INC. 1067 ALTA AVENUE NE APARTMENT 6 ATLANTA GA 30307	58-1852500		6,934				
(2)	ROSEMARY BEACH PROPERTY OWNERS ASSO P O BOX 611010 ROSEMARY BEACH FL 32461	59-3367224		40,125				
(3)	ROSY WALK LLC 16 GOLDBERG AVE NORWICH CT 06360	81-2713876		24,000				
(4)	RUMBLEGRUMBLE, INC. 41 VARICK AVENUE BROOKLYN NY 11237	47-3829091		36,390				
(5)	RUNNING WATER ENTERTAINMENT 3500 VICKSBURG LANE NORTH PLYMOUTH MN 55447	45-2678166		5,750				
(6)	SANKOFA FILM SOCIETY 3815 OTHELLO STREET SEATTLE WA 98118	84-3840258		6,600				
(7)	SANTA FE ART COLONY TENANTS ASSOCIA 2415 SOUTH SANTA FE AVENUE LOS ANGELES CA 90058	83-4375802		48,360				
(8)	SARAFENN LLC PO BOX 670117 BRONX NY 10467	84-4385877		6,000				
(9)	SCENA THEATRE 1629 K STREET,NW WASHINGTON DC 20006	52-1681505		16,407				

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **u**
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Schedule I (Form 990) (2019)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
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OMB No. 1545-0047

2019

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization

FRACTURED ATLAS, INC.

Employer identification number

11-3451703

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
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Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	SCIART INITIATIVE INC. 211 MCGUINNESS BLVD BROOKLYN NY 11222	84-1732471		10,667				
(2)	SCOPE OF WORK CO. 187 STANHOPE ST BROOKLYN NY 11237	82-0718228		53,985				
(3)	SCRANTON FRINGE PO BOX 1235 SCRANTON PA 18501	47-1808438		8,711				
(4)	SEMILLITA PRODUCTIONS 1580 1ST AVE NEW YORK NY 10028	84-2902931		11,659				
(5)	SEVEN STAGES SHAKESPEARE COMPANY P.O. BOX 774 PORTSMOUTH NH 03802	47-3460410		7,188				
(6)	SEVENTHREEFOUR PRODUCTIONS, LLC 100 2ND ST BROOKLYN NY 11231	47-4951740		5,157				
(7)	SHE SINGS PRODUCTIONS, LLC 6598 WILLIAMSBURG BLVD. ARLINGTON VA 22213	84-4841933		28,092				
(8)	SHINE CHILDREN'S CHORUS 3515 SE WASHINGTON ST. PORTLAND OR 97214	83-2125257		38,466				
(9)	SHOUTHUSE, INC. 525 WYNNEWOOD RD. PELHAM NY 10803	83-4305924		9,850				

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(1)	SHUGAH WORKS 135 E 32ND ST BROOKLYN NY 11226	80-0074429		58,507				
(2)	SIBLING RIVALRY PRESS, LLC PO BOX 26147 LITTLE ROCK AR 72221	27-3167520		6,000				
(3)	SINKING SHIP CREATIONS, LLC 3237 FOURTH STREET OCEANSIDE NY 11572	82-3630087		6,400				
(4)	SMARTSPACES.ORG 4001 N. NEW BRAUNFELS AVENUE SAN ANTONIO TX 78209	26-1366145		5,677				
(5)	SOL INITIATIVE LLC, JACOB G PADRON 2254 FIFTH AVE. NEW YORK NY 10037	84-2460538		103,399				
(6)	SOUL BOX PROJECT LLC 8225 SW 3RD AVE PORTLAND OR 97219	83-3858783		33,706				
(7)	SPARKYBOOM LLC 686 PROSPECT ST. MAPLEWOOD NJ 07040	83-2660945		19,611				
(8)	SPECIFIC BROADS PRODUCTIONS LLC 33 SAINT MARKS AVE BROOKLYN NY 11217	46-3229617		7,359				
(9)	SRI PRABHA/ARTLAB L.L.C. 4800 HARRISON ST. HOLLYWOOD FL 33021	81-3220641		9,654				

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(1)	STATE OF THE ART JAZZ INSTITUTE 16 ELMWOOD CIRCLE PEEKSKILL NY 10566	32-0275549		11,090				
(2)	STILL WATERS IN A STORM 286 STANHOPE STREET, GROUND FLOOR BROOKLYN NY 11237	27-1195669		51,075				
(3)	STILLPOINTE THEATRE INITIATIVE INC. 407 EAST FEDERAL ST BALTIMORE MD 21202	45-2519318		19,339				
(4)	STRING INSIDERS 3409 PUEBLO DR. MCKINNEY TX 75070	84-2426854		11,490				
(5)	SUSAN BATSON CONSERVATORY 311 WEST 43RD STREET NEW YORK NY 10036	84-3104036		16,037				
(6)	SYDNIE L. MOSLEY DANCES 2095 MADISON AVE NEW YORK NY 10037	27-5164385		7,703				
(7)	SYNCHRONICITY PERFORMANCE GROUP 1389 PEACHTREE STREET NE ATLANTA GA 30309	58-2352047		8,235				
(8)	TAK ENSEMBLE, LLC 61-27 MADISON ST FLUSHING NY 11385	46-5716517		14,069				
(9)	TAVINE PRODUCTIONS INC. 171 S. 4TH ST BROOKLYN NY 11211	83-1797167		7,861				

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(1)	TESLA QUARTET 1002 DITMAS AVE. BROOKLYN NY 11218	27-4818934		10,443				
(2)	THE ACTUAL DANCE 1472 PATHFINDER LANE MCLEAN VA 22101	46-2071626		6,545				
(3)	THE AMERICAN QUESTION, LLC 2934 S RIMPAU BLVD LOS ANGELES CA 90016	82-1243782		28,419				
(4)	THE AMERICAN SAFETY COMPANY OF AMER 357 S. FAIRFAX AVE. LOS ANGELES CA 90036	26-0349527		25,224				
(5)	THE ANTHROPOLOGISTS 100 CABRINI BLVD. NEW YORK NY 10033	27-2215878		7,377				
(6)	THE ARBUTUS FOUNDATION INC. 441 BROADWAY NEW YORK NY 10013	83-1802347		157,799				
(7)	THE BALTIMORE JEWELRY CENTER 10 E. NORTH AVENUE BALTIMORE MD 21202	46-3151875		9,200				
(8)	THE BREWING DEPT., INC. PO BOX 1623, RADIO CITY STATION NEW YORK NY 10101	46-3036178		19,400				
(9)	THE CENTER FOR ARTS AT THE ARMORY 191 HIGHLAND AVE. 1-C SOMERVILLE MA 02143	34-2056194		27,585				

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(1)	THE CONCERT TRUCK L.L.C. 3102 EVERGREEN AVE FL 1 BALTIMORE MD 21214-2335	81-3074584		6,348				
(2)	THE DIVISION AVENUE ARTS COLLECTIVE 1713 S GREENFIELD CIR NE GRAND RAPIDS MI 49505	90-1010164		10,279				
(3)	THE EXQUISITE CORPSE COMPANY LLC 476 EASTERN PARKWAY BROOKLYN NY 11225	46-2765993		18,170				
(4)	THE EXQUISITE CORPSE COMPANY LLC 476 EASTERN PARKWAY 1D BROOKLYN NY 11225	46-2765993		8,650				
(5)	THE FAT AND GREASY CITIZENS BRIGADE 1702 INDEPENDENCE AVE SE WASHINGTON DC 20003	47-5654597		27,265				
(6)	THE FOLK MUSIC HALL OF FAME & MUSEU 632 FOGG STREET NASHVILLE TN 37203	47-5004076		11,200				
(7)	THE FULTON STREET COLLECTIVE INC. 1821 W HUBBARD STREET CHICAGO IL 60622	06-1655461		23,000				
(8)	THE HEARTH 336 WEST 95TH STREET NEW YORK NY 10025	81-4230735		18,563				
(9)	THE HUMANIST PROJECT 5 4TH ST BROOKLYN NY 11231	46-3728382		7,818				

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(1)	THE INTERNATIONAL ASSOCIATION OF 2261 MARKET STREET SAN FRANCISCO CA 94114	81-3263060		7,012				
(2)	THE JOURNEY PROJECT LLC 343 WEST 51ST ST NEW YORK NY 10019	82-1704210		13,762				
(3)	THE LIFE CUBE LLC 50 CRICKET LA DOBBS FERRY NY 10522	46-3249244		30,395				
(4)	THE LOVE STORY, LLC 187 OAK TER ARDEN NC 28704	81-0690741		5,250				
(5)	THE METAL SHOP PERFORMANCE LAB, LLC 1407 W WINONA ST CHICAGO IL 60640	84-2868745		5,300				
(6)	THE MOVEMENT THEATRE COMPANY, INC. 279 WEST 117TH STREET APT 2Q NEW YORK NY 10026	47-2966845		26,590				
(7)	THE MUSE BROOKLYN 350 MOFFAT BROOKLYN NY 11237	46-0706492		59,988				
(8)	THE NEW WILD, INC. 161 PROSPECT PARK WEST BROOKLYN NY 11215	84-2161664		11,562				
(9)	THE PHIL RAMONE ORCHESTRA FOR CHILD COLUMBIA UNIVERSITY STATION NEW YORK NY 10025	84-2784720		10,783				

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(1)	THE POND THEATRE COMPANY 370 WASHINGTON AVENUE BROOKLYN NY 11238	81-2874968		9,013				
(2)	THE RESIDENT ACTING COMPANY 308 E 79TH ST. NEW YORK NY 10075	82-3767570		69,232				
(3)	THE ROSIN BOX PROJECT, INC. 2710.5 BROADWAY SAN DIEGO CA 92102	84-4735639		35,441				
(4)	THE SCRATCH, LLC 26519 SE 22ND STREET SAMMAMISH WA 98075	61-1935494		5,375				
(5)	THE SONG CAVE LLC 56 4TH PLACE #2 BROOKLYN NY 11231	47-1064739		12,315				
(6)	THE THEATRE COMPANY LLC 2315 NW OVERTON ST. PORTLAND OR 97210	84-2240814		49,066				
(7)	THE WESTCHESTER CENTER FOR JAZZ AND 12 THE FARMS ROAD BEDFORD NY 10506	47-2943528		144,621				
(8)	THE YELLOW HOUSE 577 KING STREET JACKSONVILLE FL 32204	35-2601953		48,981				
(9)	THEATER IN ASYLUM 787 STERLING PL BROOKLYN NY 11216	80-0803846		8,068				

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(1)	THEATER WITH A VIEW LLC 1-50 50TH AVENUE #1238 LONG ISLAND CITY NY 11101	84-2176344		11,190				
(2)	THEATRE DU REVE INC PO BOX 78341 ATLANTA GA 30357	58-2271965		6,775				
(3)	THEATRE PROMETHEUS, INC. 1427 CRITTENDEN ST NW WASHINGTON DC 20011	83-3339891		7,572				
(4)	THEATRICAL ANVILS LLC 1921 SAINT PAUL ST BALTIMORE MD 21218	84-3768831		7,595				
(5)	THEATRICAL OUTFIT INC PO BOX 1555 ATLANTA GA 30301	58-1524285		7,356				
(6)	THIRD RAIL PROJECTS, LLC 697 GRAND STREET BROOKLYN NY 11211	26-2158833		29,550				
(7)	THREAD CONNECTS, INC 611 W 163RD ST NEW YORK NY 10032	84-1733014		34,525				
(8)	THROUGH THE 4TH WALL 826 BASHFORD LANE ALEXANDRIA VA 22314	81-2027686		26,400				
(9)	TML BROADWAY LLC 404 RIVERSIDE DRIVE NEW YORK NY 10025	82-2640418		20,000				

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(1)	TO THE POINT DESIGN LLC 235 E 22ND STREET NEW YORK NY 10010	27-4809780		13,225				
(2)	TOGETHER IN HOPE PROJECT 7662 WOODVIEW COURT EDINA MN 55439	82-3695283		21,407				
(3)	TONAL GRACE INC PO BOX 371 HAKALAU HI 96710	83-1584595		18,950				
(4)	TONAL GRACE INC PO BOX 371 HAKALAU HI 96710	83-1584595		9,300				
(5)	TORN PAGE INC. 1812 W BURBANK BLVD LOS ANGELES CA 91506	85-2519655		6,000				
(6)	TOSS IT LLC 204 WEST 106TH STREET, APT. 56 NEW YORK NY 10025	47-4419124		5,255				
(7)	TRANSIENT CANVAS 29 YALE TERRACE JAMAICA PLAIN MA 02130	47-4596474		8,150				
(8)	TRIAD- BOSTONS CHORAL COLLECTIVE 9 GOULD STREET DANVERS MA 01923	47-3887999		5,810				
(9)	TRUE STORY PICTURES 316 HAWTHORNE ST. MEMPHIS TN 38112	27-2124650		10,005				

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(1)	UBUNTU MOTION PICTURES, LLC 530 S. LAKE AVE. 569 PASADENA CA 91101	26-3533146		9,400				
(2)	UNA INC. 133 NEVADA ST. SAN FRANCISCO CA 94110	85-0835854		12,150				
(3)	UNLADYLIKE PRODUCTIONS LLC, CHARLOT 421 12TH STREET BROOKLYN NY 11215	20-2104822		97,492				
(4)	UNSHAKABLE PRODUCTIONS 17613 NORWOOD ROAD SANDY SPRING MD 20860	83-0778130		16,000				
(5)	URBAN HAIKU LLC 4848 NE 14TH AVE PORTLAND OR 97211	81-4835980		5,477				
(6)	URBAN YOUTH HARP ENSEMBLE INC 3259 BRIARWOOD BOULEVARD ATLANTA GA 30344	52-2440625		7,446				
(7)	VANISH ENTERPRISES, LLC 16006 ELIZABETH ST. BEVERLY HILLS MI 48025	81-3005955		49,406				
(8)	VILLAGE PLAYBACK THEATRE 106 CLINTON STREET MT. VERNON NY 10552	36-4573855		5,033				
(9)	VINCENT & THEO PRODUCTIONS, LLC 9 KERN RAMBLE AUSTIN TX 78722	83-1491463		16,400				

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **u**
- 3 Enter total number of other organizations listed in the line 1 table **u**

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

Schedule I (Form 990) (2019)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
u Attach to Form 990.
u Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization

FRACTURED ATLAS, INC.

Employer identification number

11-3451703

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	VITAL OPERA, INC. 87-10 34TH AVENUE 2B JACKSON HEIGHTS NY 11372	46-3086770		9,616				
(2)	VIVIFI FILMS LLC 1708-C AUGUSTA ST., 319 GREENVILLE SC 29605	83-4467749		7,360				
(3)	VOICES FROM WAR, INC. 276 FIRST AVENUE NEW YORK NY 10009	83-1974056		10,059				
(4)	VOXBOX, INC 494 EAST 16TH STREET BROOKLYN NY 11226	81-1337008		12,700				
(5)	WALLPLAY 265 CANAL ST NEW YORK NY 10013	46-3285077		71,035				
(6)	WE ARE THE LOBBYISTS LLC 37 S 3RD ST BROOKLYN NY 11249	47-4468974		17,123				
(7)	WE ARE THE LOBBYISTS LLC 37 S 3RD ST BROOKLYN NY 11249	47-4468974		7,120				
(8)	WEIRD SISTERS LLC 400 W43RD ST NEW YORK NY 10036	42-1622330		10,382				
(9)	WHAT'S ON LOS ANGELES 843 BAY STREET SANTA MONICA CA 90405	16-2444581		7,536				

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **u**
- 3 Enter total number of other organizations listed in the line 1 table **u**

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

Schedule I (Form 990) (2019)

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
u Attach to Form 990.
u Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization

FRACTURED ATLAS, INC.

Employer identification number

11-3451703

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	WHOLE WORLD THEATER COMPANY 1212 SPRING STREET NW ATLANTA GA 30309	58-2119605		6,754				
(2)	WILD BANSHEE PRODUCTIONS, LLC 64 EAST 129TH ST. APT 3 NEW YORK NY 10035	81-1335768		9,200				
(3)	WILLIAMSBURG INDEPENDENT FILM FESTI 1361 MADISON AVE. NEW YORK NY 10128	27-3294550		5,695				
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **u**
- 3 Enter total number of other organizations listed in the line 1 table **u**

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

Schedule I (Form 990) (2019)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 FISCAL SPONSORSHIP GRANT	1231	7,029,964			
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

FRACTURED ATLAS REVIEWS INDIVIDUAL EXPENDITURES AND FUND RELEASE REQUESTS

TO ENSURE COMPLIANCE WITH PROJECT PARAMETERS AND CHARITABLE MISSION.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
u Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
u Attach to Form 990.
uGo to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization

FRACTURED ATLAS, INC.

Employer identification number

11-3451703

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a		
1b		
2		
3		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2019

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)–(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 SHAWN ANDERSON CTO/BOARD MEMBER	(i) 170,420 (ii) 0	0 0	0 0	8,521 0	0 0	178,941 0	0 0
2 TIM CYNOVA CO-CEO/BOARD MEMBER	(i) 164,543 (ii) 0	0 0	0 0	8,227 0	0 0	172,770 0	0 0
3 PALLAVI SHARMA CPO/BOARD MEMBER	(i) 170,420 (ii) 0	0 0	0 0	0 0	0 0	170,420 0	0 0
4 LAUREN RUFFIN CERO/BOARD MEMBER	(i) 164,543 (ii) 0	0 0	0 0	0 0	0 0	164,543 0	0 0
5	(i) (ii)						
6	(i) (ii)						
7	(i) (ii)						
8	(i) (ii)						
9	(i) (ii)						
10	(i) (ii)						
11	(i) (ii)						
12	(i) (ii)						
13	(i) (ii)						
14	(i) (ii)						
15	(i) (ii)						
16	(i) (ii)						

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Transactions With Interested Persons

U Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

U Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open To Public Inspection

Employer identification number

11-3451703

FRACTURED ATLAS, INC.

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 **U** \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization **U** \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

1	(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the org.?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
				To	From			Yes	No	Yes	No	Yes	No
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													

Total **U** \$ _____

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

1	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2019

**Open To Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

Name of the organization

FRACTURED ATLAS, INC.

Employer identification number

11-3451703

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	X	1	498	FAIR MARKET VALUE
2 Art — Historical treasures				
3 Art — Fractional interests				
4 Books and publications	X		1,933	FAIR MARKET VALUE
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities — Publicly traded	X	20	623,520	FAIR MARKET VALUE
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	X	12	2,292	FAIR MARKET VALUE
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other u (COMPUTERS)	X	6	171,766	FAIR MARKET VALUE
26 Other u (FURN & SUPPLIES)	X	25	42,670	FAIR MARKET VALUE
27 Other u (SHOW TICKETS)	X	2	320	FAIR MARKET VALUE
28 Other u (GIFT CERTIFICAT)	X	15	1,334	FAIR MARKET VALUE

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.		

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.

u Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization FRACTURED ATLAS, INC.	Employer identification number 11-3451703
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FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENTS

OTHER PROGRAMS AND SERVICES: FRACTURED ATLAS'S TECHNOLOGY-BASED PROGRAM, SPACEFINDER, A CLOUD-BASED APPLICATION PROVIDING A COMPREHENSIVE ONLINE DATABASE OF SPACE LISTINGS.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 TAX RETURN IS SENT TO ORGANIZATION FOR THE GOVERNING BODY TO REVIEW BEFORE SIGNING AND SENDING TO THE GOVERNMENT.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY PURSUANT WITH THE ORGANIZATION'S FORMAL CONFLICTS OF INTEREST POLICY ADOPTED BY THE BOARD OF DIRECTORS ON APRIL 30, 2005, ANY DIRECTOR, PRINCIPAL OFFICER, OR MEMBER OF A COMMITTEE WITH BOARD DELEGATED POWERS WHO HAS A DIRECT OR INDIRECT FINANCIAL INTEREST HAS A DUTY TO DISCLOSE TO THE BOARD OF DIRECTORS ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST. THE POLICY CLEARLY OUTLINES PROCEDURES FOR ADDRESSING THE CONFLICT OF INTEREST AND REPERCUSSIONS FOR VIOLATING OF THE POLICY. DISCLOSED CONFLICTS OF INTEREST ARE MONITORED ON A PERIODIC BASIS AS OUTLINED IN THE POLICY.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL APPROVED BY BOARD

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS IN 2014 AND 2015, THE ORGANIZATION'S BOARD OF DIRECTORS AND EXECUTIVE STAFF CONTRACTED QUATT ASSOCIATES TO CONDUCT STAFF COMPENSATION STUDIES TO ASSIST

Name of the organization

Employer identification number

FRACTURED ATLAS, INC.

11-3451703

FRACTURED ATLAS IN SETTING COMPENSATION THAT IS COMPETITIVE WITH THE MARKET AND MEETS APPLICABLE IRS STANDARDS. THE FIRST PHASE EVALUATED SENIOR STAFF COMPENSATION. THE SECOND PHASE EXAMINED JUNIOR STAFF AND SOFTWARE DEVELOPER COMPENSATION.

FORM 990, PART VI, LINE 17 - OTHER STATES WHERE COPY OF RETURN IS FILED LOUISIANA, MASSACHUSETTS, MARYLAND, MAINE, MICHIGAN, MINNESOTA, MISSISSIPPI, NORTH CAROLINA, NORTH DAKOTA, NEW HAMPSHIRE, NEW JERSEY, NEW MEXICO, NEVADA, NEW YORK, OHIO, OKLAHOMA, OREGON, PENNSYLVANIA, RHODE ISLAND, SOUTH CAROLINA, TENNESSEE, UTAH, VIRGINIA, WEST VIRGINIA, WASHINGTON, WISCONSIN

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION GOVERNING DOCUMENTS, FINANCIAL STATEMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST, AT FRACTURED ATLAS' OFFICE.

FORM 990, PART XI - ADDITIONAL INFORMATION BOARD REVIEWS FINANCIAL STATEMENTS AND APPROVES BEFORE THEY ARE BOUND AND SENT.

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION DONATED LEGAL FEES \$ -50,247

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships

u Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

u Attach to Form 990.

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

OMB No. 1545-0047

2019

Open to Public Inspection

FRACTURED ATLAS, INC.

Employer identification number

11-3451703

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)							
(2)							
(3)							
(4)							
(5)							

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate alloc.?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) EXPONENTIAL CREATIVITY VENTURES, IN 1063 ULUOPIHI LOOP KAILUA HI 96734 82-4197795	INVESTING	NY		C		1,712,147	82.000000		X
(2)									
(3)									
(4)									

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)	X	
e Loans or loan guarantees by related organization(s)	X	
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)	X	
s Other transfer of cash or property from related organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) EXPONENTIAL CREATIVE VENTURES	C	2,110,000	AS PER CONTRIBUTION AGRMT
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)
u Attach to your tax return.

u Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2019

Attachment Sequence No. **179**

Name(s) shown on return **FRACTURED ATLAS, INC.** Identifying number **11-3451703**

Business or activity to which this form relates
INDIRECT DEPRECIATION

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,020,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,550,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2018 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2020. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	15,336

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2019	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/> u <input type="checkbox"/>		

Section B—Assets Placed in Service During 2019 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	15,336
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2019)

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed?				Yes	No	24b If "Yes," is the evidence written?				Yes	No
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)		(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost		
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions									25		
26 Property used more than 50% in a qualified business use:											
		%									
		%									
27 Property used 50% or less in a qualified business use:											
		%				S/L-					
		%				S/L-					
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1									28		
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1										29	

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
30 Total business/investment miles driven during the year (don't include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons. See instructions.

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? See instructions		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2019 tax year (see instructions):					
43 Amortization of costs that began before your 2019 tax year				43	11,125
44 Total. Add amounts in column (f). See the instructions for where to report				44	11,125

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
Prior MACRS:									
1	COMPUTER EQUIPMENT Sold/Scrapped: 3/01/20	10/01/00	4,258			4,258	5 HY S/L	4,058	0
2	COMPUTER EQUIPMENT Sold/Scrapped: 3/01/20	10/01/01	876		X	613	5 HY S/L	726	0
3	COMPUTER EQUIPMENT Sold/Scrapped: 3/01/20	10/01/01	1,191		X	834	3 HY S/L	941	0
4	COMPUTER EQUIPMENT Sold/Scrapped: 3/01/20	10/01/01	400		X	280	3 HY S/L	325	0
5	COMPUTER EQUIPMENT Sold/Scrapped: 3/01/20	9/30/02	719		X	503	3 HY S/L	519	0
6	COMPUTER EQUIPMENT Sold/Scrapped: 3/01/20	10/01/03	718		X	359	3 HY S/L	718	0
7	COMPUTER EQUIPMENT Sold/Scrapped: 3/01/20	4/01/04	2,250		X	1,125	3 HY S/L	2,250	0
8	OFFICE EQUIPMENT Sold/Scrapped: 3/01/20	4/01/04	1,730		X	865	7 HY S/L	1,730	0
9	TELEPHONE EQUIPMENT Sold/Scrapped: 3/01/20	7/01/00	276			276	3 HY S/L	262	0
10	LIGHTING EQUIPMENT Sold/Scrapped: 3/01/20	4/22/00	127			127	5 HY S/L	0	0
11	SOUND EQUIPMENT Sold/Scrapped: 3/01/20	4/12/00	159			159	5 HY S/L	0	0
12	COSTUME SUPPLIES Sold/Scrapped: 3/01/20	3/16/00	171			171	5 HY S/L	0	0
13	COMPUTER EQUIPMENT Sold/Scrapped: 3/01/20	2/01/05	773			773	5 HY S/L	773	0
14	COMPUTER EQUIPMENT Sold/Scrapped: 3/01/20	12/05/05	665			665	5 HY S/L	665	0
15	OFFICE EQUIPMENT Sold/Scrapped: 3/01/20	4/28/11	17,690		X	0	5 HY S/L	17,690	0
19	OFFICE EQUIPMENT Sold/Scrapped: 3/01/20	11/12/18	3,104		X	0	7 HY S/L	3,104	0
20	OFFICE EQUIPMENT Sold/Scrapped: 9/01/19	9/01/16	3,739		X	2,136	7 HY S/L	1,603	0
			<u>38,846</u>			<u>13,144</u>		<u>35,364</u>	<u>0</u>
Other Depreciation:									
16	RENOVATIONS Sold/Scrapped: 4/01/20	9/01/15	90,273			90,273	5 MO S/L	72,218	10,532
17	RENOVATIONS Sold/Scrapped: 4/01/20	9/01/15	57,652			57,652	7 MO S/L	32,944	4,804
	Total Other Depreciation		<u>147,925</u>			<u>147,925</u>		<u>105,162</u>	<u>15,336</u>
	Total ACRS and Other Depreciation		<u>147,925</u>			<u>147,925</u>		<u>105,162</u>	<u>15,336</u>
Amortization:									
18	INTELLECTUAL PROPERTY Sold/Scrapped: 3/01/20	9/01/14	65,000			65,000	5 MO Amort	53,875	11,125
			<u>65,000</u>			<u>65,000</u>		<u>53,875</u>	<u>11,125</u>
	Grand Totals		251,771			226,069		194,401	26,461
	Less: Dispositions and Transfers		251,771			226,069		194,401	26,461
	Less: Start-up/Org Expense		0			0		0	0
	Net Grand Totals		<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
Prior MACRS:											
1	COMPUTER EQUIPMENT	10/01/00	4,258				4,258	5	HY S/L	4,058	0
	Sold/Scrapped:	3/01/20									
2	COMPUTER EQUIPMENT	10/01/01	876			X	613	5	HY S/L	726	0
	Sold/Scrapped:	3/01/20									
3	COMPUTER EQUIPMENT	10/01/01	1,191			X	834	3	HY S/L	941	0
	Sold/Scrapped:	3/01/20									
4	COMPUTER EQUIPMENT	10/01/01	400			X	280	3	HY S/L	325	0
	Sold/Scrapped:	3/01/20									
5	COMPUTER EQUIPMENT	9/30/02	719			X	503	3	HY S/L	519	0
	Sold/Scrapped:	3/01/20									
6	COMPUTER EQUIPMENT	10/01/03	718			X	359	3	HY S/L	718	0
	Sold/Scrapped:	3/01/20									
7	COMPUTER EQUIPMENT	4/01/04	2,250			X	1,125	3	HY S/L	2,250	0
	Sold/Scrapped:	3/01/20									
8	OFFICE EQUIPMENT	4/01/04	1,730			X	865	7	HY S/L	1,730	0
	Sold/Scrapped:	3/01/20									
9	TELEPHONE EQUIPMENT	7/01/00	276				276	3	HY S/L	262	0
	Sold/Scrapped:	3/01/20									
10	LIGHTING EQUIPMENT	4/22/00	127				127	5	HY S/L	0	0
	Sold/Scrapped:	3/01/20									
11	SOUND EQUIPMENT	4/12/00	159				159	5	HY S/L	0	0
	Sold/Scrapped:	3/01/20									
12	COSTUME SUPPLIES	3/16/00	171				171	5	HY S/L	0	0
	Sold/Scrapped:	3/01/20									
13	COMPUTER EQUIPMENT	2/01/05	773				773	5	HY S/L	773	0
	Sold/Scrapped:	3/01/20									
14	COMPUTER EQUIPMENT	12/05/05	665				665	5	HY S/L	665	0
	Sold/Scrapped:	3/01/20									
15	OFFICE EQUIPMENT	4/28/11	17,690			X	0	5	HY S/L	17,690	0
	Sold/Scrapped:	3/01/20									
19	OFFICE EQUIPMENT	11/12/18	3,104			X	0	7	HY S/L	3,104	0
	Sold/Scrapped:	3/01/20									
20	OFFICE EQUIPMENT	9/01/16	3,739			X	1,869	7	HY S/L	2,537	0
	Sold/Scrapped:	9/01/19									
			<u>38,846</u>				<u>12,877</u>			<u>36,298</u>	<u>0</u>
Other Depreciation:											
16	RENOVATIONS	9/01/15	90,273				90,273	5	MO S/L	72,218	10,532
	Sold/Scrapped:	4/01/20									
17	RENOVATIONS	9/01/15	57,652				57,652	7	MO S/L	32,944	4,804
	Sold/Scrapped:	4/01/20									
	Total Other Depreciation		<u>147,925</u>				<u>147,925</u>			<u>105,162</u>	<u>15,336</u>
	Total ACRS and Other Depreciation		<u>147,925</u>				<u>147,925</u>			<u>105,162</u>	<u>15,336</u>
	Grand Totals		186,771				160,802			141,460	15,336
	Less: Dispositions and Transfers		186,771				160,802			141,460	15,336
	Net Grand Totals		<u>0</u>				<u>0</u>			<u>0</u>	<u>0</u>

Bonus Depreciation Report**Form 990, Page 1**

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
2	COMPUTER EQUIPMENT	10/01/01	876		0	0	263	613
3	COMPUTER EQUIPMENT	10/01/01	1,191		0	0	357	834
4	COMPUTER EQUIPMENT	10/01/01	400		0	0	120	280
5	COMPUTER EQUIPMENT	9/30/02	719		0	0	216	503
6	COMPUTER EQUIPMENT	10/01/03	718		0	0	359	359
7	COMPUTER EQUIPMENT	4/01/04	2,250		0	0	1,125	1,125
8	OFFICE EQUIPMENT	4/01/04	1,730		0	0	865	865
15	OFFICE EQUIPMENT	4/28/11	17,690		0	0	17,690	0
19	OFFICE EQUIPMENT	11/12/18	3,104		0	0	3,104	0
20	OFFICE EQUIPMENT	9/01/16	3,739		0	0	1,603	2,136
Grand Total			32,417		0	0	25,702	6,715
Less: Dispositions and Transfers			32,417		0	0	25,702	6,715
Net Grand Total			0		0	0	0	0

Depreciation Adjustment Report

All Business Activities

Form	Unit	Asset	Description	Tax	AMT	AMT Adjustments/ Preferences
MACRS Adjustments:						
Page 1	1	1	COMPUTER EQUIPMENT	0	0	0
Page 1	1	2	COMPUTER EQUIPMENT	0	0	0
Page 1	1	3	COMPUTER EQUIPMENT	0	0	0
Page 1	1	4	COMPUTER EQUIPMENT	0	0	0
Page 1	1	5	COMPUTER EQUIPMENT	0	0	0
Page 1	1	6	COMPUTER EQUIPMENT	0	0	0
Page 1	1	7	COMPUTER EQUIPMENT	0	0	0
Page 1	1	8	OFFICE EQUIPMENT	0	0	0
Page 1	1	9	TELEPHONE EQUIPMENT	0	0	0
Page 1	1	10	LIGHTING EQUIPMENT	0	0	0
Page 1	1	11	SOUND EQUIPMENT	0	0	0
Page 1	1	12	COSTUME SUPPLIES	0	0	0
Page 1	1	13	COMPUTER EQUIPMENT	0	0	0
Page 1	1	14	COMPUTER EQUIPMENT	0	0	0
Page 1	1	15	OFFICE EQUIPMENT	0	0	0
Page 1	1	19	OFFICE EQUIPMENT	0	0	0
Page 1	1	20	OFFICE EQUIPMENT	0	0	0
				<u>0</u>	<u>0</u>	<u>0</u>
				<u><u>0</u></u>	<u><u>0</u></u>	<u><u>0</u></u>

Form 990	Two Year Comparison Report	2018 & 2019
For calendar year 2019, or tax year beginning 09/01/19 , ending 08/31/20		

Name

Taxpayer Identification Number

FRACTURED ATLAS, INC.**11-3451703**

		2018	2019	Differences
Revenue	1. Contributions, gifts, grants	1. 25,942,196	22,838,210	-3,103,986
	2. Membership dues and assessments	2. 803,808	728,001	-75,807
	3. Government contributions and grants	3. 705,042	1,021,519	316,477
	4. Program service revenue	4. 920,385	599,750	-320,635
	5. Investment income	5. 215,107	191,364	-23,743
	6. Proceeds from tax exempt bonds	6.		
	7. Net gain or (loss) from sale of assets other than inventory	7. 836,578	354,639	-481,939
	8. Net income or (loss) from fundraising events	8.		
	9. Net income or (loss) from gaming	9.		
	10. Net gain or (loss) on sales of inventory	10.		
	11. Other revenue	11. 1,692	409	-1,283
	12. Total revenue. Add lines 1 through 11	12. 29,424,808	25,733,892	-3,690,916
Expenses	13. Grants and similar amounts paid	13. 22,705,214	19,607,169	-3,098,045
	14. Benefits paid to or for members	14.		
	15. Compensation of officers, directors, trustees, etc.	15.		
	16. Salaries, other compensation, and employee benefits	16. 3,070,003	2,923,364	-146,639
	17. Professional fundraising fees	17.		
	18. Other professional fees	18. 791,419	568,386	-223,033
	19. Occupancy, rent, utilities, and maintenance	19. 249,331	140,206	-109,125
	20. Depreciation and Depletion	20. 42,394	26,461	-15,933
	21. Other expenses	21. 944,464	751,908	-192,556
	22. Total expenses. Add lines 13 through 21	22. 27,802,825	24,017,494	-3,785,331
	23. Excess or (Deficit). Subtract line 22 from line 12	23. 1,621,983	1,716,398	94,415
Other Information	24. Total exempt revenue	24. 29,424,808	25,733,892	-3,690,916
	25. Total unrelated revenue	25.		
	26. Total excludable revenue	26. 1,973,762	1,146,162	-827,600
	27. Total assets	27. 13,454,794	15,069,281	1,614,487
	28. Total liabilities	28. 529,194	38,862	-490,332
	29. Retained earnings	29. 12,925,600	15,030,419	2,104,819
	30. Number of voting members of governing body	30. 12	8	
	31. Number of independent voting members of governing body	31. 12	8	
	32. Number of employees	32. 37	37	
	33. Number of volunteers	33.		

Form 990	Tax Return History	2019
Name FRACTURED ATLAS, INC.		Employer Identification Number 11-3451703

	2015	2016	2017	2018	2019	2020
Contributions, gifts, grants	19,226,518	22,407,764	24,164,905	26,647,238	23,859,729	
Membership dues	770,763	794,183	809,105	803,808	728,001	
Program service revenue	2,041,142	1,205,085	1,130,777	920,385	599,750	
Capital gain or loss	-47,890		392,600	836,578	354,639	
Investment income	165,591	142,677	190,836	215,107	191,364	
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue	505	1,195	3,756	1,692	409	
Total revenue	22,156,629	24,550,904	26,691,979	29,424,808	25,733,892	
Grants and similar amounts paid	17,379,264	18,025,557	20,299,827	22,705,214	19,607,169	
Benefits paid to or for members						
Compensation of officers, etc.						
Other compensation	2,851,033	3,185,278	3,054,778	3,070,003	2,923,364	
Professional fees	460,429	163,282	634,500	791,419	568,386	
Occupancy costs	242,602	232,278	250,690	249,331	140,206	
Depreciation and depletion	40,471	39,824	39,825	42,394	26,461	
Other expenses	1,725,458	1,061,962	819,109	944,464	751,908	
Total expenses	22,699,257	22,708,181	25,098,729	27,802,825	24,017,494	
Excess or (Deficit)	-542,628	1,842,723	1,593,250	1,621,983	1,716,398	
Total exempt revenue	22,156,629	24,550,901	26,691,979	29,424,808	25,733,892	
Total unrelated revenue						
Total excludable revenue	2,159,348	1,348,957	1,717,969	1,973,762	1,146,162	
Total Assets	9,101,801	11,446,740	13,520,975	13,454,794	15,069,281	
Total Liabilities	538,152	476,156	891,650	529,194	38,862	
Net Fund Balances	8,563,649	10,970,584	12,629,325	12,925,600	15,030,419	

Taxable Interest on Investments

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
INTEREST INCOME	\$ 191,364		14			
TOTAL	<u>\$ 191,364</u>					

Federal Statements

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
CONSULTING	\$ 507,966	\$ 393,399	\$ 49,427	\$ 65,140
TOTAL	<u>\$ 507,966</u>	<u>\$ 393,399</u>	<u>\$ 49,427</u>	<u>\$ 65,140</u>

Form 990, Part IX, Line 24e - All Other Expenses

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
UTILITIES	\$ 10,921	\$ 7,099	\$ 1,638	\$ 2,184
BAD DEBT	4,350	3,204	491	655
TOTAL	<u>\$ 15,271</u>	<u>\$ 10,303</u>	<u>\$ 2,129</u>	<u>\$ 2,839</u>

Schedule A, Part II, Line 1(e)

Description	Amount
	\$ 728,001
PPP LOAN FORGIVENESS	522,308
4CULTURE	7,750
ARIZONA COMMISSION ON THE ARTS	4,000
BOSTON CULTURAL COUNCIL	2,325
CITIZENS FOR ARTS IN PA	3,500
CITY OF BOSTON MAYORS OFFICE	15,000
CITY OF CHARLOTTESVILLE	500
COMMISSIONER OF ST MARYS COUNTY GA	250
CONNECTICUT OFFICE OF THE ARTS	16,800
CONVENTION AUTHORITY OF THE CITY PRO	2,000
COUNCIL OF LITERARY MAGAZINES	563
DANE COUNTY CULTURAL AFFAIRS	575
DURHAM ARTS COUNCIL	3,400
HUDSON COUNTY OFFICE OF CULTURAL	6,809
KENT CULTURAL ALLIANCE	1,000
NATIONAL ENDOWMENT OF THE ARTS	10,000
NYC DEP OF CULTURAL AFFAIRS	283,020
NYS COUNCIL ON THE ARTS	96,450
PA COUNCIL ON THE ARTS	3,900
PA HUMANITIES COUNCIL	2,000
POCONO ARTS COUNCIL	4,569
THE PHILADELPHIA CULTURAL FUND	1,619
TRUSTEES OF THE PUBLIC LIBRARY	1,600
US DEPARTMENT OF STATE EMBASSY	12,000
US EMBASSY MOZAMBIQUE	19,581
CORPORATE	1,922,653
FOUNDATIONS	12,072,886
INDIVIDUALS	8,621,858
INDIVIDUALS - NONCASH	498
INDIVIDUALS - NONCASH	1,933
INDIVIDUALS - NONCASH	171,766
INDIVIDUALS - NONCASH	42,670
INDIVIDUALS - NONCASH	320
INDIVIDUALS - NONCASH	1,334
INDIVIDUALS - NONCASH	2,292

Federal Statements

Schedule A, Part II, Line 1(e) (continued)

<u>Description</u>	<u>Amount</u>
TOTAL	\$ <u>24,587,730</u>

Schedule A, Part II, Line 8(e)

<u>Description</u>	<u>Amount</u>
INTEREST INCOME	\$ <u>191,364</u>
TOTAL	\$ <u>191,364</u>

Schedule A, Part II, Line 9(e)

<u>Description</u>	<u>Amount</u>
TOTAL	\$ <u>0</u>

Schedule A, Part II, Line 12 - Current year

<u>Description</u>	<u>Amount</u>
PROGRAM SERVICE FEES	\$ 497,599
NON DEDUCTIBLE PORTION OF CON	102,151
MISCELLANEOUS	<u>409</u>
TOTAL	\$ <u>600,159</u>

New York Diagnostics

Critical Messages

None

Informational Messages

- Electronic filing for the federal return is indicated; Form CHAR500 must be paper filed; The form is not available for electronic filing by software providers through the New York Department of Taxation
- Date of tax exemption claimed from is required entry for Form CT-247

Return Summary

For calendar year 2019, or tax year beginning 09-01-19 , and ending 08-31-20

11-3451703

FRACTURED ATLAS, INC.

Income

Federal unrelated business income _____
 NYS Article 13 tax _____
 Additions for S corporations _____
 Other additions _____

Income

Other income _____
 S corporation subtractions _____
 Other subtractions _____

Total subtractions

State net operating loss deduction _____
 Taxable income _____
 Apportionment percentage _____%

Apportioned taxable income

Taxes / Credits / Payments

Tax on taxable income _____
 Minimum tax _____

Tax

Paid with extension _____
 Estimated tax payments _____
 Other payments _____

Total payments

Overpayment applied to next year's estimated tax _____

Net tax due

Additions to Tax

Interest on late payments _____
 Failure to file penalty _____
 Failure to pay penalty _____

total additions

Balance due

Refund

Form CHAR500 - Annual Filing Information

Total support / revenue 25,733,892
 Net assets 15,030,419

Filing Fees

Article 7-A _____ 25
 Estates / trust law _____ 750
Total _____ 775

Miscellaneous Information

Amended return _____
 Return / extended due dates:
 Form CHAR500 01-15-21
 Form CT-13 _____

Next Year's Estimates

2nd installment _____
 3rd installment _____
 4th installment _____
Total _____

Filing Instructions

FRACTURED ATLAS, INC.

New York Annual Report

Taxable Year Ended August 31, 2020

Date Due: AS SOON AS POSSIBLE

Remittance: The filing fee for the tax year ended 8/31/20 is \$775. Include a check payable to the New York State Department of Law and write "State Registration Number 06-35-38, for the year ended 8/31/20" on the check.

Mail To: NYS Office of the Attorney General
Charities Bureau Registration Section
28 Liberty Street
New York, NY 10005

Signature: Form CHAR500 should be signed and dated by two appropriate officers.

<h1 style="margin:0;">CHAR500</h1> <p style="margin:0;">NYS Annual Filing for Charitable Organizations www.CharitiesNYS.com</p>	<p style="margin:0; font-size: small;">Send with fee and attachments to: NYS Office of the Attorney General Charities Bureau Registration Section 28 Liberty Street New York, NY 10005</p>	<h2 style="margin:0;">2019</h2> <h3 style="margin:0;">Open to Public Inspection</h3>
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1. General Information

For Fiscal Year Beginning (mm/dd/yyyy) <u>09/01/2019</u> and Ending (mm/dd/yyyy) <u>08/31/2020</u>		
Check if Applicable: <input type="checkbox"/> Address Change <input type="checkbox"/> Name Change <input type="checkbox"/> Initial Filing <input type="checkbox"/> Final Filing <input type="checkbox"/> Amended Filing <input type="checkbox"/> Reg ID Pending	Name of Organization: <u>FRACTURED ATLAS, INC.</u>	Employer Identification Number (EIN): <u>11-3451703</u>
	Mailing Address: <u>228 PARK AVENUE SOUTH #56651</u>	NY Registration Number: <u>06-35-38</u>
	City / State / Zip: <u>NEW YORK NY 10003</u>	Telephone: <u>212-277-8020</u>
	Website: <u>WWW.FRACTUREDATLAS.ORG</u>	Email: <u>JILLIAN.WRIGHT@FRACTUREDATLAS.ORG</u>
Check your organization's registration category: <input type="checkbox"/> 7A only <input type="checkbox"/> EPTL only <input checked="" type="checkbox"/> DUAL (7A & EPTL) <input type="checkbox"/> EXEMPT* Confirm your Registration Category in the Charities Registry at www.CharitiesNYS.com .		

2. Certification

See instructions for certification requirements. Improper certification is a violation of law that may be subject to penalties. The certification requires two signatories.

We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report.

President or Authorized Officer:	Signature	Print Name and Title	Date
Chief Financial Officer or Treasurer:	Signature	Print Name and Title	Date

3. Annual Reporting Exemption

Check the exemption(s) that apply to your filing. If your organization is claiming an exemption under one category (7A or EPTL only filers) or both categories (DUAL filers) that apply to your registration, complete only parts 1, 2, and 3, and submit the certified Char500. No fee, schedules, or additional attachments are required. If you cannot claim an exemption or are a DUAL filer that claims only one exemption, you must file applicable schedules and attachments and pay applicable fees.

3a. 7A filing exemption: Total contributions from NY State including residents, foundations, government agencies, etc. did not exceed \$25,000 and the organization did not engage a professional fund raiser (PFR) or fund raising counsel (FRC) to solicit contributions during the fiscal year.

3b. EPTL filing exemption: Gross receipts did not exceed \$25,000 and the market value of assets did not exceed \$25,000 at any time during the fiscal year.

4. Schedules and Attachments

See the following page for a checklist of schedules and attachments to complete your filing.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	4a. Did your organization use a professional fund raiser, fund raising counsel or commercial co-venturer for fund raising activity in NY State? If yes, complete Schedule 4a.
	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	4b. Did the organization receive government grants? If yes, complete Schedule 4b.

5. Fee

See the checklist on the next page to calculate your fee(s). Indicate fee(s) you are submitting here:	7A filing fee: \$ <u>25</u>	EPTL filing fee: \$ <u>750</u>	Total fee: \$ <u>775</u>	Make a single check or money order payable to: <u>"Department of Law"</u>
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FRACTURED ATLAS, INC.

11-3451703

CHAR500

Annual Filing Checklist

Simply submit the certified CHAR500 with no fee, schedule, or additional attachments IF:

- Your organization is registered as 7A only and you marked the 7A filing exemption in Part 3.
- Your organization is registered as EPTL only and you marked the EPTL filing exemption in Part 3.
- Your organization is registered as DUAL and you marked both the 7A and EPTL filing exemption in Part 3.

Checklist of Schedules and Attachments

Check the schedules you must submit with your CHAR500 as described in Part 4:

- If you answered "yes" in Part 4a, submit Schedule 4a: Professional Fund Raisers (PFR), Fund Raising Counsel (FRC), Commercial Co-Venturers (CCV)
- If you answered "yes" in Part 4b, submit Schedule 4b: Government Grants

Check the financial attachments you must submit with your CHAR500:

- IRS Form 990, 990-EZ, or 990-PF, and 990-T if applicable
- All additional IRS Form 990 Schedules, including Schedule B (Schedule of Contributors). Schedule B of public charities is exempt from disclosure and will not be available for public review.
- Our organization was eligible for and filed an IRS 990-N e-postcard. Our revenue exceeded \$25,000 and/or our assets exceeded \$25,000 in the filing year. We have included an IRS Form 990-EZ for state purposes only.

If you are a 7A only or DUAL filer, submit the applicable independent Certified Public Accountant's Review or Audit Report:

- Review Report if you received total revenue and support greater than \$250,000 and up to \$750,000.
- Audit Report if you received total revenue and support greater than \$750,000
- No Review Report or Audit Report is required because total revenue and support is less than \$250,000
- We are a DUAL filer and checked box 3a, no Review Report or Audit Report is required

Calculate Your Fee

For 7A and DUAL filers, calculate the 7A fee:

- \$0, if you checked the 7A exemption in Part 3a
- \$25, if you did not check the 7A exemption in Part 3a

For EPTL and DUAL filers, calculate the EPTL fee:

- \$0, if you checked the EPTL exemption in Part 3b
- \$25, if the NET WORTH is less than \$50,000
- \$50, if the NET WORTH is \$50,000 or more but less than \$250,000
- \$100, if the NET WORTH is \$250,000 or more but less than \$1,000,000
- \$250, if the NET WORTH is \$1,000,000 or more but less than \$10,000,000
- \$750, if the NET WORTH is \$10,000,000 or more but less than \$50,000,000
- \$1500, if the NET WORTH is \$50,000,000 or more

Send Your Filing

Send your CHAR500, all schedules and attachments, and total fee to:

NYS Office of the Attorney General
Charities Bureau Registration Section
28 Liberty Street
New York, NY 10005

Need Assistance?

Visit: www.CharitiesNYS.com
Call: (212) 416-8401
Email: Charities.Bureau@ag.ny.gov

CHAR500 Annual Filing for Charitable Organizations (Updated January 2020)

1022

Is my Registration Category 7A, EPTL, DUAL or EXEMPT?

Organizations are assigned a Registration Category upon registration with the NY Charities Bureau:

7A filers are registered to solicit contributions in New York under Article 7-A of the Executive Law ("7A")

EPTL filers are registered under the Estates, Powers & Trusts Law ("EPTL") because they hold assets and/or conduct activities for charitable purposes in NY.

DUAL filers are registered under both 7A and EPTL.

EXEMPT filers have registered with the NY Charities Bureau and meet conditions in **Schedule E - Registration Exemption for Charitable Organizations**. These organizations are not required to file annual financial reports but may do so voluntarily.

Confirm your Registration Category and learn more about NY law at www.CharitiesNYS.com.

Where do I find my organization's NET WORTH?

NET WORTH for fee purposes is calculated on:

- IRS Form 990 Part I, line 22
- IRS Form 990 EZ Part I, line 21
- IRS Form 990 PF, calculate the difference between Total Assets at Fair Market Value (Part II, line 16(c)) and Total Liabilities (Part II, line 23(b)).

Page 2 of 4

CHAR500Schedule 4b: Government Grants
www.CharitiesNYS.com**2019**
Open to Public
Inspection

If you checked the box in question 4b in Part 4, complete this schedule and list EACH government grant award by a domestic (federal, state or local) agency; interstate or intergovernmental agency (for example Port Authority of New York and New Jersey); and state or local authorities.

Use additional pages if necessary. Include this schedule with your certified CHAR500 NYS Annual Filing for Charitable Organizations.

1. Organization Information

Name of Organization: FRACTURED ATLAS, INC.	NY Registration Number: 06-35-38
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2. Government Grants

Name of Government Agency	Amount of Grant
1. PPP LOAN FORGIVENESS	1. 522,308
2. 4CULTURE	2. 7,750
3. ARIZONA COMMISSION ON THE ARTS	3. 4,000
4. BOSTON CULTURAL COUNCIL	4. 2,325
5. CITIZENS FOR ARTS IN PA	5. 3,500
6. CITY OF BOSTON MAYORS OFFICE	6. 15,000
7. CITY OF CHARLOTTESVILLE	7. 500
8. COMMISSIONER OF ST MARYS COUNTY GA	8. 250
9. CONNECTICUT OFFICE OF THE ARTS	9. 16,800
10. CONVENTION AUTHORITY OF THE CITY PR	10. 2,000
11. COUNCIL OF LITERARY MAGAZINES	11. 563
12. DANE COUNTY CULTURAL AFFAIRS	12. 575
13. DURHAM ARTS COUNCIL	13. 3,400
14. HUDSON COUNTY OFFICE OF CULTURAL	14. 6,809
15. KENT CULTURAL ALLIANCE	15. 1,000
Total Government Grants:	Total:

CHAR500Schedule 4b: Government Grants
www.CharitiesNYS.com**2019**
Open to Public
Inspection

If you checked the box in question 4b in Part 4, complete this schedule and list EACH government grant award by a domestic (federal, state or local) agency; interstate or intergovernmental agency (for example Port Authority of New York and New Jersey); and state or local authorities.

Use additional pages if necessary. Include this schedule with your certified CHAR500 NYS Annual Filing for Charitable Organizations.

1. Organization Information

Name of Organization: FRACTURED ATLAS, INC.	NY Registration Number: 06-35-38
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2. Government Grants

Name of Government Agency	Amount of Grant
1. NATIONAL ENDOWMENT OF THE ARTS	1. 10,000
2. NYC DEP OF CULTURAL AFFAIRS	2. 283,020
3. NYS COUNCIL ON THE ARTS	3. 96,450
4. PA COUNCIL ON THE ARTS	4. 3,900
5. PA HUMANITIES COUNCIL	5. 2,000
6. POCONO ARTS COUNCIL	6. 4,569
7. THE PHILADELPHIA CULTURAL FUND	7. 1,619
8. TRUSTEES OF THE PUBLIC LIBRARY	8. 1,600
9. US DEPARTMENT OF STATE EMBASSY	9. 12,000
10. US EMBASSY MOZAMBIQUE	10. 19,581
11.	11.
12.	12.
13.	13.
14.	14.
15.	15.
Total Government Grants:	Total: 1,021,519

Form **990**
 (Rev. January 2020)
 Department of the Treasury
 Internal Revenue Service

Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
 Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2019
 Open to Public Inspection

A For the 2019 calendar year, or tax year beginning **09/01/19**, and ending **08/31/20**

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization: **FRACTURED ATLAS, INC.**
 Doing business as:
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite: **228 PARK AVENUE SOUTH #56651**
 City or town, state or province, country, and ZIP or foreign postal code: **NEW YORK NY 10003**

D Employer identification number: **11-3451703**
E Telephone number: **212-277-8020**
G Gross receipts: **30,022,949**

F Name and address of principal officer: **RUSSELL WILLIS TAYLOR**

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)

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

J Website: **WWW.FRACTUREDATLAS.ORG** **H(c)** Group exemption number **u**

K Form of organization: Corporation Trust Association Other **u** **L** Year of formation: **2003** **M** State of legal domicile: **NY**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE MISSION OF FRACTURED ATLAS IS TO MAKE THE JOURNEY FROM INSPIRATION TO LIVING PRACTICE MORE ACCESSIBLE AND EQUITABLE FOR ARTISTS AND CREATIVES.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	8
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	8
	5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	37
	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 39	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	27,451,046	24,587,730
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	920,385	599,750
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,051,685	546,003
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,692	409
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	29,424,808	25,733,892
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	22,705,214	19,607,169
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	3,070,003	2,923,364
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) u 806,992		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	2,027,608	1,486,961
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	27,802,825	24,017,494	
19 Revenue less expenses. Subtract line 18 from line 12	1,621,983	1,716,398	
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)	13,454,794	15,069,281
	22 Net assets or fund balances. Subtract line 21 from line 20	529,194	38,862
		12,925,600	15,030,419

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: **TIM CYNOVA** Date: **CO-CEO/BOARD MEMBER**
 Type or print name and title

Paid Preparer Use Only Print/Type preparer's name: **GREGORY S. ROM** Preparer's signature: _____ Date: **01/26/21** Check if self-employed PTIN: **P01318254**
 Firm's name: **MOSES & SCHREIBER LLP** Firm's EIN: **13-1971216**
 Firm's address: **ONE HUNTINGTON QUADRANGLE SUITE 4S05 MELVILLE, NY 11747** Phone no.: **516-352-7700**

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

THE MISSION OF FRACTURED ATLAS IS TO MAKE THE JOURNEY FROM INSPIRATION TO LIVING PRACTICE MORE ACCESSIBLE AND EQUITABLE FOR ARTISTS AND CREATIVES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **21,199,958** including grants of\$ **19,607,170**) (Revenue \$ **21,753**)
FRACTURED ATLAS, INC. CURRENTLY SERVES AS FISCAL SPONSOR TO OVER 3,750 ART GROUPS AND INDEPENDENT ARTISTS IN ALL DISCIPLINES ACROSS THE COUNTRY. BEYOND THE ANNUAL MEMBERSHIP DUES, THERE IS NO ADDITIONAL FEE TO APPLY, AND THE PROGRAM CHARGES A LOW 8% ADMIN FEE ON ALL FUNDS RAISED. CHARACTERIZED BY EFFICIENT ONLINE ACCESS AND ARTISTIC AUTONOMY, FRACTURED ATLAS SPONSORSHIP PROGRAM GOES BEYOND BASIC FISCAL OVERSIGHT TO PROVIDE A VARIETY OF TECHNICAL ASSISTANCE TOOLS THAT BUILD CAPACITY AND SUSTAINABILITY AMONG EMERGING ARTISTS AND ART ORGANIZATIONS.

4b (Code:) (Expenses \$ **277,585** including grants of\$) (Revenue \$ **179,650**)
PROCESSING CONSULTATION/NO OBJECTION LETTERS FOR O & P VISAS FOR INDIVIDUALS APPLYING TO WORK AS ARTISTS IN THE UNITED STATES.

4c (Code:) (Expenses \$ **677,635** including grants of\$) (Revenue \$ **210,000**)
ARTFUL.LY IS AN ONLINE SYSTEM TO MANAGE TICKETS, DONATIONS, AND CONTACTS. IT'S A SIMPLE, STREAMLINED WAY TO ARTISTS AND ARTS ORGANIZATIONS TO KEEP TRACK OF THEIR EVENTS AND CONNECT WITH PEOPLE WHO SUPPORT THEIR WORK.

4d Other program services (Describe on Schedule O.)

(Expenses \$ **449,507** including grants of\$) (Revenue \$ **85,779**)

4e Total program service expenses **22,604,685**

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>	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
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>		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>		X
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		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)? <i>If "Yes," complete Schedule D, Part X</i>		X
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>	X	
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>	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	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? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
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>		X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	X	
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	X	
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
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		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a 37		
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 on 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 u 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?	X	
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?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		X
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?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X

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

Section A. Governing Body and Management

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

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
10b	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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	X	
15b	Other officers or key employees of the organization	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 arrangement with a taxable entity during the year?	X	
16b	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?	X	

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **u AK, AL, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **u**

FRACTURED ATLAS, INC 228 PARK AVENUE SOUTH, #56651
NEW YORK NY 10003 212-277-8020

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 nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(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) SHAWN ANDERSON CTO/BOARD MEMBER	40.00 0.00	X		X				170,420	0	8,521
(2) TIM CYNOVA CO-CEO/BOARD MEMBER	40.00 0.00	X		X				164,543	0	8,227
(3) PALLAVI SHARMA CPO/BOARD MEMBER	40.00 0.00	X		X				170,420	0	0
(4) LAUREN RUFFIN CERO/BOARD MEMBER	40.00 0.00	X		X				164,543	0	0
(5) RAMPHIS CASTRO BOARD MEMBER	0.00 0.00	X						0	0	0
(6) MUKTI KHAIRE BOARD MEMBER	0.00 0.00	X						0	0	0
(7) CHRISTOPHER J. MACKIE, PHD BOARD MEMBER	0.00 0.00	X						0	0	0
(8) ELIZABETH SCOTT TREASURER	0.00 0.00	X		X				0	0	0
(9) HOLLY SIDFORD VICE CHAIR	0.00 0.00	X		X				0	0	0
(10) E. ANDREW TAYLOR BOARD MEMBER	0.00 0.00	X						0	0	0
(11) RUSSELL WILLIS TAYLOR CHAIR	0.00 0.00	X		X				0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(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			
(12) LISA YANCEY	0.00									
SECRETARY	0.00	X		X				0	0	
1b Subtotal								669,926	16,748	
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								669,926	16,748	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **u4**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **u**

0

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	1a Federated campaigns	1a					
	b Membership dues	1b	728,001				
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	1,021,519				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	22,838,210				
	g Noncash contributions included in lines 1a-1f	1g	\$ 844,333				
	h Total. Add lines 1a-1f	u	24,587,730				
Program Service Revenue	2a PROGRAM SERVICE FEES	Business Code	497,599	497,599			
	b NON DEDUCTIBLE PORTION OF CON		102,151	102,151			
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f	u	599,750				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	u	191,364			191,364	
	4 Income from investment of tax-exempt bond proceeds	u					
	5 Royalties	u					
	6a Gross rents	(i) Real					
		(ii) Personal					
		6b Less: rental expenses	6b				
	c Rental inc. or (loss)	6c					
	d Net rental income or (loss)	u					
	7a Gross amount from sales of assets other than inventory	(i) Securities		4,643,696			
		(ii) Other					
		7b Less: cost or other basis and sales exps.	7b	4,258,148	30,909		
	c Gain or (loss)	7c	385,548	-30,909			
	d Net gain or (loss)	u	354,639	354,639			
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a					
b Less: direct expenses		8b					
c Net income or (loss) from fundraising events	u						
9a Gross income from gaming activities. See Part IV, line 19	9a						
	b Less: direct expenses	9b					
c Net income or (loss) from gaming activities	u						
10a Gross sales of inventory, less returns and allowances	10a						
	b Less: cost of goods sold	10b					
	c Net income or (loss) from sales of inventory	u					
Miscellaneous Revenue	11a MISCELLANEOUS	Business Code	409	409			
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d	u	409				
12 Total revenue. See instructions	u	25,733,892	954,798	0	191,364		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	12,499,407	12,499,407		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	7,029,964	7,029,964		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	77,798	77,798		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,488,865	1,617,762	373,330	497,773
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	86,071	55,946	12,911	17,214
9 Other employee benefits	169,677	110,290	25,451	33,936
10 Payroll taxes	178,751	116,188	26,813	35,750
11 Fees for services (nonemployees):				
a Management				
b Legal	44,320	31,239	5,606	7,475
c Accounting	16,100	10,465	2,415	3,220
d Lobbying				
e Professional fundraising services. See Part IV, line 7				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	507,966	393,399	49,427	65,140
12 Advertising and promotion	128,869	84,593	18,975	25,301
13 Office expenses	19,591	13,221	2,730	3,640
14 Information technology				
15 Royalties				
16 Occupancy	140,206	91,134	21,031	28,041
17 Travel	28,745	21,893	2,937	3,915
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	26,461	17,199	3,970	5,292
23 Insurance	14,399	9,359	2,160	2,880
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a SERVICE CHARGES & PROCESS	322,728	264,999	24,741	32,988
b TELECOM & INTERNET	107,591	71,760	15,356	20,475
c DUES & SUBSCRIPTIONS	98,830	66,371	13,911	18,548
d LICENSES AND PERMITS	15,884	11,395	1,924	2,565
e All other expenses	15,271	10,303	2,129	2,839
25 Total functional expenses. Add lines 1 through 24e	24,017,494	22,604,685	605,817	806,992
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance 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	2,588,748	1	2,674,035
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	221,668	4	159,432
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b	46,244	10c
	11 Investments—publicly traded securities	9,312,300	11	11,711,396
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets	466,259	14	455,134
	15 Other assets. See Part IV, line 11	819,575	15	69,284
16 Total assets. Add lines 1 through 15 (must equal line 33)	13,454,794	16	15,069,281	
Liabilities	17 Accounts payable and accrued expenses	326,694	17	38,862
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	202,500	25	
	26 Total liabilities. Add lines 17 through 25	529,194	26	38,862
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	-165,707	27	295,277
	28 Net assets with donor restrictions	13,091,307	28	14,735,142
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	12,925,600	32	15,030,419
33 Total liabilities and net assets/fund balances	13,454,794	33	15,069,281	

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	25,733,892
2	Total expenses (must equal Part IX, column (A), line 25)	2	24,017,494
3	Revenue less expenses. Subtract line 2 from line 1	3	1,716,398
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	12,925,600
5	Net unrealized gains (losses) on investments	5	388,421
6	Donated services and use of facilities	6	50,247
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-50,247
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	15,030,419

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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
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?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

u Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization

FRACTURED ATLAS, INC.

Employer identification number

11-3451703

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

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

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

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

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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	19,997,281	23,201,947	24,974,010	27,451,046	24,587,730	120,212,014
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	19,997,281	23,201,947	24,974,010	27,451,046	24,587,730	120,212,014
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						120,212,014

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4	19,997,281	23,201,947	24,974,010	27,451,046	24,587,730	120,212,014
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	165,591	142,677	190,836	215,107	191,364	905,575
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.)						
11 Total support. Add lines 7 through 10						121,117,589
12 Gross receipts from related activities, etc. (see instructions)					12	1,522,236
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 2019 (line 6, column (f) divided by line 11, column (f))	14	99.25 %
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	99.23 %
16a 33 1/3% support test—2019. 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—2018. 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—2019. 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—2018. 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) u	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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) u	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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 2019 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2019. 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—2018. 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)*

- 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?
 - b** A family member of a person described in (a) above?
 - 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.*

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations

- 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.*
- 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.*

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

- 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).*

	Yes	No
1		

Section D. All Type III Supporting Organizations

- 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?
- 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).*
- 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.*

	Yes	No
1		
2		
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** 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.*
 - c** 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.*
 - 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.*
- 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.*
 - 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.*

	Yes	No
2a		
2b		
3a		
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).		

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 2019 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-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required-explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
a	From 2014			
b	From 2015			
c	From 2016			
d	From 2017			
e	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2015			
b	Excess from 2016			
c	Excess from 2017			
d	Excess from 2018			
e	Excess from 2019			

Schedule B
 (Form 990, 990-EZ,
 or 990-PF)
 Department of the Treasury
 Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

2019

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

Name of the organization FRACTURED ATLAS, INC.	Employer identification number 11-3451703
--	---

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 33¹/₃% 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).

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization FRACTURED ATLAS, INC.	Employer identification number 11-3451703
--	---

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
1	FIDELITY CHARITABLE GIFT FUND P.O. BOX 770001 CINCINNATI OH 45277	\$ 803,067	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	JESSICA CARES FOUNDATION 245 OLD HOOK ROAD STE 2A WESTWOOD NJ 07675	\$ 550,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	.....	\$ .....	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

**SCHEDULE C
(Form 990 or 990-EZ)**

Political Campaign and Lobbying Activities

OMB No. 1545-0047

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2019

Department of the Treasury
Internal Revenue Service

u Complete if the organization is described below. **u** Attach to Form 990 or Form 990-EZ.
u Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization FRACTURED ATLAS, INC.	Employer identification number 11-3451703
--	---

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) **u** \$
- 3 Volunteer hours for political campaign activities (see instructions)

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 **u** \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 **u** \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities **u** \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities **u** \$
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b **u** \$
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

Schedule C (Form 990 or 990-EZ) 2019

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)	0													
b Total lobbying expenditures to influence a legislative body (direct lobbying)	0													
c Total lobbying expenditures (add lines 1a and 1b)	0													
d Other exempt purpose expenditures	0													
e Total exempt purpose expenditures (add lines 1c and 1d)	0													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)														
h Subtract line 1g from line 1a. If zero or less, enter -0-														
i Subtract line 1f from line 1c. If zero or less, enter -0-														
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
 See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount	2,000				2,000
b Lobbying ceiling amount (150% of line 2a, column (e))					3,000
c Total lobbying expenditures				0	
d Grassroots nontaxable amount	600				600
e Grassroots ceiling amount (150% of line 2d, column (e))					900
f Grassroots lobbying expenditures				0	

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE C, PART I-A, LINE 1

IN PRIOR YEARS, FRACTURED ATLAS WORKED THROUGH LOBBY EFFORTS AT THE NEW YORK CITY AND NEW YORK STATE LEVEL TO EDUCATE POLICYMAKERS ABOUT THE IMPORTANCE OF CULTURAL SECTOR INFRASTRUCTURE AND FUNDING ON LOCAL, STATE, AND FEDERAL LEVELS. WE HAVE LOBBIED FOR POLICIES AND LEGISLATION THAT WILL HELP ARTISTS AND ARTS ORGANIZATIONS MAKE WORK AND CONTRIBUTE TO THEIR

Part IV Supplemental Information *(continued)*

COMMUNITIES. DURING THIS FISCAL YEAR, FRACTURED ATLAS DID NOT WORK WITH ANY LOBBYING SERVICES.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
u 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.
u Attach to Form 990.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization

Employer identification number

FRACTURED ATLAS, INC.

11-3451703

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.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 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? (Yes/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? (Yes/No)

Part II Conservation Easements.

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 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. (2a Total number of conservation easements, 2b Total acreage restricted by conservation easements, 2c Number of conservation easements on a certified historic structure included in (a), 2d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register), 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year u, 4 Number of states where property subject to conservation easement is located u, 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 u, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year u \$, 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.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. 1b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 u \$, (ii) Assets included in Form 990, Part X u \$, 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 u \$, b Assets included in Form 990, Part X u \$

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange program
 - 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 Yes No

Part V Endowment Funds.

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

- | | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|---|------------------|----------------|--------------------|----------------------|---------------------|
| 1a Beginning of year balance | | | | | |
| b Contributions | | | | | |
| c Net investment earnings, gains, and losses | | | | | |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | | | | | |
| f Administrative expenses | | | | | |
| g End of year balance | | | | | |
- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment **u**
 - b** Permanent endowment **u**
 - c** Term endowment **u**
- 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 | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

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

Part VII Investments – Other Securities.

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

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

Part VIII Investments – Program Related.

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

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

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.) ... u	

Part X Other Liabilities.

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

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

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

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

u Attach to Form 990.

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

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization

FRACTURED ATLAS, INC.

Employer identification number

11-3451703

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
CANADA					
(1)	1	1	GRANTS TO RECIPIENT		4,386
COLUMBIA					
(2)	1	1	GRANTS TO RECIPIENT		330
ISRAEL					
(3)	1	1	GRANTS TO RECIPIENT		10,400
UNITED KINGDOM					
(4)	1	1	GRANTS TO RECIPIENT		22,916
SLOVENIA					
(5)	1	1	GRANTS TO RECIPIENT		2,740
PUERTO RICO					
(6)	1	1	GRANTS TO RECIPIENT		4,660
SWEDEN					
(7)	1	1	GRANTS TO RECIPIENT		856
SPAIN					
(8)	1	1	GRANTS TO RECIPIENT		10
ITALY					
(9)	1	1	GRANT TO RECIPIENT		27,600
NETHERLANDS					
(10)	1	1	GRANT TO RECIPIENT		100
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal	10	10			73,998
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	10	10			73,998

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

Schedule F (Form 990) 2019

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **u** _____

3 Enter total number of other organizations or entities **u** _____

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) GRANTS FOR PROJECTS	CANADA	3	8,136				
(2) GRANTS FOR PROJECTS	COLUMBIA	1	330				
(3) GRANTS FOR PROJECTS	ISRAEL	2	10,400				
(4) GRANTS FOR PROJECTS	ITALY	1	27,600				
(5) GRANTS FOR PROJECTS	PUERTO RICO	1	4,660				
(6) GRANTS FOR PROJECTS	SPAIN	1	10				
(7) GRANTS FOR PROJECTS	SWEDEN	2	856				
(8) GRANTS FOR PROJECTS	UNITED KINGDOM	1	22,916				
(9) GRANTS FOR PROJECTS	NETHERLANDS	1	100				
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

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 3 - ACTIVITIES PER REGION

REGION	EXPENDITURES	INVESTMENTS
CANADA	\$ 4,386	\$ 0
COLUMBIA	\$ 330	\$ 0
ISRAEL	\$ 10,400	\$ 0
UNITED KINGDOM	\$ 22,916	\$ 0
SLOVENIA	\$ 2,740	\$ 0
PUERTO RICO	\$ 4,660	\$ 0
SWEDEN	\$ 856	\$ 0
SPAIN	\$ 10	\$ 0
ITALY	\$ 27,600	\$ 0
NETHERLANDS	\$ 100	\$ 0

PART V - ADDITIONAL INFORMATION

WHETHER THE FUNDED ARTIST IS OUTSIDE OR INSIDE THE UNITED STATES, THE PROCEDURE IS THE SAME. FRACTURED ATLAS REQUIRES SUPPORT FROM THE ARTIST FOR GRANT MONEY RELEASED TO THE ARTIST.

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
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Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
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OMB No. 1545-0047
2019
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

FRACTURED ATLAS, INC.

Employer identification number

11-3451703

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
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1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	23 ELEPHANTS THEATRE COMPANY PO BOX 1939 SAN ANSELMO CA 94979	81-5011533		11,939				
(2)	2D4D 7080 SW TIERRA DEL MAR DRIVE BEAVERTON OR 97007	83-2697631		15,178				
(3)	8-BALL COMMUNITY, INC. 59 EAST 4TH ST NEW YORK NY 10003	81-3963763		11,837				
(4)	A CAPPELLA ACADEMY 1880 CENTURY PARK EAST LOS ANGELES CA 90067	46-2987726		9,074				
(5)	A MZUNGU FILM LLC 86 HORATIO ST. NEW YORK NY 10014	81-0814793		11,415				
(6)	A NIGHT OF FIREFLIES PRODUCTIONS 3254 34TH STREET, 2ND FLOOR ASTORIA NY 11106	45-4662666		8,800				
(7)	A&A BALLET 310 S. MICHIGAN AVENUE CHICAGO IL 60604	81-3341406		31,168				
(8)	ACTING FOR KIDS AND TEENS 1633 NW GLISAN PORTLAND OR 97209	82-4589746		5,305				
(9)	ACTIVE VERB, LLC ERIN COLLEEN BUCKL 427 6TH STREET BROOKLYN NY 11215	84-4064951		19,370				

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **u 48**
- 3 Enter total number of other organizations listed in the line 1 table **u 990**

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Schedule I (Form 990) (2019)

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(1)	ACTOR'S EXPRESS, INC. 887 WEST MARIETTA STREET SUITE J-10 ATLANTA GA 30318	58-1808173		7,821				
(2)	ADAM MARKS, INC. 720 FORT WASHINGTON AVE. NEW YORK NY 10040	83-1833137		6,584				
(3)	AFRO HOUSE PRODUCTIONS, LLC 4431 HARCOURT ROAD BALTIMORE MD 21214	45-3950242		22,284				
(4)	AH FILMS 2146 SW HARBOR PLACE PORTLAND OR 97201	81-0964058		5,775				
(5)	AI FOR THE PEOPLE 666 HANCOCK STREET BROOKLYN NY 11233	84-3671638		18,400				
(6)	ALOFT DANCE 3428 W MCLEAN CHICAGO IL 60647	27-2819500		29,546				
(7)	ALOHA FRIDAY GALLERY LLC 3212 LOULU STREET HONOLULU HI 96822	81-4030388		8,078				
(8)	AMBASSABURGH MICROARTS D/B/A PHILLT 12121 FRANKSTOWN AVE PITTSBURGH PA 15235	84-4019533		13,414				
(9)	AMERICAN ABSTRACT ARTISTS C/O GARY GOLKIN NEW YORK NY 10012	13-3389638		43,384				

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Schedule I (Form 990) (2019)

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(1)	ANGELA HARRIELL 235 LEONARD STREET BROOKLYN NY 11211	27-2792860		6,348				
(2)	ANNA FRANTS 901 BRICKELL KEY BLVD MIAMI FL 33131	57-9173318		281,659				
(3)	APOYONLINE - ASSOCIATION FOR HERITA 11712 STONEWOOD LANE ROCKVILLE MD 20852	26-3676026		14,700				
(4)	AREA CAPITAL LLC DBA THE WORLD AROU 65 EAST 55TH STREET NEW YORK NY 10022	82-2963029		48,924				
(5)	ARKANSASSTAGED 129 S. GREGG FAYETTEVILLE AR 72701	81-4970940		19,811				
(6)	AROESTE MUSIC LLC 57 GREEN RIVER VALLEY ROAD ALFORD MA 01230	80-0009833		17,176				
(7)	ART HANDLER MAGAZINE LLC 29 HALSEY STREET BROOKLYN NY 11216	47-1633687		11,219				
(8)	ARTICULATE THEATRE COMPANY LLC 379 LEFFERTS AVE BROOKLYN NY 11225	46-4891932		16,150				
(9)	ARTISAN GALLERY 218 LLC 218 5TH STREET DES MOINES IA 50265	47-5022557		5,589				

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(1)	ARTISTIC DREAMS INTERNATIONAL, INC. 2753 BROADWAY 167 NEW YORK NY 10025	45-2558520		9,200				
(2)	ARTISTS AT PLAY, LLC P.O. BOX 572 ALHAMBRA CA 91802	46-5445311		5,717				
(3)	ARTRAGEOUS WITH NATE, LLC 326 N KENYON AVENUE INDIANAPOLIS IN 46219	45-5261857		48,950				
(4)	ARTS FOR ALL ABILITIES CONSORTIUM L 262 W. 107 STREET NEW YORK NY 10025	81-4976214		12,451				
(5)	ARTS.BLACK LLC. 1099 PARKER DETROIT MI 48214	81-4397217		45,521				
(6)	AS BALLETT NEW YORK LTD. 300 W. 38TH ST. NEW YORK NY 10018	45-3031889		18,328				
(7)	ASBURY PARK DANCE FESTIVAL 96 FRANKLIN AVENUE OCEAN GROVE NJ 07756	83-3232264		10,932				
(8)	ASPIRING YOUNG ARTISTS PROJECT 1324 SOUTH CLEVELAND STREET PHILADELPHIA PA 19146	81-2971664		5,985				
(9)	ASSOCIATION OF ARTS ADMINISTRATION 37 KNEELAND STREET CRANSTON RI 02905	95-3416945		35,000				

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(1)	ASYLUM FILM 2425 GOLDEN RAIN ROAD WALNUT CREEK CA 94595	84-2460592		9,300				
(2)	ATLANTA ART PAPERS, INC PO BOX 5748 ATLANTA GA 31107	58-1404850		7,625				
(3)	ATLANTA CHAMBER PLAYERS INC PO BOX 5438 ATLANTA GA 31107	58-1280281		5,002				
(4)	ATLANTA CONTEMPORARY ART CENTER INC 535 MEANS STREET NW ATLANTA GA 30318	58-1174492		13,534				
(5)	ATLANTA PRESERVATION CENTER INC. 327 ST. PAUL AVENUE ATLANTA GA 30312	58-1387857		5,286				
(6)	ATLANTA YOUNG SINGERS OF CALLANWOLD 1085 PONCE DE LEON AVENUE ATLANTA GA 30306	58-1249295		8,079				
(7)	AUTOMAT LLC 319 N 11TH STREET PHILADELPHIA PA 19107	47-3556508		5,232				
(8)	AZILIA FILMS LLC P. O. BOX 853 COLUMBUS GA 31902	81-3556400		13,500				
(9)	BABOON BABOON LLC 2261 MOUNTAIN OAK DR. LOS ANGELES CA 90068	84-2629660		46,500				

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Schedule I (Form 990) (2019)

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(1)	BALLET AND BEYOND NYC INC. 309 W. 75TH ST. NEW YORK NY 10023	81-1705519		15,933				
(2)	BARCLAY BRASS 412 MARIETTA PL NW WASHINGTON DC 20011	81-1496387		9,862				
(3)	BATTLE SOUNDS, INC 68 JAY STREET BROOKLYN NY 11201	11-3487488		51,357				
(4)	BE MUSIC, LLC DBA CONSENSES 150 LAKE VIEW AVENUE CAMBRIDGE MA 02138	27-2938893		64,836				
(5)	BENJAMIN HOLLIDAY WARDELL 3508 W DIVERSEY AVE CHICAGO IL 60647	82-3773043		19,059				
(6)	BESPOKEPLAYS, LLC 9622 OLYMPIC BLVD BEVERLY HILLS CA 90212	83-2002656		6,372				
(7)	BEYOND CATEGORY PRODUCTIONS, LLC 739 MILFORD STREET LOS ANGELES CA 90042	82-5183409		19,328				
(8)	BGSQD 113 HENRY ST. NEW YORK NY 10002	46-0848189		5,116				
(9)	BIELLO MARTIN STUDIO LLC 148 N. 3RD STREET PHILADELPHIA PA 19106	22-3928886		5,492				

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(1)	BIRCH HOUSE IMMERSIVE LLC 4838 N DAMEN AVE CHICAGO IL 60625	37-1176311		5,345				
(2)	BLACK THEATRE COMMONS P.O. BOX 773 NEW YORK NY 10108	82-3372634		30,800				
(3)	BLACK WOMXN FLOURISH LLC 2410 N CHARLES STREET BALTIMORE MD 21218	85-0699007		7,225				
(4)	BLOOMBARS 3222 11TH STREET NW WASHINGTON DC 20001	27-0287369		15,800				
(5)	BMOREART LLC 648 REGESTER AVENUE BALTIMORE MD 21212	46-2443453		226,090				
(6)	BMOREART LLC 648 REGESTER AVENUE BALTIMORE MD 21212	46-2443453		19,490				
(7)	BOSTON FESTIVAL ORCHESTRA 59A STRATHMORE RD. APT. 2 BRIGHTON MA 02135	84-3601675		6,629				
(8)	BRAIN CHANGE FILM, LLC 422 ST MARKS AVE BROOKLYN NY 11238	80-3379871		29,697				
(9)	BRAND RENEWABLE LLC 6420 MAGENTA LANE AUSTIN TX 78739	84-2453807		8,881				

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(1)	BROADWAY CHAMBER PLAYERS, INC. 101 W12TH STREET NEW YORK NY 10011	46-4697187		9,452				
(2)	BROOKLYN METAL WORKS 640 DEAN ST. BROOKLYN NY 11238	27-1417593		10,400				
(3)	BROWN GIRL RECOVERY LLC 780 CONCOURSE VILLAGE WEST BRONX NY 10451	81-5313698		95,690				
(4)	BUILD-A-BAND MUSIC EDUCATION, INC. 545 LINCOLN HIGHWAY COATESVILLE PA 19320	27-3013255		7,384				
(5)	BUILDING BETTER PEOPLE PRODUCTIONS PO BOX 5912 ANNAPOLIS MD 21403	47-5127921		6,931				
(6)	BUILDING PERFORMANCE WORKSHOP P.O. BOX 87024 ATLANTA GA 30337	26-4205528		9,305				
(7)	BULLY MOVIE OUTREACH, INC. 38 MESEROLE STREET, APT. 2D BROOKLYN NY 11206	45-5570588		10,000				
(8)	BULLY MOVIE OUTREACH, INC. 18 W 27TH ST 2ND FLOOR NEW YORK NY 10023	45-5570588		5,500				
(9)	BURIED SEED PRODUCTIONS 3090 KING ST BERKELEY CA 94703	84-2592461		16,705				

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(1)	BURNAWAY INC. 928 PONCE DE LEON AVENUE NE ATLANTA GA 30306	27-1057775		6,003				
(2)	CABINET OF CURIOSITY 211 S TAYLOR OAK PARK IL 60302	83-1316132		22,400				
(3)	CAFE CIII LLC 103 WAVERLY PLACE NEW YORK NY 10011	13-4092564		13,250				
(4)	CAPE DANCE FESTIVAL, LLC 710 WARBURTON AVE 4D YONKERS NY 10701	46-2792328		14,034				
(5)	CARDINAL LLC 1758 PARK AVENUE BALTIMORE MD 21217	82-1595562		9,233				
(6)	CASTLE OF OUR SKINS, INC 7 BOWDOIN AVE DORCHESTER MA 02121	83-4164245		38,264				
(7)	CHAIR-O-PLANE MUSIC, INC. 400 WEST 43RD STREET NEW YORK NY 10036	86-1100404		14,020				
(8)	CHAPEL THEATER LLC 4107 SE HARRISON ST MILWAUKIE OR 97222	82-1455728		11,615				
(9)	CHILDREN'S MUSEUM OF ATLANTA, INC. 275 CENTENNIAL OLYMPIC PARK DRIVE N ATLANTA GA 30313	58-1785484		5,100				

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **u**
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Schedule I (Form 990) (2019)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
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OMB No. 1545-0047

2019

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization

FRACTURED ATLAS, INC.

Employer identification number

11-3451703

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- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
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Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	CHOCONUT CREEK INC. PO BOX 517 TIVOLI NY 12583	20-8501190		6,000				
(2)	CINEVECTOR, LLC 281 LEFFERTS AVENUE BROOKLYN NY 11225	83-3332223		9,913				
(3)	CIRCUSENSE 423 ATLANTIC AVE BROOKLYN NY 11217	81-4566698		21,375				
(4)	CLAPPING HANDS 3348 ALSTON CHAPEL ROAD PITTSBORO NC 27312	47-4098979		20,145				
(5)	CLOCKS IN MOTION PERCUSSION INC. 1218 BAY RIDGE RD. MADISON WI 53716	46-1481171		5,909				
(6)	COMBUSTION COLLECTIVE, LLC 7 DEKALB AVE BROOKLYN NY 11201	83-1109888		11,719				
(7)	COMMOTION - COMMUNITY IN MOTION 6704 WEIMER DRIVE RALEIGH NC 27617	84-4005067		7,211				
(8)	COMPLEXIONS PRODUCTIONS, INC. 22 WILSON DRIVE NEW ROCHELLE NY 10801	82-0836029		46,727				
(9)	CONSTELLATIONS CHAMBER CONCERTS 1768 LANG PL NE WASHINGTON DC 20002	84-2885513		9,050				

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(1)	COOPER-HEWITT, NATIONAL DESIGN MUSE 2 EAST 91ST ST. NEW YORK NY 10128	53-0206027		243,168				
(2)	CREATENET STUDIO LLC 223 SECOND AVENUE NEW YORK NY 10003	47-3862048		16,590				
(3)	CREATIVE CATALYST LLC 434 BRODERICK STREET SAN FRANCISCO CA 94117	84-3329306		10,580				
(4)	CREATIVE WRITING, INC. 12438 KILLION ST VALLEY VILLAGE CA 91607	95-4643017		13,500				
(5)	CRENSHAW DAIRY MART, LLC 8623 S. CRENSHAW BLVD INGLEWOOD CA 90350	84-3149208		105,365				
(6)	CRITICAL FREQUENCY, LLC P.O. BOX 277 KINGS BEACH CA 96143	82-4661886		28,100				
(7)	CROCODILE RIVER MUSIC & MEDIA, LLC 44 PORTLAND STREET WORCESTER MA 01608	90-0762449		148,065				
(8)	CULTUREHOUSE INCORPORATED 30 WALNUT STREET SOMERVILLE MA 02143	84-2003390		31,907				
(9)	CULTUREHOUSE INCORPORATED 30 WALNUT STREET SOMERVILLE MA 02143	84-2003390		5,382				

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(1)	CUTTME PRODUCTIONS LLC PO BOX 36120 DETROIT MI 48236	45-2401295		9,862				
(2)	DADS GARAGE, INC. 569 EZZARD STREET SE ATLANTA GA 30312	58-2244770		6,736				
(3)	DAFNISON MUSIC, INC. 5129 VAN BUREN STREET HOLLYWOOD FL 33021	26-2523288		33,145				
(4)	DANCE CANVAS INC 171 AUBURN AVENUE ATLANTA GA 30303	26-2425825		9,701				
(5)	DANCE KIDS INC. PO BOX 6225 CARMEL CA 93921	77-0334683		29,601				
(6)	DANSE THEATRE SURREALITY, INC. 5906 41ST AVE WOODSIDE NY 11377	84-2174148		23,017				
(7)	DARK STAR FROM HARLEM, LLC 432 EAST 88TH STREET, APT. 408 NEW YORK NY 10128	82-3203389		6,987				
(8)	DEATH OF CLASSICAL LLC 4615 CENTER BOULEVARD LONG ISLAND CITY NY 11109	83-2344591		25,625				
(9)	DIE JIM CROW INC 636 KOSCIUSZKO ST. BROOKLYN NY 11221	83-2361185		7,284				

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(1)	DIGITAL PILGRIM PRODUCTIONS, LLC 139 MARVIN AVENUE UNIONDALE NY 11553	83-4486757		8,487				
(2)	DIMENSIONAL DANCE LLC 32 FOXCROFT RUN AVON CT 06001	61-1782218		9,198				
(3)	DIRECTORS GATHERING 3308 W. QUEEN LN PHILADELPHIA PA 19129	46-5215656		14,078				
(4)	DISABILITY DANCE WORKS LLC ALICE J 3995 PAGE MILL ROAD LOS ALTOS CA 94022	47-3772433		41,815				
(5)	DNAWORKS, LLC 1617 PARK PLACE AVE FORT WORTH TX 76110	26-3181751		64,416				
(6)	DO GOOD LLC 368 BROADWAY NEW YORK NY 10013	47-2522555		54,671				
(7)	DONKEYSADDLE PROJECTS LLC 5932 42ND AVE SW SEATTLE WA 98136	30-1157615		94,362				
(8)	DPICT, LLC 117 WEST ST EASTHAMPTON MA 01027	30-0663414		6,500				
(9)	DRAG OUT THE VOTE 210 LEE BARTON DRIVE AUSTIN TX 78704	84-4397686		20,804				

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(1)	DRAW TO HELP 77 BLUE DIAMOND LANE COLUMBUS NC 28722	32-0587483		5,544				
(2)	EARSACE ENSEMBLE 2101 NELSON ST. RALEIGH NC 27610	81-3685131		14,703				
(3)	EARTH AND AIR: STRING ORCHESTRA 33775 REDBRIDGE LANE SOLON OH 44139	83-2515222		5,500				
(4)	ECLECTIC BREW 215A CARROLL STREET SE ATLANTA GA 30312	27-0359275		147,853				
(5)	EDDIE ADAMS WORKSHOP ORGANIZATION, POB 499 JEFFERSONVILLE NY 12748	83-4540185		29,381				
(6)	EDGE IN MOTION PRODUCTIONS LLC 318 WEST 47TH STREET NEW YORK NY 10036	82-2633375		11,073				
(7)	EIDIA HOUSE INC. 426 EAST 9TH STREET #1C NEW YORK NY 10009	56-2420211		15,706				
(8)	ELISION PRODUCTIONS 3401 E. VIA PALOMITA TUCSON AZ 85718	81-4094804		46,810				
(9)	ELISION PRODUCTIONS 3401 E. VIA PALOMITA TUCSON AZ 85718	81-4094804		7,098				

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(1)	ELMIRA RAHIM 9400 NATIONAL BLVD LOS ANGELES CA 90034	83-2894882		7,904				
(2)	ELYSIAN CAMERATA 1109 WALLACE DRIVE FORT WASHINGTON PA 19034	45-5104443		8,800				
(3)	ENACT, INC. 630 NINTH AVENUE NEW YORK NY 10036	13-3422660		14,172				
(4)	ENCOURAGE MEDIA LLC 11 HALES ROAD WESTPORT CT 06880	83-1813057		18,798				
(5)	ENDELCLOCK, INC. 411 ST. JOHNS PL.#7 BROOKLYN NY 11238	45-5491500		11,511				
(6)	ENDLESS FIELD 72 ELMORE AVE CROTON ON HUDSON NY 10520	82-3876073		12,794				
(7)	ENTER GRACE YOGA 311 WEST 127TH #406 NEW YORK NY 10027	46-3649450		6,600				
(8)	ESPERANZA DANCE PROJECT PO BOX 90064 TUCSON AZ 85752	82-2280520		15,180				
(9)	EUREKA ENSEMBLE CORPORATION 3 GERRY'S LANDING ROAD CAMBRIDGE MA 02138	81-4063626		28,365				

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(1)	EVIDENCE INC 1368 FULTON STREET BROOKLYN NY 11216	11-3334921		7,200				
(2)	FAITH MATTERS NETWORK LLC P.O. BOX 120801 NASHVILLE TN 37212	82-1994801		454,584				
(3)	FILM ETC LLC 89-19 89 AVENUE WOODHAVEN NY 11421	46-1264876		7,000				
(4)	FIREBOYS LLC 3785 PARKDALE ROAD CLEVELAND HEIGHTS OH 44121	81-3178560		10,712				
(5)	FLEMING CONSULTING INC. 10 RUTGERS ST. NEW YORK NY 10002	46-1795631		71,522				
(6)	FLUX PROJECTS, INC. 575 BOULEVARD #30 ATLANTA GA 30312	27-0347975		11,676				
(7)	FOUNDATION FOR DIVERSITY IN THE ART APT. 1D NEW YORK NY 10025-2919	83-0687806		14,910				
(8)	FOUNDATION FOR DIVERSITY IN THE ART 170 DARLING ROAD SALEM CT 06420	83-0687806		12,910				
(9)	FOXHOG PRODUCTIONS 220 EAST 73RD STREET NEW YORK NY 10021	81-0735143		43,799				

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(1)	FREE RANGE HUMANS INC 145 WICOMICO CT NEW MARKET MD 21774	84-5014680		18,553				
(2)	GARY INTERNATIONAL BLACK FILM FESTI 6515 52ND AVE. S. SEATTLE WA 98118	27-3892089		8,955				
(3)	GAS GALLERY LLC 715 S. NORMANDIE AVE LOS ANGELES CA 90005	82-2549536		8,300				
(4)	GATHERING ROOTS RETREAT, LLC 2201 S MAIN ST, APT 103 SEATTLE WA 98144	84-3594171		34,214				
(5)	GEORGIA LAWYERS FOR THE ARTS 887 W MARIETTA STREET NW SUITE J-10 ATLANTA GA 30318	51-0141509		13,646				
(6)	GLASS CEILINGS, LLC 9730 HAYVENHURST AVE NORTHRIDGE CA 91343	84-2249521		24,732				
(7)	GLO ATL, INC. 1054 KIRKWOOD AVE SE ATLANTA GA 30316	27-0272642		9,387				
(8)	GLORY EDIM, WELL-READ BLACK GIRL, L 165 COURT STREET BROOKLYN NY 11201	81-4165668		7,300				
(9)	GOSTIA LLC 411 14TH AVE E SEATTLE WA 98112	47-3724089		20,054				

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(1)	GRIFFIN THEATRE, CHRISTOPHER EVERET 142 BANFF ST BEAR DE 19701	84-2838224		10,649				
(2)	GRX IMMERSIVE LABS 17412 VENTURA BLVD. ENCINO CA 91316	83-1695649		81,682				
(3)	GUAYAKI SUSTAINABLE RAINFOREST PROJ 6782 SEBASTOPOL AVE SEBASTOPOL CA 95472	77-0560794		23,726				
(4)	HAMLET ISN'T DEAD 425 E 75TH ST NEW YORK NY 10021	46-2231944		8,597				
(5)	HAPPENSTANCE THEATER INC. 12718 VEIRS MILL RD. ROCKVILLE MD 20853	20-4639247		34,640				
(6)	HARLEM DANCE CLUB INC. 2816 8TH AVE NEW YORK NY 10039	82-1630347		8,060				
(7)	HARLEM9, INC. 141 WEST 128TH STREET NEW YORK NY 10027	47-4120850		14,000				
(8)	HARMONY IMAGE PRODUCTIONS, INC. 217 PELHAM ROAD PHILADELPHIA PA 19119	23-2916456		22,600				
(9)	HARRISON HOUSE MUSIC, ARTS & ECOLOG PO BOX 416 JOSHUA TREE CA 92252	81-2849984		116,947				

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(1)	HELIAND CONSORT PO BOX 15 BAKERSFIELD VT 05441	46-2943281		6,100				
(2)	HIC INCIPIIT PESTIS PRODUCTIONS 117 PACIFIC ST. BROOKLYN NY 11201	84-3000413		7,715				
(3)	HIP ENTERPRISES, LLC P.O. BOX 90645 SANTA BARBARA CA 93190	56-2507526		8,800				
(4)	HOLD FOR SCOOTER FILMS LLC 1227 PARK AVENUE BALTIMORE MD 21217-4135	83-3670099		7,940				
(5)	HOLD YOUR HORSES FILMS, LLC 4211 LATONA AVE NE SEATTLE WA 98105	83-3109052		18,322				
(6)	HOPE DIES LAST & MORIAH PATERSON 8435 NE GLISAN STREET MSC547 PORTLAND OR 97220	47-4084872		8,000				
(7)	HORIZON THEATRE COMPANY INCORPORATE 1083 AUSTIN AVENUE NE ATLANTA GA 30307	58-1576913		19,448				
(8)	HORSE TRADE THEATRE GROUP 85 E 4TH ST. NEW YORK CITY NY 10003	13-4031477		10,400				
(9)	HUBBUB INC. 377 S HARRISON STREET EAST ORANGE NJ 07018	22-3437756		32,787				

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table u
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Schedule I (Form 990) (2019)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
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OMB No. 1545-0047
2019
**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization

FRACTURED ATLAS, INC.

Employer identification number

11-3451703

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- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
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(1)	HUNGER AND THIRST THEATRE COLLECTIV 215 E. 96TH STREET NEW YORK NY 10128	45-5017669		40,437				
(2)	HUP! PRODUCTIONS LLC 126 THOMAS ST. CRANFORD NJ 07016	47-5232985		7,700				
(3)	IAMRESIDENCY 2030 DELLWOOD AVE. JACKSONVILLE, FL 32204	82-1184793		9,300				
(4)	IBIS PRODUCTIONS, INC. 64 NORMAN AVENUE #2 BROOKLYN NY 11222	20-4884141		40,400				
(5)	IDEAS UNITED, LLC 200 ARIZONA AVE ATLANTA GA 30307	83-2989310		160,800				
(6)	IDEAS UNITED, LLC 200 ARIZONA AVENUE NORTHEAST, SUITE ATLANTA GA 30307	83-2989310		196,730				
(7)	INCEPTION TO EXHIBITION 300 W. 145TH ST. NEW YORK NY 10039	27-2581567		12,900				
(8)	INDIANRAGA INC ONE BROADWAY, 14TH FLOOR CAMBRIDGE MA 02142	46-0621928		31,068				
(9)	INDIGO ARTS ALLIANCE PO BOX 3652 PORTLAND ME 04104	83-1809512		7,061				

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(1)	INNOVOCATIVE THEATRE 18120 FALL CREEK DR LUTZ FL 33558	82-1351467		6,157				
(2)	INSPIRED MASSES 40 ELSON RD. WALTHAM MA 02451	84-2141217		6,100				
(3)	IRVINE MUSIC FESTIVAL 4790 IRVINE BLVD IRVINE CA 92620	47-2261319		9,670				
(4)	JOSHUA WILLIAM GELB 618 E. 9TH STREET NEW YORK NY 10009	11-7684915		19,755				
(5)	KATIES ART PROJECT INC 410 E BROADWAY LONG BEACH NY 11561	37-1886344		6,255				
(6)	KENDALL SQUARE ORCHESTRA INC 28 HOLYOKE RD. SOMERVILLE MA 02144	83-3633860		32,782				
(7)	KID'S CANVAS, INC. 1433 DEKALB AVE BROOKLYN NY 11237	27-3335011		24,250				
(8)	KIOSK GALLERY LLC 2509 SW BLAZING STAR PL LEE'S SUMMIT MO 64081	46-1763545		12,070				
(9)	KLAUSNER-LAZARIDIS 19-09 21ST RD 2ND FL ASTORIA NY 11105	83-1450657		6,847				

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(1)	KLEIN & ALVAREZ PRODUCTIONS LLC 3910 LINCOLN ROAD INDIANAPOLIS IN 46228	47-5364070		13,475				
(2)	LAKESIDE SHAKESPEARE THEATRE 3501 N. HOYNE #2 CHICAGO IL 60618	20-2012033		7,583				
(3)	LAST BITE FILMS, LLC 1595 MASSEY POINTE LANE MEMPHIS TN 38120	83-3416989		11,502				
(4)	LAURA BARAN 501 W. 52ND ST. NEW YORK NY 10019	14-9669685		6,672				
(5)	LAURA TAYLOR 2656 SUNDANCE CT WALNUT CREEK CA 94598	46-5064817		24,978				
(6)	LAUREN RUFFIN 324 12TH ST. NW ALBUQUERQUE NM 87102	83-2230474		192,068				
(7)	LEFT SIDE UP FILMS, LLC 2301 41ST STREET, NW WASHINGTON DC 20007	38-2945755		12,000				
(8)	LEGACY CONNECTIONS FILMS 2057-A GREEN BAY ROAD HIGHLAND PARK IL 60035	26-4368591		14,478				
(9)	LEGENDARY PRODUCTIONS 218 GRANT ST. REDLANDS CA 92373	82-3737158		15,133				

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(1)	LEST WE FORGET THE MISSION, LLC 8243 CATTAIL DRIVE LONGMONT CO 80503	81-2256295		80,761				
(2)	LIBERATION THEATRE COMPANY 1855 ADAM CLAYTON POWELL JR. BLVD NEW YORK NY 10026	22-2762164		10,440				
(3)	LIKEU 23 SOUTH PORTLAND AVE #3 BROOKLYN NY 11217	27-4555121		30,853				
(4)	LISTENING ROOM NETWORK LLC 300 FOURTH AVE S SAINT PETERSBURG FL 33701	46-4775296		23,127				
(5)	LITTLE SPOON, BIG SPOON PRODUCTIONS 33-25 90TH STREET JACKSON HEIGHTS NY 11372	81-3151047		16,282				
(6)	LITTLE YUD VENTURES, INC. 1450 CHURCH STREET NW WASHINGTON DC 20005	81-4849168		92,354				
(7)	LIZ LERMAN LLC 6424 E. GREENWAY PKWY SCOTTSDALE AZ 85254-2045	45-2311062		206,916				
(8)	LOVE PRODUCTIONS RECORDS 527 W. 149TH ST. NEW YORK NY 10031	26-4803555		23,682				
(9)	M3EP, INC 213 SOMERSET RD NORWOOD NJ 07648	45-4669892		86,781				

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Schedule I (Form 990) (2019)

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(1)	MACI DUFFY PRODUCTIONS INC. 429 WEST 154TH STREET NEW YORK NY 10032	83-1893586		19,575				
(2)	MACK-MADE DBA BRIDGE ARTS FESTIVAL 199 BROADWAY BAYONNE NJ 07002	81-2305319		6,284				
(3)	MADBOOTS DANCE INC. 321 79TH STREET NORTH BERGEN NJ 07047	47-4146324		15,397				
(4)	MANNING MUSIC AND ARTS 758 GILMAN BERKELEY CA 94710	26-4314012		5,005				
(5)	MANUAL CINEMA LLC 2020 N CALIFORNIA AVE CHICAGO IL 60647	46-1827152		20,043				
(6)	MARGOT FONTEYN ACADEMY OF BALLET, I 5640 NORTH WILLIAMSON VALLEY ROAD PRESCOTT AZ 86301	84-3841262		93,940				
(7)	MAXWELL FILMWORKS 3224 CAMARIE AVE. MIDLAND TX 79705	46-2264395		16,719				
(8)	MICHELLE FILM LLC 78 TEN EYCK STREET BROOKLYN NY 11206	84-2506688		27,003				
(9)	MICRO LLC 445 HUMBOLDT STREET BROOKLYN NY 11211	81-4935296		323,051				

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(1)	MILES MCAFEE 315 EMPIRE BLVD BROOKLYN NY 11225	47-2222531		26,443				
(2)	MINT INC. PO BOX 5528 ATLANTA GA 31107	71-1011962		11,533				
(3)	MOUNT MO 29 AVENUE B NEW YORK NY 10009	83-3308626		6,993				
(4)	MOVEMENT MIGRATION, LLC 14311 REESE BLVD. A2 #307 HUNTERSVILLE NC 28078	82-3664217		10,912				
(5)	MULTISTAGES THEATRE, INC. 344 WEST 87TH STREET NEW YORK NY 10024	46-1664579		6,359				
(6)	MUSEUM OF CONTEMPORARY ART OF GEORG 75 BENNETT STREET ATLANTA GA 30309	58-2562811		8,994				
(7)	MUSICIVIC, INC. 68 N RIDGE AVE AMBLER PA 19002	83-1335015		8,770				
(8)	MUSICIVIC, INC. 68 N RIDGE AVE AMBLER PA 19002	83-1335015		35,104				
(9)	MYTH COMPLEX ART HOUSE LLC 205 21ST AVE SE ST PETERSBURG FL 33705	47-1780993		41,000				

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(1)	NAPOLEON RECORDS LLC PO BOX 11825 PORTLAND OR 97211	45-1488267		14,998				
(2)	NATIONAL BLACK ARTS FESTIVAL, INC 1429 FAIRMONT AVE., STE. J. ATLANTA GA 30318	58-1736780		6,227				
(3)	NATIONAL MUSEUM OF THE AMERICAN IND ONE BOWLING GREEN NEW YORK NY 10004	53-0206027		7,356				
(4)	NATURE THEATER OF OKLAHOMA LLC 2728 THOMSON AVENUE LONG ISLAND CITY NY 11101	45-2207312		57,339				
(5)	NEOSHO MUSIC INC. DBA BORROMEO MUSI P.O BOX 661389 LOS ANGELES CA 90066	82-3055986		10,827				
(6)	NETA RGV 512 S. 9TH ST. MCALLEN TX 78501	84-2803344		14,000				
(7)	NEW CIRCLE THEATRE COMPANY, INC. 140 WEST 44TH ST., #2 NEW YORK NY 10024	82-2130860		6,450				
(8)	NEW MOVEMENT COLLABORATIVE LLC 18 NEPONSET AVENUE ROSLINDALE MA 02131	47-4493232		31,404				
(9)	NEW MUSIC RADIO LLC 447 FORT WASHINGTON AVENUE NEW YORK NY 10033	82-3794258		18,342				

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(1)	NEW PLAZA CINEMA, INC. 142 WEST END AVENUE NEW YORK NY 10023	36-4905957		20,541				
(2)	NEXT EDGE ARTS, INC. 406 FRANK ST. RALEIGH NC 27604	84-3535421		15,217				
(3)	NICJOY ENTERPRISES, LLC PO BOX 6413 HILLSBOROUGH NJ 08844	20-3555389		7,134				
(4)	NORMAL AVE PRODUCTIONS LLC 31-53 35TH STREET ASTORIA NY 11106	82-0650354		5,952				
(5)	NORWALK METROPOLITAN YOUTH BALLET 96 INWOOD ROAD TRUMBULL CT 06611	46-4991269		114,716				
(6)	NOVA EARTH INSTITUTE 13918 E MISSISSIPPI AVE AURORA CO 80012	81-1197618		13,871				
(7)	OBB SOUND, LLC 155 N. LA PEER DRIVE WEST HOLLYWOOD CA 90048	84-2072549		23,250				
(8)	OCELOT 500 MERCER ST, SEATTLE WA 98109	83-1614625		13,202				
(9)	OCTAVIA PROJECT, INC 402 GRAND AVE BROOKLYN NY 11238	83-3975000		13,415				

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(1)	OFF CENTER PRODUCTIONS 315 FLATBUSH AVENUE BROOKLYN NY 11217	43-1991105		20,714				
(2)	OMNIDAWN CORPORATIO 1632 ELM AVE RICHMOND CA 94805-1614	68-0424529		28,587				
(3)	ORANGE BLUE GROUP, LLC 315 FLATBUSH AVE BROOKLYN NY 11217	81-4209829		543,765				
(4)	OUT OF HAND THEATER INC. 675 PONCE DE LEON AVENUE SUITE 8500 ATLANTA GA 30308	58-2619780		11,770				
(5)	OYE GROUP, INC. 1080 WYCKOFF AVE RIDGWOOD NY 11385	81-0963322		26,009				
(6)	PAPERS PLEASE INC. 3605 TILDEN STREET NW WASHINGTON DC 20008	83-1227096		13,524				
(7)	PARADYM ACADEMY INC. 91 CHAPMAN ST NEW BRITAIN CT 06051	81-3737797		46,175				
(8)	PARENT ARTIST ADVOCACY LEAGUE FOR T 2230 S JUNIPER ST PHILADELPHIA PA 19148	82-2042582		6,322				
(9)	PARRIS PICTURES 838 GREENWICH STREET NEW YORK NY 10014	47-1751207		10,000				

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(1)	PATIENT FORWARD, LLC 1169 GREENE AVE BROOKLYN NY 11221	84-1873597		268,518				
(2)	PEARLARTS STUDIOS, LLC 201 NORTH BRADDOCK AVENUE PITTSBURGH PA 15208	46-1122709		8,500				
(3)	PERFORMING ARTS STRATEGIES 6636 WILKINS AVENUE PITTSBURGH PA 15217	38-3842779		115,088				
(4)	PERSIMMON TREE, INC. 1600 S.E. 15TH ST. FORT LAUDERDALE FL 33316	82-4873168		12,479				
(5)	PHILADELPHIA ARGENTINE TANGO SCHOOL 2030 FRANKFORD AVE PHILADELPHIA PA 19125	80-0515661		7,038				
(6)	PHILADELPHIA WOMENS THEATRE FESTIVA 5009 CEDAR AVE APT. 3 PHILADELPHIA PA 19143	83-4467194		18,974				
(7)	PHOENIX ORCHESTRA LTD 1404 BEACON ST, APT 4 BROOKLINE MA 02446	47-1893398		16,190				
(8)	PHYSICAL FESTIVAL LLC 1508 N DAMEN AVE CHICAGO IL 60622	82-4452556		18,515				
(9)	PIANOS FOR PEACE, INC 1795 PEACHTREE STREET NE ATLANTA GA 30309	47-4784836		11,215				

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **u**
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Schedule I (Form 990) (2019)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
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OMB No. 1545-0047

2019

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization

FRACTURED ATLAS, INC.

Employer identification number

11-3451703

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(1)	PIEHOLE LIVE ARTS LLC 244 JEFFERSON AVENUE, #1 BROOKLYN NY 11216	83-0658723		5,018				
(2)	PLANET CONNECTION, INC. 171 EAST 77TH ST. NEW YORK NY 10075	27-1848213		179,385				
(3)	PLAYDC LLC 475 K STREET NW WASHINGTON DC 20001	83-1317642		5,660				
(4)	PLAYER PIANO PRODUCTIONS LLC 203 BALTIC ST BROOKLYN NY 11201	46-3090596		48,000				
(5)	PLEIADES ARTS, INC. 109 E CHAPEL HILL STREET DURHAM NC 27701	82-1868413		5,176				
(6)	POLYPHONIC PRODUCTIONS, LLC DBA NEW 131 SAINT FELIX ST. BROOKLYN NY 11217	27-4562071		16,094				
(7)	POTLUCK PRODUCTIONS NETWORKS 640 SOUTH VAN NESS AVE. SAN FRANCISCO CA 94110	26-0086182		8,050				
(8)	PRIME PRODUCTIONS 8001 VICTORIA LANE ST LOUIS PARK MN 55426	30-1054214		13,170				
(9)	PROJECT LEGACIES, LLC 157 STARLING PASS ASHEVILLE NC 28804	82-3949607		22,649				

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(1)	PROJECT VOICE LLC 2 PRINCE STREET NEW YORK NY 10012	81-3298956		30,328				
(2)	Q CONCERTS 614 BEAUREGARD STREET CHARLESTON SC 29412	84-3936296		6,270				
(3)	QUANTUM DRAGON THEATRE 4218 GRAHAM ST. PLEASANTON CA 94566	47-4232553		5,595				
(4)	QUEEN MAB, INC. 53 ORVIS RD ARLINGTON MA 02474	83-4292735		14,723				
(5)	QUEER AS FUNDAMENTAL PRODUCTIONS 2324 NORTH SCHOFIELD STREET PORTLAND OR 97217	84-4809724		13,150				
(6)	QUINTESSENCE OF DUST 101 W 90TH STREET NEW YORK NY 10024	84-3343430		13,456				
(7)	QUINTESSENTIAL PROJECT LLC 115 W 1ST ST SANFORD FL 32771	82-3492321		31,778				
(8)	RACES Y ACCIN INC. 301 E. 22ND ST. NEW YORK NY 10010	66-0931439		10,732				
(9)	RAINBOW MILITIA 1561 HOLLY STREET DENVER CO 80220	82-3351502		7,483				

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(1)	RAISON D'TRE DANCE PROJECT 19 HALO DRIVE BOZEMAN MT 59718	82-2850178		18,951				
(2)	RANDY BACON PHOTOGRAPHY, INC. 600 W. COLLEGE STREET SPRINGFIELD MO 65806	20-3059833		9,090				
(3)	READING THEATER PROJECT PO BOX 6712 READING PA 19610	71-0925966		24,953				
(4)	REAP WHAT YOU SEW LLC 327 SAINT NICHOLAS AVE. NEW YORK NY 10027	30-0461715		32,466				
(5)	RECOVERYDIA DIGITAL SERVICES LLC 11 A ST DERRY NH 03038	85-0495855		5,480				
(6)	RESPIRO OPERA NYC LLC 200 W 85TH STREET NEW YORK NY 10024	83-1898632		5,999				
(7)	RIGHTFULLY SEWN 1800 WYANDOTTE STREET KANSAS CITY MO 64108	47-4141377		142,913				
(8)	RIGHTFULLY SEWN 1800 WYANDOTTE ST KANSAS CITY MO 64108	47-4141377		20,000				
(9)	RISK IT PRODUCTIONS, LLC PO BOX 372 BETHPAGE NY 11714	81-4219342		6,735				

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(1)	ROOM TO MOVE INC. 1067 ALTA AVENUE NE APARTMENT 6 ATLANTA GA 30307	58-1852500		6,934				
(2)	ROSEMARY BEACH PROPERTY OWNERS ASSO P O BOX 611010 ROSEMARY BEACH FL 32461	59-3367224		40,125				
(3)	ROSY WALK LLC 16 GOLDBERG AVE NORWICH CT 06360	81-2713876		24,000				
(4)	RUMBLEGRUMBLE, INC. 41 VARICK AVENUE BROOKLYN NY 11237	47-3829091		36,390				
(5)	RUNNING WATER ENTERTAINMENT 3500 VICKSBURG LANE NORTH PLYMOUTH MN 55447	45-2678166		5,750				
(6)	SANKOFA FILM SOCIETY 3815 OTHELLO STREET SEATTLE WA 98118	84-3840258		6,600				
(7)	SANTA FE ART COLONY TENANTS ASSOCIA 2415 SOUTH SANTA FE AVENUE LOS ANGELES CA 90058	83-4375802		48,360				
(8)	SARAFENN LLC PO BOX 670117 BRONX NY 10467	84-4385877		6,000				
(9)	SCENA THEATRE 1629 K STREET,NW WASHINGTON DC 20006	52-1681505		16,407				

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(1)	SCIART INITIATIVE INC. 211 MCGUINNESS BLVD BROOKLYN NY 11222	84-1732471		10,667				
(2)	SCOPE OF WORK CO. 187 STANHOPE ST BROOKLYN NY 11237	82-0718228		53,985				
(3)	SCRANTON FRINGE PO BOX 1235 SCRANTON PA 18501	47-1808438		8,711				
(4)	SEMILLITA PRODUCTIONS 1580 1ST AVE NEW YORK NY 10028	84-2902931		11,659				
(5)	SEVEN STAGES SHAKESPEARE COMPANY P.O. BOX 774 PORTSMOUTH NH 03802	47-3460410		7,188				
(6)	SEVENTHREEFOUR PRODUCTIONS, LLC 100 2ND ST BROOKLYN NY 11231	47-4951740		5,157				
(7)	SHE SINGS PRODUCTIONS, LLC 6598 WILLIAMSBURG BLVD. ARLINGTON VA 22213	84-4841933		28,092				
(8)	SHINE CHILDREN'S CHORUS 3515 SE WASHINGTON ST. PORTLAND OR 97214	83-2125257		38,466				
(9)	SHOUTHOUSE, INC. 525 WYNNEWOOD RD. PELHAM NY 10803	83-4305924		9,850				

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(1)	SHUGAH WORKS 135 E 32ND ST BROOKLYN NY 11226	80-0074429		58,507				
(2)	SIBLING RIVALRY PRESS, LLC PO BOX 26147 LITTLE ROCK AR 72221	27-3167520		6,000				
(3)	SINKING SHIP CREATIONS, LLC 3237 FOURTH STREET OCEANSIDE NY 11572	82-3630087		6,400				
(4)	SMARTSPACES.ORG 4001 N. NEW BRAUNFELS AVENUE SAN ANTONIO TX 78209	26-1366145		5,677				
(5)	SOL INITIATIVE LLC, JACOB G PADRON 2254 FIFTH AVE. NEW YORK NY 10037	84-2460538		103,399				
(6)	SOUL BOX PROJECT LLC 8225 SW 3RD AVE PORTLAND OR 97219	83-3858783		33,706				
(7)	SPARKYBOOM LLC 686 PROSPECT ST. MAPLEWOOD NJ 07040	83-2660945		19,611				
(8)	SPECIFIC BROADS PRODUCTIONS LLC 33 SAINT MARKS AVE BROOKLYN NY 11217	46-3229617		7,359				
(9)	SRI PRABHA/ARTLAB L.L.C. 4800 HARRISON ST. HOLLYWOOD FL 33021	81-3220641		9,654				

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(1)	STATE OF THE ART JAZZ INSTITUTE 16 ELMWOOD CIRCLE PEEKSKILL NY 10566	32-0275549		11,090				
(2)	STILL WATERS IN A STORM 286 STANHOPE STREET, GROUND FLOOR BROOKLYN NY 11237	27-1195669		51,075				
(3)	STILLPOINTE THEATRE INITIATIVE INC. 407 EAST FEDERAL ST BALTIMORE MD 21202	45-2519318		19,339				
(4)	STRING INSIDERS 3409 PUEBLO DR. MCKINNEY TX 75070	84-2426854		11,490				
(5)	SUSAN BATSON CONSERVATORY 311 WEST 43RD STREET NEW YORK NY 10036	84-3104036		16,037				
(6)	SYDNIE L. MOSLEY DANCES 2095 MADISON AVE NEW YORK NY 10037	27-5164385		7,703				
(7)	SYNCHRONICITY PERFORMANCE GROUP 1389 PEACHTREE STREET NE ATLANTA GA 30309	58-2352047		8,235				
(8)	TAK ENSEMBLE, LLC 61-27 MADISON ST FLUSHING NY 11385	46-5716517		14,069				
(9)	TAVINE PRODUCTIONS INC. 171 S. 4TH ST BROOKLYN NY 11211	83-1797167		7,861				

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(1)	TESLA QUARTET 1002 DITMAS AVE. BROOKLYN NY 11218	27-4818934		10,443				
(2)	THE ACTUAL DANCE 1472 PATHFINDER LANE MCLEAN VA 22101	46-2071626		6,545				
(3)	THE AMERICAN QUESTION, LLC 2934 S RIMPAU BLVD LOS ANGELES CA 90016	82-1243782		28,419				
(4)	THE AMERICAN SAFETY COMPANY OF AMER 357 S. FAIRFAX AVE. LOS ANGELES CA 90036	26-0349527		25,224				
(5)	THE ANTHROPOLOGISTS 100 CABRINI BLVD. NEW YORK NY 10033	27-2215878		7,377				
(6)	THE ARBUTUS FOUNDATION INC. 441 BROADWAY NEW YORK NY 10013	83-1802347		157,799				
(7)	THE BALTIMORE JEWELRY CENTER 10 E. NORTH AVENUE BALTIMORE MD 21202	46-3151875		9,200				
(8)	THE BREWING DEPT., INC. PO BOX 1623, RADIO CITY STATION NEW YORK NY 10101	46-3036178		19,400				
(9)	THE CENTER FOR ARTS AT THE ARMORY 191 HIGHLAND AVE. 1-C SOMERVILLE MA 02143	34-2056194		27,585				

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(1)	THE CONCERT TRUCK L.L.C. 3102 EVERGREEN AVE FL 1 BALTIMORE MD 21214-2335	81-3074584		6,348				
(2)	THE DIVISION AVENUE ARTS COLLECTIVE 1713 S GREENFIELD CIR NE GRAND RAPIDS MI 49505	90-1010164		10,279				
(3)	THE EXQUISITE CORPSE COMPANY LLC 476 EASTERN PARKWAY BROOKLYN NY 11225	46-2765993		18,170				
(4)	THE EXQUISITE CORPSE COMPANY LLC 476 EASTERN PARKWAY 1D BROOKLYN NY 11225	46-2765993		8,650				
(5)	THE FAT AND GREASY CITIZENS BRIGADE 1702 INDEPENDENCE AVE SE WASHINGTON DC 20003	47-5654597		27,265				
(6)	THE FOLK MUSIC HALL OF FAME & MUSEU 632 FOGG STREET NASHVILLE TN 37203	47-5004076		11,200				
(7)	THE FULTON STREET COLLECTIVE INC. 1821 W HUBBARD STREET CHICAGO IL 60622	06-1655461		23,000				
(8)	THE HEARTH 336 WEST 95TH STREET NEW YORK NY 10025	81-4230735		18,563				
(9)	THE HUMANIST PROJECT 5 4TH ST BROOKLYN NY 11231	46-3728382		7,818				

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Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
u Attach to Form 990.
u Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047
2019
**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization

FRACTURED ATLAS, INC.

Employer identification number

11-3451703

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	THE INTERNATIONAL ASSOCIATION OF 2261 MARKET STREET SAN FRANCISCO CA 94114	81-3263060		7,012				
(2)	THE JOURNEY PROJECT LLC 343 WEST 51ST ST NEW YORK NY 10019	82-1704210		13,762				
(3)	THE LIFE CUBE LLC 50 CRICKET LA DOBBS FERRY NY 10522	46-3249244		30,395				
(4)	THE LOVE STORY, LLC 187 OAK TER ARDEN NC 28704	81-0690741		5,250				
(5)	THE METAL SHOP PERFORMANCE LAB, LLC 1407 W WINONA ST CHICAGO IL 60640	84-2868745		5,300				
(6)	THE MOVEMENT THEATRE COMPANY, INC. 279 WEST 117TH STREET APT 2Q NEW YORK NY 10026	47-2966845		26,590				
(7)	THE MUSE BROOKLYN 350 MOFFAT BROOKLYN NY 11237	46-0706492		59,988				
(8)	THE NEW WILD, INC. 161 PROSPECT PARK WEST BROOKLYN NY 11215	84-2161664		11,562				
(9)	THE PHIL RAMONE ORCHESTRA FOR CHILD COLUMBIA UNIVERSITY STATION NEW YORK NY 10025	84-2784720		10,783				

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table u
- 3 Enter total number of other organizations listed in the line 1 table u

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
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11-3451703

Part I General Information on Grants and Assistance

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Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	THE POND THEATRE COMPANY 370 WASHINGTON AVENUE BROOKLYN NY 11238	81-2874968		9,013				
(2)	THE RESIDENT ACTING COMPANY 308 E 79TH ST. NEW YORK NY 10075	82-3767570		69,232				
(3)	THE ROSIN BOX PROJECT, INC. 2710.5 BROADWAY SAN DIEGO CA 92102	84-4735639		35,441				
(4)	THE SCRATCH, LLC 26519 SE 22ND STREET SAMMAMISH WA 98075	61-1935494		5,375				
(5)	THE SONG CAVE LLC 56 4TH PLACE #2 BROOKLYN NY 11231	47-1064739		12,315				
(6)	THE THEATRE COMPANY LLC 2315 NW OVERTON ST. PORTLAND OR 97210	84-2240814		49,066				
(7)	THE WESTCHESTER CENTER FOR JAZZ AND 12 THE FARMS ROAD BEDFORD NY 10506	47-2943528		144,621				
(8)	THE YELLOW HOUSE 577 KING STREET JACKSONVILLE FL 32204	35-2601953		48,981				
(9)	THEATER IN ASYLUM 787 STERLING PL BROOKLYN NY 11216	80-0803846		8,068				

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table u
- 3 Enter total number of other organizations listed in the line 1 table u

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
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Name of the organization

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Employer identification number

11-3451703

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	THEATER WITH A VIEW LLC 1-50 50TH AVENUE #1238 LONG ISLAND CITY NY 11101	84-2176344		11,190				
(2)	THEATRE DU REVE INC PO BOX 78341 ATLANTA GA 30357	58-2271965		6,775				
(3)	THEATRE PROMETHEUS, INC. 1427 CRITTENDEN ST NW WASHINGTON DC 20011	83-3339891		7,572				
(4)	THEATRICAL ANVILS LLC 1921 SAINT PAUL ST BALTIMORE MD 21218	84-3768831		7,595				
(5)	THEATRICAL OUTFIT INC PO BOX 1555 ATLANTA GA 30301	58-1524285		7,356				
(6)	THIRD RAIL PROJECTS, LLC 697 GRAND STREET BROOKLYN NY 11211	26-2158833		29,550				
(7)	THREAD CONNECTS, INC 611 W 163RD ST NEW YORK NY 10032	84-1733014		34,525				
(8)	THROUGH THE 4TH WALL 826 BASHFORD LANE ALEXANDRIA VA 22314	81-2027686		26,400				
(9)	TML BROADWAY LLC 404 RIVERSIDE DRIVE NEW YORK NY 10025	82-2640418		20,000				

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **u**
- 3 Enter total number of other organizations listed in the line 1 table **u**

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

Schedule I (Form 990) (2019)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
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11-3451703

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	TO THE POINT DESIGN LLC 235 E 22ND STREET NEW YORK NY 10010	27-4809780		13,225				
(2)	TOGETHER IN HOPE PROJECT 7662 WOODVIEW COURT EDINA MN 55439	82-3695283		21,407				
(3)	TONAL GRACE INC PO BOX 371 HAKALAU HI 96710	83-1584595		18,950				
(4)	TONAL GRACE INC PO BOX 371 HAKALAU HI 96710	83-1584595		9,300				
(5)	TORN PAGE INC. 1812 W BURBANK BLVD LOS ANGELES CA 91506	85-2519655		6,000				
(6)	TOSS IT LLC 204 WEST 106TH STREET, APT. 56 NEW YORK NY 10025	47-4419124		5,255				
(7)	TRANSIENT CANVAS 29 YALE TERRACE JAMAICA PLAIN MA 02130	47-4596474		8,150				
(8)	TRIAD- BOSTONS CHORAL COLLECTIVE 9 GOULD STREET DANVERS MA 01923	47-3887999		5,810				
(9)	TRUE STORY PICTURES 316 HAWTHORNE ST. MEMPHIS TN 38112	27-2124650		10,005				

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **u**
- 3 Enter total number of other organizations listed in the line 1 table **u**

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Schedule I (Form 990) (2019)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
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1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	UBUNTU MOTION PICTURES, LLC 530 S. LAKE AVE. 569 PASADENA CA 91101	26-3533146		9,400				
(2)	UNA INC. 133 NEVADA ST. SAN FRANCISCO CA 94110	85-0835854		12,150				
(3)	UNLADYLIKE PRODUCTIONS LLC, CHARLOT 421 12TH STREET BROOKLYN NY 11215	20-2104822		97,492				
(4)	UNSHAKABLE PRODUCTIONS 17613 NORWOOD ROAD SANDY SPRING MD 20860	83-0778130		16,000				
(5)	URBAN HAIKU LLC 4848 NE 14TH AVE PORTLAND OR 97211	81-4835980		5,477				
(6)	URBAN YOUTH HARP ENSEMBLE INC 3259 BRIARWOOD BOULEVARD ATLANTA GA 30344	52-2440625		7,446				
(7)	VANISH ENTERPRISES, LLC 16006 ELIZABETH ST. BEVERLY HILLS MI 48025	81-3005955		49,406				
(8)	VILLAGE PLAYBACK THEATRE 106 CLINTON STREET MT. VERNON NY 10552	36-4573855		5,033				
(9)	VINCENT & THEO PRODUCTIONS, LLC 9 KERN RAMBLE AUSTIN TX 78722	83-1491463		16,400				

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **u**
- 3 Enter total number of other organizations listed in the line 1 table **u**

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Schedule I (Form 990) (2019)

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
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1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	VITAL OPERA, INC. 87-10 34TH AVENUE 2B JACKSON HEIGHTS NY 11372	46-3086770		9,616				
(2)	VIVIFI FILMS LLC 1708-C AUGUSTA ST., 319 GREENVILLE SC 29605	83-4467749		7,360				
(3)	VOICES FROM WAR, INC. 276 FIRST AVENUE NEW YORK NY 10009	83-1974056		10,059				
(4)	VOXBOX, INC 494 EAST 16TH STREET BROOKLYN NY 11226	81-1337008		12,700				
(5)	WALLPLAY 265 CANAL ST NEW YORK NY 10013	46-3285077		71,035				
(6)	WE ARE THE LOBBYISTS LLC 37 S 3RD ST BROOKLYN NY 11249	47-4468974		17,123				
(7)	WE ARE THE LOBBYISTS LLC 37 S 3RD ST BROOKLYN NY 11249	47-4468974		7,120				
(8)	WEIRD SISTERS LLC 400 W43RD ST NEW YORK NY 10036	42-1622330		10,382				
(9)	WHAT'S ON LOS ANGELES 843 BAY STREET SANTA MONICA CA 90405	16-2444581		7,536				

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **u**
- 3 Enter total number of other organizations listed in the line 1 table **u**

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Schedule I (Form 990) (2019)

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
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Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	WHOLE WORLD THEATER COMPANY 1212 SPRING STREET NW ATLANTA GA 30309	58-2119605		6,754				
(2)	WILD BANSHEE PRODUCTIONS, LLC 64 EAST 129TH ST. APT 3 NEW YORK NY 10035	81-1335768		9,200				
(3)	WILLIAMSBURG INDEPENDENT FILM FESTI 1361 MADISON AVE. NEW YORK NY 10128	27-3294550		5,695				
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **u**
- 3 Enter total number of other organizations listed in the line 1 table **u**

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 FISCAL SPONSORSHIP GRANT	1231	7,029,964			
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

FRACTURED ATLAS REVIEWS INDIVIDUAL EXPENDITURES AND FUND RELEASE REQUESTS

TO ENSURE COMPLIANCE WITH PROJECT PARAMETERS AND CHARITABLE MISSION.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
u Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
u Attach to Form 990.
u Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

**Open to Public
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Name of the organization

FRACTURED ATLAS, INC.

Employer identification number

11-3451703

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a		
1b		
2		
3		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2019

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 SHAWN ANDERSON CTO/BOARD MEMBER	(i)	170,420	0	0	8,521	0	178,941	0
	(ii)	0	0	0	0	0	0	0
2 TIM CYNOVA CO-CEO/BOARD MEMBER	(i)	164,543	0	0	8,227	0	172,770	0
	(ii)	0	0	0	0	0	0	0
3 PALLAVI SHARMA CPO/BOARD MEMBER	(i)	170,420	0	0	0	0	170,420	0
	(ii)	0	0	0	0	0	0	0
4 LAUREN RUFFIN CERO/BOARD MEMBER	(i)	164,543	0	0	0	0	164,543	0
	(ii)	0	0	0	0	0	0	0
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Transactions With Interested Persons

u Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

u Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open To Public Inspection

Employer identification number

11-3451703

FRACTURED ATLAS, INC.

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 u \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization u \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

1	(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the org.?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
				To	From			Yes	No	Yes	No	Yes	No
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													

Total u \$ _____

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

1	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Noncash Contributions

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

OMB No. 1545-0047

2019

**Open To Public
Inspection**

Employer identification number

11-3451703

FRACTURED ATLAS, INC.

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	<input checked="" type="checkbox"/>	1	498	FAIR MARKET VALUE	
2					
3					
4	<input checked="" type="checkbox"/>		1,933	FAIR MARKET VALUE	
5					
6					
7					
8					
9	<input checked="" type="checkbox"/>	20	623,520	FAIR MARKET VALUE	
10					
11					
12					
13					
14					
15					
16					
17					
18					
19	<input checked="" type="checkbox"/>	12	2,292	FAIR MARKET VALUE	
20					
21					
22					
23					
24					
25	<input checked="" type="checkbox"/>	6	171,766	FAIR MARKET VALUE	
26	<input checked="" type="checkbox"/>	25	42,670	FAIR MARKET VALUE	
27	<input checked="" type="checkbox"/>	2	320	FAIR MARKET VALUE	
28	<input checked="" type="checkbox"/>	15	1,334	FAIR MARKET VALUE	
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
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?				Yes No
30a					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?				Yes No
31					X
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?				Yes No
32a					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.				

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.

u Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2019**Open to Public
Inspection**

Name of the organization

FRACTURED ATLAS, INC.

Employer identification number

11-3451703**FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENTS****OTHER PROGRAMS AND SERVICES: FRACTURED ATLAS'S TECHNOLOGY-BASED****PROGRAM, SPACEFINDER, A CLOUD-BASED APPLICATION PROVIDING A COMPREHENSIVE
ONLINE DATABASE OF SPACE LISTINGS.****FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990****TAX RETURN IS SENT TO ORGANIZATION FOR THE GOVERNING BODY TO REVIEW BEFORE
SIGNING AND SENDING TO THE GOVERNMENT.****FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY****PURSUANT WITH THE ORGANIZATION'S FORMAL CONFLICTS OF INTEREST POLICY****ADOPTED BY THE BOARD OF DIRECTORS ON APRIL 30, 2005, ANY DIRECTOR,****PRINCIPAL OFFICER, OR MEMBER OF A COMMITTEE WITH BOARD DELEGATED POWERS WHO****HAS A DIRECT OR INDIRECT FINANCIAL INTEREST HAS A DUTY TO DISCLOSE TO THE****BOARD OF DIRECTORS ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST. THE POLICY****CLEARLY OUTLINES PROCEDURES FOR ADDRESSING THE CONFLICT OF INTEREST AND****REPERCUSSIONS FOR VIOLATING OF THE POLICY. DISCLOSED CONFLICTS OF INTEREST****ARE MONITORED ON A PERIODIC BASIS AS OUTLINED IN THE POLICY.****FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL****APPROVED BY BOARD****FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS****IN 2014 AND 2015, THE ORGANIZATION'S BOARD OF DIRECTORS AND EXECUTIVE STAFF****CONTRACTED QUATT ASSOCIATES TO CONDUCT STAFF COMPENSATION STUDIES TO ASSIST**

Name of the organization

Employer identification number

FRACTURED ATLAS, INC.

11-3451703

FRACTURED ATLAS IN SETTING COMPENSATION THAT IS COMPETITIVE WITH THE MARKET AND MEETS APPLICABLE IRS STANDARDS. THE FIRST PHASE EVALUATED SENIOR STAFF COMPENSATION. THE SECOND PHASE EXAMINED JUNIOR STAFF AND SOFTWARE DEVELOPER COMPENSATION.

FORM 990, PART VI, LINE 17 - OTHER STATES WHERE COPY OF RETURN IS FILED LOUISIANA, MASSACHUSETTS, MARYLAND, MAINE, MICHIGAN, MINNESOTA, MISSISSIPPI, NORTH CAROLINA, NORTH DAKOTA, NEW HAMPSHIRE, NEW JERSEY, NEW MEXICO, NEVADA, NEW YORK, OHIO, OKLAHOMA, OREGON, PENNSYLVANIA, RHODE ISLAND, SOUTH CAROLINA, TENNESSEE, UTAH, VIRGINIA, WEST VIRGINIA, WASHINGTON, WISCONSIN

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION GOVERNING DOCUMENTS, FINANCIAL STATEMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST, AT FRACTURED ATLAS' OFFICE.

FORM 990, PART XI - ADDITIONAL INFORMATION BOARD REVIEWS FINANCIAL STATEMENTS AND APPROVES BEFORE THEY ARE BOUND AND SENT.

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION DONATED LEGAL FEES \$ -50,247

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships

u Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

u Attach to Form 990.

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

OMB No. 1545-0047

2019

**Open to Public
Inspection**

FRACTURED ATLAS, INC.

Employer identification number

11-3451703

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)							
(2)							
(3)							
(4)							
(5)							

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate alloc.?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) EXPONENTIAL CREATIVITY VENTURES, IN 1063 ULUOPIHI LOOP KAILUA HI 96734 82-4197795	INVESTING	NY		C		1,712,147	82.000000		X
(2)									
(3)									
(4)									

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)	X	
e Loans or loan guarantees by related organization(s)	X	
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)	X	
s Other transfer of cash or property from related organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) EXPONENTIAL CREATIVE VENTURES	C	2,110,000	AS PER CONTRIBUTION AGRMT
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													

