Return of Organization Exempt From Income Tax

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

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.	
► Go to www.irs.gov/Form990 for instructions and the latest information.	

2020 **Open to Public**

OMB No. 1545-0047

		the Treasury ue Service	Go to www.irs.gov/Form990 for instructions and the latest	information.	Inspection
Α	For the	e 2020 cal	endar year, or tax year beginning , and e	nding	
		applicable:	C Name of organization AUSTIN HOME BASE	D Employer	identification number
	Address	change	Doing business as		
П	Name ch	ange	Number and street (or P.O. box if mail is not delivered to street address) Room/suite	20-15083	
	Name ch	ange	4001 SPEEDWAY	E Telephone	number
	Initial retu	urn	City or town State ZIP code	512-299-	5487
	Final return	n/terminated	AUSTIN TX 78751		
	A		Foreign country name Foreign province/state/county Foreign postal	G Gross rece	into f COF 401
	Amendeo	u return		G GIUSS IECE	eipts \$ 625431.
	Applicatio	on pending	F Name and address of principal officer: ALEXA CORBETT	H(a) Is this a group return for	subordinates? Yes X No
			4001 SPEEDWAY AUSTIN TX 78751	H(b) Are all subordinate	es included? Yes No
ı	Tax-exe	mpt status:	X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527	If "No," attach a lis	t. See instructions
			.ahbcs.org	H(c) Group exemption r	number 🕨
_		-		ar of formation: 2004	M State of legal domicile: TX
	Part I		nmary		
	1	Briefly d	escribe the organization's mission or most significant activities: <u>TO</u>	OFFER A CREAT	IVE AND
ů Ľ		COLLAE	ORATIVE EDUCATIONAL ALTERNATIVE THAT CULTIVATES	BALANCED	
Governance		CRITIC	AL THINKERS PREPARED FOR A LIFE OF LEARNING AND	ENGAGEMENT.	
vel	2	Check th	is box 🕨 🦳 if the organization discontinued its operations or dispose	d of more than 25%	of its net assets.
ő	3		of voting members of the governing body (Part VI, line 1a)		3 10
Š	4	Number	of independent voting members of the governing body (Part VI, line 1b)		4 8
tie	5	Total nu	mber of individuals employed in calendar year 2020 (Part V, line 2a) .		5 15
Activities &	6	Total nu	mber of volunteers (estimate if necessary)		6 10
Ac	7a		related business revenue from Part VIII, column (C), line 12.	E Contraction of the second	7a
	b		lated business taxable income from Form 990-T, Part I, line 11		7b
				Prior Year	Current Year
e	8	Contribu	tions and grants (Part VIII, line 1h)	57	14498.
ň	9		service revenue (Part VIII, line 2g)	6186	
Revenue	10	-	ent income (Part VIII, column (A), lines 3, 4, and 7d)	3	493.
Ř	11		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .	127	22. 8280.
	12		enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12).	6374	91. 624966.
	13		nd similar amounts paid (Part IX, column (A), lines 1–3).	97	7250.
	14	Benefits	paid to or for members (Part IX, column (A), line 4)		
ŝ	15		other compensation, employee benefits (Part IX, column (A), lines 5–10).	4667	436756.
nse	16a		onal fundraising fees (Part IX, column (A), line 11e)		
Expenses	b		idraising expenses (Part IX, column (D), line 25) ► 3779.		
ñ	17		penses (Part IX, column (A), lines 11a–11d, 11f–24e)	1358	112844.
	18		penses. Add lines 13–17 (must equal Part IX, column (A), line 25).	6122	. 556850.
	19		e less expenses. Subtract line 18 from line 12	252	
or	2			Beginning of Current	Year End of Year
Net Assets or Fund Balances	20	Total as	sets (Part X, line 16)	2981	.72. 363014.
t As	21	Total lial	pilities (Part X, line 26)	36	332.
- Ne	22	Net asse	ets or fund balances. Subtract line 21 from line 20	2945	362682.
Pa	art II	Sig	nature Block		
			y, I declare that I have examined this return, including accompanying schedules and stateme		
and	belief, it	is true, corre	ect, and complete. Declaration of preparer (other than officer) is based on all information of w		ý
Sig	an		Alif- Contrat	05/0	7/2021
He	-		Signature of officer	Date	
			ALEXA CORBETT PRES	SIDENT	
			Type or print name and title		· · · · · · · · · · · · · · · · · · ·
D -	: al	Print	/Type preparer's name Preparer's signature	Date	neck if
Pa		Mia	hael Kiesling Michael Kiesling		elf-employed P01236409
	eparer			0070772021	
Us	e Only	y –		Firm's EIN	
					512-731-2312
Ma	y the IF	RS discus	s this return with the preparer shown above? See instructions		X Yes No

	90 (2020)	AUSTIN HOME BASE	20-1508336	Page 2
Pa	rt III	Statement of Program Service Accomplishments		
		Check if Schedule O contains a response or note to any line in this Part III		. X
1	Brieflv de	scribe the organization's mission:		
•				
		ATIVE THAT CULTIVATES AUTHENTIC, BALANCED CRITICAL THINKERS WHO		
				·
	ARE PR	EPARED FOR A LIFE OF LEARNING AND COMMUNITY ENGAGEMENT		
2	Did the o	rganization undertake any significant program services during the year which were not listed on		
	the prior	Form 990 or 990-EZ?	. Yes	X No
	lf "Yes," o	lescribe these new services on Schedule O.		
3		rganization cease conducting, or make significant changes in how it conducts, any program		
Ŭ			X Yes	No
			A Tes	
		lescribe these changes on Schedule O.		
4		the organization's program service accomplishments for each of its three largest program service		
		s. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and a	llocations to other	ſS,
	the total e	expenses, and revenue, if any, for each program service reported.		
4a	(Code: C	1) (Expenses \$ 512963. including grants of \$) (Revenue	\$ 5268	53)
ти		REGULAR EDUCATIONAL PROGRAM, AUSTIN HOME BASE COMMUNITY SCHOOL	Ψ	<u>, , , , , , , , , , , , , , , , , , , </u>
	AGES 5	YEARS TO 14 YEARS.		
4b	(Code: 0	2) (Expenses \$ 43887. including grants of \$) (Revenue	\$ 748	42.)
	TN THE	AFTER CONCAL PROCESS AND ALICETY HOME RACE COMMUNITY CONCAL		
		JNITIES FOR FURTHER STUDENT DEVELOPMENT OUTSIDE OF THE REGULAR		·
	SCHOOL	HOURS.		
4c	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
70	(0000.		Ψ	/
4d	Other pro	gram services (Describe on Schedule O.)		
	(Expense)	
4e		gram service expenses 556850.	· · · · ·	

Form 990 (2020) AUSTIN HOME BA

7 Did the organization receive or

Part IV

1

2

3

4

5

6

8

9

90 (2020) AUSTIN HOME BASE 20-1508	336	P	age 🤅
V Checklist of Required Schedules			
		Yes	No
Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Х	
Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	2		Х
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>	3		Х
Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
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>	5		Х
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</i> "Yes," <i>complete Schedule D, Part I</i>	6		x
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>	7		Х
Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8		Х
Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Ves." complete Schedule D. Part IV	٩		x

	negotiation services? If "Yes," complete Schedule D, Part IV.
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments
	or in quasi endowments? If "Yes," complete Schedule D, Part V

11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete

b Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more

c Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more

d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets

e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D. Part X. 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"

and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional . . .

14a Did the organization maintain an office, employees, or agents outside of the United States? **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services 17 on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions.

18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		l
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	l
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		ĺ
	If "Yes," complete Schedule G, Part III	19	ĺ
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	ſ

b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

10

11a Х

11b

11c

11d

11e Х

11f

12a

12b

13 Х

14a

14b

15

16

17

20b

21

Х

Х

Х

Х

Х

Х

Х

Х

Х

Х

Х

Х

Х

Х Х

Х

Form 990 (2020)

AUSTIN HOME BASE

Par	t 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? If "Yes," complete Schedule I, Parts I and III	22	Х	1
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			1
	employees? If "Yes," complete Schedule J.	23		Х
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? If "Yes," answer lines			I
	24b through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	2-10		
U	to defease any tax-exempt bonds?	24c		1
Ь	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		
25a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
h		25d		Λ
a	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			I
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or	0.5%		37
	990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			I
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			1
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			1
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			1
	persons? If "Yes," complete Schedule L, Part III	27		Х
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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			1
	If"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
~~	If"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	~~		37
• •	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?			
	If "Yes," complete Schedule N, Part II	32		Х
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? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,	• •		
	III, or IV, and Part V, line 1	34		Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled	0.51		1
~~	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	20		37
27	organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		Х
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI.	37		Х
~~		31		
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.	38	Х	1
Dai	t V Statements Regarding Other IRS Filings and Tax Compliance	30	Λ	
Fai	Check if Schedule O contains a response or note to any line in this Part V		Ī	
			· Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		105	140
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
D C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
C	gaming (gambling) winnings to prize winners?	1c	Х	

Form 990 (2020)
Part V

 Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i>. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	2b 3a 3b	X	
 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	3a	X	
 Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i>. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	
 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i> 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)? b If "Yes," enter the name of the foreign country ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 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? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organization stat may receive deductible contributions under section 170(c). a Did the organization notify the donor of the value of the gods or services provided? c Did the organization notify the donor of the value of the gods or services provided? c Did the organization notify the donor of the value of the gods or services provided? c Did the organization neceive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization receive any funds, directly or indirectly, or a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the			L
 b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule</i> 0			
 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)? b If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 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? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? c Organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b If "Yes," indicate the number of Forms 8282 filed during the year c Did the organization neceive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f If the organization received a contribution of qualified intellectual property, did the organization file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year f If the organization received a contribution of qualified intellectual property, did the organization file Form 8289? f If the organization received a contribution of qualified intellectual property, did the organization file Form 8289. f If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization fil	3b		Х
 a financial account in a foreign country (such as a bank account, securities account, or other financial account)? b If "Yes," enter the name of the foreign country ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 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 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 neceive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? b If "Yes," indicate the number of Forms 8282 filed during the year. c If "Yes," indicate the number of Forms 8282 filed during the year d If "Yes," indicate the number of Forms 8282 filed during the year nepresental benefit contract? f Did the organization receive any funds, directly or indirectly, on a personal benefit contract? f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? f If the organization received a contribution of pays premiums, directly, on a personal benefit contract? g If the organization receive a contribution of pays premiums, directly, on a personal benefit contract? f Did the organization received a contribution of pays finalelectual property, did the organization file Form 8899 as required? f If the organization received a contribution of pays fin			<u> </u>
 b If "Yes," enter the name of the foreign country ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Ga 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? 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 notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 			
 See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 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? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). Did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282 filed during the year. If "Yes," indicate the number of Forms 8282 filed during the year. If "Yes," indicate the number of Forms 8282 filed during the year. If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 	4a	_	Х
 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 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? 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? b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year. f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization received a contribution of qualified intellectual property, did the organization file Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 			
 b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? c 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? 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? b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year d If "Yes," indicate the number of Forms 8282 filed during the year or a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8089 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 	_		
 c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5a		X X
 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? 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? b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year. f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 	5b		X
 organization solicit any contributions that were not tax deductible as charitable contributions?	5c		<u> </u>
 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? b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year d If "Yes," indicate the number of Forms 8282 filed during the year f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 	6a		х
 gifts were not tax deductible? 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? b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year d If "Yes," indicate the number of Forms 8282 filed during the year f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? a Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 	Ja		
 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? b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year d If "Yes," indicate the number of Forms 8282 filed during the year d If "Yes," indicate the number of Forms 8282 filed during the year on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? a Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 	6b		
 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? b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year d If "Yes," indicate the number of Forms 8282 filed during the year d If "Yes," indicate the number of Forms 8282 filed during the year d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? a If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 			
 and services provided to the payor?			
 c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year	7a		Х
required to file Form 8282? 7d 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? 7d f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7d g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7d h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 7	7b		
d If "Yes," indicate the number of Forms 8282 filed during the year			
 e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7c		Х
 f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 			
 g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 	7e		Х
 h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 	7f		Х
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7g 7h		
	7h		
sponsoring organization have excess business holdings at any time during the year?	8		Х
9 Sponsoring organizations maintaining donor advised funds.	Ť		
	9a		Х
	9b		Х
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12			
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			
b Gross income from other sources (Do not net amounts due or paid to other sources			
against amounts due or received from them.).			
	12a		
 b If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	13a		
Note: See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in which			
the organization is licensed to issue qualified health plans			
c Enter the amount of reserves on hand			
	14a		Х
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 1	4b		
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	15		Х
If "Yes," see instructions and file Form 4720, Schedule N.			
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?			1
If "Yes," complete Form 4720, Schedule O.	16		Х

Form 9	90 (2020) AUSTIN HOME BASE 20-150	8336	ρ Έ	age 6
Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a			
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. S			
	Check if Schedule O contains a response or note to any line in this Part VI	• •	• •	Х
Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 10			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 8			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Х	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue C	ode.)		·
40.		40	Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	40h		
110	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a		Х
11a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	IIa		Λ
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13.	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12.0	71	
Ŭ	describe in Schedule O how this was done	12c		Х
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official.	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section	on 501	l(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			
	LARACHELLE SMITH 512-299-548			

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensate	d
	Employees, and Independent Contractors	<u> </u>
	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.

PRESIDENTXXX000(2) CARA HOUSHMAND5XX000VICE PRESIDENTXX000(3) JACLYN RAY5XX000(4) EVELYN GALANTE1XX000(5) ASHLEY GIBSON1XX000(6) ANNE ROWES1XX000(7) D RANATUNGA10000MEMBERX0000	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	b offici Individual trustee or director	unles	Pos neck ss pe	erson direct	et is or/trust or/trust en is or/employee	n an	(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
(2) CARA HOUSHMAND5XX00VICE PRESIDENTXXX000(3) JACLYN RAY5XX000TREASURERXX0000(4) EVELYN GALANTE1XX000SECRETARYXX0000(5) ASHLEY GIBSON1X000(6) ANNE ROWES1X000(7) D RANATUNGA1X000	(1) ALEXA CORBETT	6			.,				0		0
VICE PRESIDENTXXX000(3) JACLYN RAY5XX000TREASURERXXX000(4) EVELYN GALANTE1XX000SECRETARYXX0000(5) ASHLEY GIBSON10000(6) ANNE ROWES1X000(7) D RANATUNGA1000MEMBERX000		F			Х				0	0	0
TREASURERXX000(4) EVELYN GALANTE11000SECRETARYXX000(5) ASHLEY GIBSON1000MEMBERX000(6) ANNE ROWES1000(7) D RANATUNGA1000MEMBERX000		5			Х				0	0	0
SECRETARYxx000(5) ASHLEY GIBSON1x000MEMBERx0000(6) ANNE ROWES1x000(7) D RANATUNGA1x000(7) D RANATUNGAx000		5	-		Х				0	0	0
MEMBERX000(6) ANNE ROWES1X00MEMBERX000(7) D RANATUNGA100MEMBERX00		1	х		Х				0	0	0
MEMBER X 0 0 (7) D RANATUNGA 1 MEMBER X 0 0		1	Х						0	0	0
(7) D RANATUNGA 1 0 0 MEMBER X 0 0 0		1							0	0	0
		1							0	0	0
(8) KRISTAL MORRIS	(8) KRISTAL MORRIS MEMBER	1							0	0	0
(9) ELIZA WAUGH 1 40402. 0 TEACHER REP X 40402. 0 0		1							40402.	0	0
(10) KIM LONGACRE 1 40402.0 0		1	Х						40402.	0	0
(11) JP LUND 1 0 0 ADVISORY DIREC X 0 0 0		1	Х						0	0	0
(12) L PEARLSTEIN 1 22851.0 0		1	Х						22851.	0	0
(13) SHARI VARS 40 HEAD OF SCHOOL X 49467.0 0	(13) SHARI VARS	40				х				0	0
(14) G FLATAU 25 X 10052.0 0	(14) G FLATAU	25								0	0

Form	990 (2020) AUSTIN HOME BASE									20-150)833	6 Page 8
P	art VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee			High	est	Compensated	Employees (co	ntinue	ed)
	(A) Name and title	(B) Average hours per week	box, office	unles er an	Pos neck s pe d a d	rson	e than o is both or/trust	n an :ee)	(D) Reportable compensation from the	(E) Reportable compensation from related		(F) nated amount of other npensation
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	(ey employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	orga	from the inization and d organizations
(15)			-									
(16)			-									
(17)												
(18)			-									
(19)			-									
(20)												
(21)												
(22)			-									
(23)			-									
(24)			-									
(25)			-									
1b c	Subtotal							•	163174.			
d	Total (add lines 1b and 1c).								163174.			
2	Total number of individuals (including but not I reportable compensation from the organization		listed	abo	ove)) wh	io rec	eive	ed more than \$1	100,000 of		
3	Did the organization list any former officer, dir employee on line 1a? <i>If "Yes," complete Sche</i>						-		compensated		2	Yes No
4	For any individual listed on line 1a, is the sum the organization and related organizations gre individual	of reportable co	mpe	nsat	tion	and	d othe	er co	ompensation fro	m	3	X
5	Did any person listed on line 1a receive or acc for services rendered to the organization? <i>If</i> "										5	X
	tion B. Independent Contractors			L	-1 -	-1		4				
1	Complete this table for your five highest comp compensation from the organization. Report co								g with or within			
	(A) Name and business add	ress							(B) Description of ser	rvices ((C Comper	
2	Total number of independent contractors (inclu	uding but not lim	nited	to th	iose	e list	ted at		e) who received			

		`	0	
more than \$100,000 o	f compensation	from the or	anization	

	990 (20								20-1	.508336 Page 9
Par	t VIII									<u> </u>
		Check if Schedule O co	ontain	s a respo	nse o	r 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
S S	1a	Federated campaigns			1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues			1b					
<u></u> <u></u> <u></u> <u></u> <u></u>	С	Fundraising events			1c					
iffts ar A	d	Related organizations			1d					
s, G mila	е	Government grants (contri		,	1e					
Sil	f	All other contributions, gifts				1 4 4 9 9				
but	-	similar amounts not include Noncash contributions incl			1f	14498.				
d II	g	lines 1a–1f			1g	¢				
a Co	h						14498.			
			• •		<u>· ·</u>	Business Code	11190.			
e	2a	STUDENT TUITION/FE	ΕE			611110	526853.	526853.		
ωŽ	b	AFTER SCHOOL CLASS				611110	74842.	74842.		
Se	С									
Program Service Revenue	d									
л ^р с	е									
Pre	f	All other program service r								
	g	Total. Add lines 2a–2f					601695.			
	3	Investment income (includ	-				100	400		
		other similar amounts).					493.	493.		
	4 5	Income from investment of		•						
	5	Royalties	· ·	(i) Re	al .	►				
	6a	Gross rents	6a		-	()				
	b	Less: rental expenses .	6b							
	С	Rental income or (loss)	6c							
	d	Net rental income or (loss))							
	7a	Gross amount from		(i) Secu	rities	(ii) Other				
		sales of assets								
		other than inventory	7a							
enue	b	Less: cost or other basis								
	_	and sales expenses	7b							
Re		Gain or (loss)	7c							
Other Rev		Gross income from fundral			· ·	🕨				
ð	- Cu		•							
		of contributions reported o	n line	1c).						
		See Part IV, line 18			8a	8745.				
		Less: direct expenses			8b					
				-	ents.	🕨	8280.			8280.
	9a	Gross income from gaming								
		See Part IV, line 19			9a					
		Less: direct expenses			9b					
		Net income or (loss) from g Gross sales of inventory, lo	-	ig activitie	5.	📕				
	IVa	returns and allowances .			10a					
	ь	Less: cost of goods sold .			10b					
		Net income or (loss) from s								
s	Ť				·	Business Code				
iou Ie	11a									
Miscellaneous Revenue	b									
evelle.	С									
lisc	d	All other revenue								
2		Total. Add lines 11a–11d					CO 4000	600100		0.0.05
	12	Total revenue. See instru-	ctions			Þ	624966.	602188.		8280.

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 . (C) (D) (A) (B) Do not include amounts reported on lines 6b, 7b, Management and Fundraising Total expenses Program service 8b. 9b. and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations 1 domestic governments. See Part IV. line 21. 2 Grants and other assistance to domestic individuals. See Part IV, line 22 7250 7250 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members 4 5 Compensation of current officers, directors, trustees, and key employees 91602 90291 1311. Compensation not included above to disgualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 296565 294566. 1999. 7 Pension plan accruals and contributions (include 8 section 401(k) and 403(b) employer contributions). 1513 1156. 357 9 14340. 10957. 3383. 32736 10 24654. 7613. 469. 11 Fees for services (nonemployees): a Management Legal. b Accounting 8000 8000 С Professional fundraising services. See Part IV, line 17. е Other. (If line 11g amount exceeds 10% of line 25, column g (A) amount, list line 11g expenses on Schedule O.) 1216 1216 Advertising and promotion 12 388 388. 13 1884 1884 14 15 49999 16 54944 4945 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 21 22 Depreciation, depletion, and amortization 9785 8904. 881 23 4114. 3744. 370. 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 see stmt h С d e All other expenses 5511 5511 _____ Total functional expenses. Add lines 1 through 24e . 556850. 424847. 128224. 3779. 25 26 Joint costs. Complete this line only if the

organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► _____ if following SOP 98-2 (ASC 958-720).....

US 990	Other Functional	Expenses: Page	e 10, Line 24	202
		Program	Management	
Description of the Asset	Total	Services	and General	Fundraising
AD DEBTS EXPENSE	8,384.	8,384.		
LASSROOM EXPENSES	5,708.	5,708.		
ACTS & SQUARE FEE:		.,,,	2,443.	
	2, 1, 2, 3	9,525.	942.	
URNITURE & EQUIPM		9,525.		
THER EMPLOYMENT CO			3,109.	
OFTWARE EXPENSE	2,402.		2,402.	
	32,513.	23,617.	8,896.	

m 990 (2020			20-1	1508336 Page
art X	Balance Sheet	Dert V		F
	Check if Schedule O contains a response or note to any line in this		· · · ·	
		(A) Beginning of year		(B) End of year
1 C	Cash—non-interest-bearing		1	82041.
	avings and temporary cash investments		2	276703.
	Pledges and grants receivable, net		3	
	counts receivable, net		4	
	oans and other receivables from any current or former officer, directo			
	ustee, key employee, creator or founder, substantial contributor, or 3			
	ontrolled entity or family member of any of these persons		5	
6 L	oans and other receivables from other disqualified persons (as defined			
	nder section 4958(f)(1)), and persons described in section 4958(c)(3)(6	
7 N	lotes and loans receivable, net		7	
	nventories for sale or use		8	
9 P	Prepaid expenses and deferred charges		9	
	and, buildings, and equipment: cost or			
	ther basis. Complete Part VI of Schedule D 10a 53316			
b L	ess: accumulated depreciation 10b 49046	. 6266.	10c	4270
11 In	nvestments—publicly traded securities		11	
	nvestments—other securities. See Part IV, line 11		12	
13 In	nvestments—program-related. See Part IV, line 11		13	
14 In	ntangible assets		14	
15 O	Other assets. See Part IV, line 11		15	
16 T	otal assets. Add lines 1 through 15 (must equal line 33)	. 298172.	16	363014
	ccounts payable and accrued expenses		17	
18 G	Grants payable		18	
19 D	Deferred revenue		19	
20 T	ax-exempt bond liabilities		20	
21 E	scrow or custodial account liability. Complete Part IV of Schedule D .		21	
22 L	oans and other payables to any current or former officer, director,			
tr	rustee, key employee, creator or founder, substantial contributor, or 3	5%		
C	ontrolled entity or family member of any of these persons		22	
23 S	ecured mortgages and notes payable to unrelated third parties		23	
24 U	Insecured notes and loans payable to unrelated third parties		24	
	Other liabilities (including federal income tax, payables to related third			
	arties, and other liabilities not included on lines 17–24). Complete			
	Part X of Schedule D		25	332
26 T	otal liabilities. Add lines 17 through 25	. 3606.	26	332
0	Drganizations that follow FASB ASC 958, check her			
a	nd complete lines 27, 28, 32, and 33.			
27 N	let assets without donor restrictions	. 294566.	27	362682
28 N	let assets with donor restrictions		28	
0	organizations that do not follow FASB ASC 958, check here►			
a	nd complete lines 29 through 33.			
29 C	Capital stock or trust principal, or current funds		29	
30 P	aid-in or capital surplus, or land, building, or equipment fund		30	
	Retained earnings, endowment, accumulated income, or other funds .		31	
32 T	otal net assets or fund balances		32	362682.
33 T	otal liabilities and net assets/fund balances	. 298172.	33	363014.

Form **990** (2020)

Form 990	(2020)	AUSTIN	HOME	BASE

Par	XI Reconciliation of Net Assets				<u>jo : </u>
	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		6249	966.
2	Total expenses (must equal Part IX, column (A), line 25)	2		5568	850.
3	Revenue less expenses. Subtract line 2 from line 1	3		681	116.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		2945	566.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
-	column (B))	10		3626	682.
Part	XII Financial Statements and Reporting			t	
	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: X Cash Cash Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х	
	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:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		Х
	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:				
	Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	of			
L	the audit, review, or compilation of its financial statements and selection of an independent accountant?.		2c		Х
	If the organization changed either its oversight process or selection process during the tax year, explain o		20		Λ
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
Ja	the Single Audit Act and OMB Circular A-133?		3a		Х
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		54		23
~	required audit or audits. explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form 990 (2020)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

2020 **Open to Public**

OMB No. 1545-0047

Depar	tment	of the Treasury		Attack	n to Form 990 or Form 9	990-EZ.			Open to I			
Interna	al Rev	venue Service	Go to	o www.irs.gov/Form	1990 for instructions a	nd the late	est inform	ation.	Inspec	tion		
Name	of th	e organization			Employer identified							
AUS	TI	N HOME BA	ASE					20-1508336				
Par	τI	Reason fo	r Public Chari	ity Status. (All or	ganizations must co	mplete t	his part.)	See instructions.				
The	orga	nization is not a	a private founda	tion because it is: (For lines 1 through 12	, check o	nly one bo	ox.)				
1					of churches described							
2	X	A school descr	ihed in section	170(b)(1)(A)(ii) (A	Attach Schedule E (For	rm 000 or	000_F7))				
	_						-					
3		-	-		ization described in s							
4	· · · ·		0		unction with a hospital	describe	d in sect	ion 170(b)(1)(A)(iii)	. Enter the	;		
		-	e, city, and state									
5					ge or university owned	d or opera	ated by a g	governmental unit d	escribed ir	۱		
		section 170(b)) (1)(A)(iv). (Con	nplete Part II.)								
6		A federal, state	e, or local goveri	nment or governme	ental 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											
				(A)(vi). (Complete		0		0				
8		A community to	rust described ir	section 170(b)(1))(A)(vi). (Complete Pa	art II.)						
9		•			section 170(b)(1)(A)	,	ated in cor	niunction with a land	-grant coll	eae		
Ũ					Iture (see instructions)							
		university:			· · · · · · · · · · · · · · · · · · ·			•				
10		An organizatio	n that normally r	receives: (1) more t	han 33 1/3% of its sup							
					ions—subject to certai					3		
					ted business taxable i				nesses			
			•		See section 509(a)(2							
11	=	•	•	•	ely to test for public sa	•						
12					ely for the benefit of, to							
					lescribed in section 5							
	Г			•	ribes the type of suppo	•••		•		•		
а					pervised, or controlled							
				s) the power to reg mplete Part IV, Se	ularly appoint or elect	a majority	y of the di	rectors or trustees o	f the supp	orting		
h	Г			•	or controlled in connect	ction with	ite cuppo	tod organization(s)	by baying			
b					nization vested in the							
					Sections A and C.					04		
с	Γ	Type III fun	ctionally integ	rated. A supporting	organization operated	d in conne	ection with	n, and functionally in	tegrated w	/ith,		
	_				You must complete				•			
d		Type III nor	n-functionally i	ntegrated. A suppo	orting organization ope	erated in o	connection	n with its supported	organizatio	on(s)		
		that is not fu	inctionally integ	rated. The organiza	ation generally must sa	atisfy a di	stribution	requirement and an	attentiven	ess		
_	Г				plete Part IV, Sectio							
е	L				ritten determination fro			затурет, турет, т	уре пі			
f			er of supported		ally integrated suppor	ung organ	lization.		Γ			
g					rted organization(s).				· · _			
		Name of supported		(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Am	ount of		
					(described on lines 1-10		ur governing	support (see	other sup			
					above (see instructions))	docu	ment?	instructions)	instruc	tions)		
						Yes	No					
(A)												
(~)												
(B)												
(2)												
(C)												
(3)												
(D)												
(D)												
(E)												
(E)												
Tota	1											

SCHEDULE D	
(Form 990)	

Supplemental Financial Statements

 Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
 Attach to Form 990. OMB No. 1545-0047
2020
Open to Public

Depart	ment of the Treasury		Attach to Form 990.				Open to Public
	I Revenue Service	► Go to www.irs.gov	//Form990 for instructions a	nd the latest ir			Inspection
Name	of the organization				Employer ider		ımber
	STIN HOME				20-1508		
Part		ions Maintaining Donor				ounts.	
	Complete	if the organization answer	ed "Yes" on Form 990, Pa	art IV, line 6.	r		
			(a) Donor advised fu	nds	(b)	Funds and ot	ther accounts
1		end of year					
2		contributions to (during year) .					
3		grants from (during year)					
4		e at end of year				·	
5		ation inform all donors and do					
c		ganization's property, subject	-	-			Yes No
6		ation inform all grantees, dong le purposes and not for the b					
		missible private benefit?					Yes No
Dor		tion Easements.					
Par		if the organization answer	od "Voo" on Form 000 D	ort IV/ line 7			
1		onservation easements held b					
•		of land for public use (for examp			on of a histori	cally impo	rtant land area
						-	
		of natural habitat	L	Preservatio	on of a certifie	a historic	structure
		n of open space					
2		2a through 2d if the organizat	ion held a qualified conserv	ation contribut	tion in the for		
		e last day of the tax year.				Held at t	he End of the Tax Year
a		conservation easements					
b		estricted by conservation ease					
c d		ervation easements on a cert ervation easements included				+	
u		e listed in the National Regist					
3		ervation easements modified				the organi	zation during
	the tax year			0	,	0	5
4	•	s where property subject to c	onservation easement is loo	cated ►			
5		zation have a written policy re			on, handling o	of	
	violations, and e	enforcement of the conservati	on easements it holds?				Yes No
6	Staff and voluntee	r hours devoted to monitoring, in	specting, handling of violations	, and enforcing	conservation e	asements c	luring the year
	▶						
7		es incurred in monitoring, inspec	ting, handling of violations, and	enforcing cons	ervation easen	nents during	g the year
•	▶ \$				• • • •		
8		ervation easement reported					
0		(h)(4)(B)(ii)?					
9	•	and include, if applicable, the			•		
		ccounting for conservation ea		ganizations i			
Par		ions Maintaining Collect		reasures, o	r Other Sim	ilar Asso	ets.
i uii		if the organization answer					
1a		on elected, as permitted unde				it and bala	ance sheet
		torical treasures, or other sim					
	public service, p	rovide in Part XIII the text of	the footnote to its financial s	tatements that	t describes th	nese items	s.
b		on elected, as permitted unde					
		torical treasures, or other sim		chibition, educ	ation, or rese	arch in fur	therance of
		rovide the following amounts					
		uded on Form 990, Part VIII,				▶ \$	
c		led in Form 990, Part X .					
2	-	on received or held works of a				cial gain, j	provide the
_		ts required to be reported un					
		ed on Form 990, Part VIII, line					
D	Assets Included	in Form 990, Part X				P D	

Schedu	ule D (Form 990) 2020 AUSTIN HOME BA	ASE					20-	-1508	336	Page 2		
Part	III Organizations Maintaining Colleg	ctions of Ar	rt, Histor	rical Trea	asures, or C	Other						
3	Using the organization's acquisition, access collection items (check all that apply):	sion, and othe			-	•	at make significa	nt use o	of its			
а	Public exhibition		d		exchange pro							
b	Scholarly research		e	Other								
С	Preservation for future generations											
4	Provide a description of the organization's of XIII.		-	-	-	-		pose in	Part			
5	During the year, did the organization solicit assets to be sold to raise funds rather than	to be maintai						Ye	es	No		
Part	Escrow and Custodial Arrangem Complete if the organization answe 990, Part X, line 21.		n Form 9	90, Part	IV, line 9, or	repo	rted an amount	on Foi	m			
1a	included on Form 990, Part X?											
b	It "Yes," explain the arrangement in Part XII	II and comple		owing tab	le:			mount				
с	Beginning balance					10		anount				
d	Additions during the year					10						
е	Distributions during the year					1e	•					
f	Ending balance					1f	:					
2a	Did the organization include an amount on I	Form 990, Pa	rt X, line 2	21, for es	crow or custod	dial ac	count liability?	Ye	es X	No		
b												
Part	Part V Endowment Funds.											
	Complete if the organization answe	ered "Yes" o	n Form 9	90, Part	IV, line 10.							
		Current year	(b) Pri	or year	(c) Two years b	back	(d) Three years back	(e) Fo	our years	back		
1a	Beginning of year balance											
b	Contributions											
С	Net investment earnings, gains, and losses											
d	Grants or scholarships											
е	Other expenditures for facilities											
	and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the cu Board designated or quasi-endowment	rrent year end 0.00		(line 1g, o	column (a)) ne	eid as:						
a b	Permanent endowment • 0.	00%	_ /0									
c	Term endowment ► 0.00 %	/0										
	The percentages on lines 2a, 2b, and 2c sh	ould equal 10	0%.									
3a	Are there endowment funds not in the posse	ession of the	organizat	ion that a	re held and ad	dminist	ered for the	1				
	organization by:								Yes	No		
	(i) Unrelated organizations							3a(i)				
b	(ii) Related organizations							3a(ii) 3b				
4	Describe in Part XIII the intended uses of th					• •		0.0				
Part												
	Complete if the organization answe	ered "Yes" o	n Form 9	90, Part	IV, line 11a.	See	Form 990, Part	X, line	10.			
	Description of property	(a) Cost or ot (investm			or other basis other)	• • •	Accumulated epreciation	(d) B	ook valu	e		
1a	Land											
b	Buildings				225.		186.		<u>с</u>	9.		
с Ь	Leasehold improvements			<u>ح</u>	225.		48,171.		3 4,23			
d e	Equipment			J.	689.		689.		- -	±•		
-	Add lines 1a through 1e. (Column (d) must	equal Form	990, Part	X, columr)			4,27	0.		

Part VII Investments—Other Securities. Complete if the organization answered	"Yes" on Form 990	Part IV line 11b See Form 990 F	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	:
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)	-		
<u>(E)</u>	-		
(F)			
(G)	-		
(H) Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments—Program Related.			
Complete if the organization answered	"Yes" on Form 990	Part IV line 11c See Form 990 F	Part X line 13
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market	:
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶	►		
Part IX Other Assets. Complete if the organization answered	"Yes" on Form 990.	Part IV. line 11d. See Form 990. F	Part X, line 15.
(a) Desc			(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Tatal (Calumn (b) much annal Farm 2000 Dart V. cal. (5	2 $im = 4E$		
Total. (Column (b) must equal Form 990, Part X, col. (E	3) line 15.)		
Part X Other Liabilities. Complete if the organization answered	"Yes" on Form 990,	Part IV, line 11e or 11f. See Form	990, Part X,
line 25. (a) Descri	iption of liability	I	(b) Book value
(1) Federal income taxes			
(2) STATE UNEMPLOYMENT TAX PAYAB	LE		332.
(3)			
(4)			
(5)			
(6)			
(6)			
(6) (7)			332.

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.

SCH	EDULE E	Schools	OMB No	1545-0	047
(For	n 990 or 990-EZ)	Complete if the organization answered "Yes" on Form 990,	20	20	
Donor	tment of the Treasury	Part IV, line 13, or Form 990-EZ, Part VI, line 48. ► Attach to Form 990 or Form 990-EZ.	Open t		ic
	al Revenue Service	Go to www.irs.gov/Form990 for the latest information.	Inspect		
	of the organization	Employer identifica		ıber	
	TIN HOME B	ASE 20-150833	5		
Par	tl			1/50	
1	Does the organiz	ation have a racially nondiscriminatory policy toward students by statement in its charter,		YES	NO
•	•	rerning instrument, or in a resolution of its governing body?	1	Х	
2		ion include a statement of its racially nondiscriminatory policy toward students in all its brochures,	-		
	•	ner written communications with the public dealing with student admissions, programs, and scholarshi	os 2	Х	
3	Has the organization	on publicized its racially nondiscriminatory policy on its primary publicly accessible Internet			
		nes during its taxable year in a manner reasonably expected to be noticed by visitors to the			
		ugh newspaper or broadcast media during the period of solicitation for students, or during the			
		if it has no solicitation program, in a way that makes the policy known to all parts of the general s? If "Yes," please describe. If "No," please explain. If you need more space, use Part II	3	Х	
	A STATEMEN	IT IS POSTED ON THE WEBSITE AND IN JOB POSTINGS THAT		23	
	AHB COMMUN	IITY SCHOOL DOES NOT DISCRIMINATE ON THE BASIS OF			
	RACE, COLC	DR, GENDER, SEXUAL ORIENTATION, NATIONALITY, ETHNIC			
		R RELIGIOUS AFFILIATION IN ITS HIRING, ADMISSIONS OR			
		INISTRATION OF ITS PROGRAMS.			
4	•	ation maintain the following?	40		Х
a b		g the racial composition of the student body, faculty, and administrative staff?	<u>4a</u>		Λ
		/ basis?	4b	Х	
с		logues, brochures, announcements, and other written communications to the public dealing			
		issions, programs, and scholarships?	4c	Х	
d		erial used by the organization or on its behalf to solicit contributions?	4d	Х	
		No" to any of the above, please explain. If you need more space, use Part II.			
		MANAGEMENT DATABASE DOES NOT HAVE FIELDS TO TRACK DEMOGRAPHIC DATA. HOWEVER AHB ADHERES TO A STRICT			
		NONDISCRIMINATION IN ANY MATTER.			
5		ation discriminate by race in any way with respect to:			
а	Students' rights o	r privileges?	5a		Х
b	Admissions polici	es?	5b		Х
с	Employment of fa	culty or administrative staff?	5c		Х
C			50		21
d	Scholarships or o	ther financial assistance?	5d		Х
е	Educational polic	ies?	5e		Х
f	Lise of facilities?		5f		Х
•			51		21
g	Athletic programs	?	5g		Х
	.				5.7
h			5h		Х
	-	Yes" to any of the above, please explain. If you need more space, use Part II.			
6a	-	ation receive any financial aid or assistance from a governmental agency?	6a		X
b	-	tion's right to such aid ever been revoked or suspended?	6b		Х
7	-	Yes" on either line 6a or line 6b, explain on Part II. ation certify that it has complied with the applicable requirements of sections 4.01 through			
'		2. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	7	Х	

SCHEDULE I			d Other Assist				OMB No. 1545-0047
(Form 990)			ts, and Individ ganization answered "Y				2020
			Attach to F		IV, III 2 1 01 22.		Open to Public
Department of the Treasury Internal Revenue Service		► Go to	www.irs.gov/Form990		tion.		Inspection
Name of the organization			in the original connector			Employer identif	
AUSTIN HOME BASE						20-150833	6
Part I General Information	n on Grants	and Assistance					
 Does the organization maint the selection criteria used to Describe in Part IV the organ 	award the gran	its or assistance? .					X Yes No
		•			s. Complete if the or cated if additional space	0	d "Yes" on Form
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)							
(2)							
(4)							
(5)							
(6)							
(7)							
(9)							
(10)							
(11)							
(12)							
2 Enter total number of section 3 Enter total number of other of							
3 Enter total number of other of For Paperwork Reduction Act Notice				<u></u>			Schedule I (Form 990) 2020

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

Schedule I (Form 990) 2020

 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 ACADEMIC SCHOLARSHIPS	6	7,250.			
2					
3					
4					
5					
6					
7					
Part IV Supplemental Information. Provide 1	the information rec	uired in Part I, line	2; Part III, column (b); and any other addition	nal information.
PART I, LINE 2					
SCHOLARSHIP APPLICANTS SUBMIT	AN APPLICAT	FION WITH FI	NANCIAL		
INFORMATION THROUGH OUR TUITIC	N MANAGEMEN	NT PROVIDER	WHO		
PROVIDES AN UNBIASED ANALYSIS	ON WHICH TH	HE SELECTION	IS MADE		
BY THE SCHOOL SCHOLARSHIP COMM	IITTEE.				

SCHEDULE O	Supplemental Information to Form 990 or 990)-EZ	OMB No. 1545-0047
(Form 990 or 990-EZ)	Complete to provide information for responses to specific question Form 990 or 990-EZ or to provide any additional information.		2020
Department of the Treasury	 Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information. 		Open to Public
Internal Revenue Service Name of the organization	•		Inspection ification number
AUSTIN HOME	BASE	20-15083	36
PART III, LI	NE 3		
DUE TO THE C	OVID PANDEMIC, AUSTIN HOME BASE TRANSITIC	NED TO	
CLASSES COND	UCTING ONLINE. THE AFTER SCHOOL PROGRAM W	IAS	
TEMPORARILY	SUSPENDED.		
PART VI, SEC	TION A, LINE 4		
	ERE AMENDED WITH ONLY MINOR CHANGES.		
PART VI, SEC	TION A, LINE 6		
EACH FAMILY	WITH ONE OR MORE STUDENTS ENROLLED IN THE	, , 	
SCHOOL IS GR	ANTED ONE MEMBERSHIP UNIT WITH ONE VOTE.		
PART VI, SEC	TION A, LINE 7A		
AN ANNUAL ME	ETING IS HELD IN WHICH THE MEMBERS VOTE T	0	
FILL THE EXP	IRING SEATS ON THE BOARD OF DIRECTORS. DI	RECTORS	
ARE ELECTED	TO TWO YEAR TERMS WITH SEVEN ELECTED SEAT	'S.	
PART VI, SEC	TION A, LINE 7B		
	RESPONSIBLE FOR ELECTING THE BOARD OF DIR	ECTORS,	
AMENDING THE	BYLAWS AND ARTICLES OF INCORPORATION, SE	LLING	
	ASSETS, OR DISSOLVING THE CORPORATION.		
	TION B, LINE 11B		
FORM 990 IS	SUBMITTED TO MANAGEMENT. AFTER ANY CHANGE	IS ARE	
MADE, IT IS	RESUBMITTED TO MANAGEMENT. IF ACCEPTED, I	TIS	
	BOARD PRESIDENT FOR APPROVAL AND THEN FIL		(Form 990 or 990-E7) 2020

Schedule O (Form 990 or 990-EZ) 2020	Page 2
Name of the organization AUSTIN HOME BASE	Employer identification number 20–1508336
PART VI, SECTION B, LINES 15A & 15B	
THE GOVERNACE COMMITTEE REVIEWS SALARIES FOR KEY EMP	LOYEES
AND USES COMPARABLE DATA FOR DETERMINATION. THE BOAR	D
REVIEWS AND APPROVES ALL SALARIES THROUGH THE ANNUAL	·
BUDGETING PROCESS.	
PART VI, SECTION C, LINE 19	
SCHOOL POLICIES AND OTHER PUBLIC DOCUMENTS ARE AVAIL	ABLE ON
THE SCHOOL WEBSITE AND ARE ALSO FURNISHED UPON REQUE	ST.

F a ma	4560		Depreciation and Amortization										
Form	4562		(Includi	ng Information or	n Listed P	roperty)		2020					
Departm	ent of the Treasury		X	Attach to your tax		· • · · , /		Attach					
	Revenue Service (99)		Go to www.irs.g	ov/Form4562 for instructi		test informatio	n.		ence No. 179				
Name	(s) shown on return			ss or activity to which this fo			Identifying numb						
AUST	IN HOME BASE			ATION			20-150	0833	6				
Part		-	-	erty Under Section 17									
				e Part V before you complet									
								1					
			•	e (see instructions).				2					
				iction in limitation (see in If zero or less, enter -0-				3 4					
				ne 1. If zero or less, ente				4					
		•		· · · · · · · · · · · · · · · · · · ·		•		5					
6		Description of			ost (business use		(c) Elected co						
		· · ·	· · · ·										
				ounts in column (c), lines				8					
				line 8				9					
				our 2019 Form 4562.				10					
				isiness income (not less				11					
				0, but don't enter more th				12					
-				es 9 and 10, less line 12		🏲 13							
				erty. Instead, use Part V. d Other Depreciation	(Don't inclue	le listed prop	erty. See instru	ction	2)				
				ty (other than listed prop					5.1				
								14					
	• •							15					
								16					
Part	II MACRS De	preciation	(Don't include	listed property. See ins	structions.)								
				Section A									
				tax years beginning befo				17	1,981				
	you are electing to g sset accounts, check		•	ervice during the tax year		•	🕨 🗌						
	Section	B - Assets	Placed in Servi	ice During 2020 Tax Ye	ar Using the	General Depr	eciation Syster	n					
	(a) Classification of pro	onerty	(b) Month and year placed	(c) Basis for depreciation (business/investment use	(d) Recovery	(e) Convention	(f) Method	(a) De	preciation deduction				
	(u) clacomoutor of pro	sporty	in service	only—see instructions)	period		(I) Method	(9) 00					
19 a	3-year property												
	5-year property												
-	7-year property												
d	10-year property												
	15-year property												
	20-year property												
	25-year property				25 yrs.		S/L						
h	Residential rental				27.5 yrs.	MM	S/L						
<u> </u>	property				27.5 yrs.	MM	S/L						
1	Nonresidential real				39 yrs.	MM	S/L						
	property Section (Naacto 7	loood in Comdia	e During 2020 Tax Year	lloine the A	MM Iternetive De	S/L						
20 2	Class life	- Assels P	naced in Servic	e During 2020 Tax Tear	Using the A	iternative De	S/L	em					
-	12-year				12 yrs.		S/L						
	30-year				30 yrs.	MM	S/L	+					
	40-year				40 yrs.	MM	S/L	1					
Part		See instru	ctions.)		10 910.		0,2	1					
	sted property. Enter							21					
				17, lines 19 and 20 in co	lumn (g), and	line 21. Enter							
				artnerships and S corpor				22	1,981				
				ing the current year, ente									
ро	ortion of the basis at	tributable to	section 263A co	sts	<u></u> .	23							
Ear D	anorwork Reduction /		a concrete instru	ationa				_	m 4562 (2020)				

For Paperwork Reduction Act Notice, see separate instructions. BCA

Page: 1

	Date	a 1		179+			Rec.		Current	Next		Current	-		Date
Description	Acqd 	Cost	Use	Spec.	Basis	Method	Per. C	-	Depr.	Year	AMT	AMT	Price	Price	Sold
Form: EDUCAT	TION														
Rental Prop	-														
Depreciati		-	eting	rental	proper	ty									
In Servio		-													
CARPET	08/17	-	100		225	MACRS	5.0 H	Y 160	26	26	131	37			
		225													
Depreciati		-	uter	softwar	e										
In Servio		-													
SOFTWARE-CEN	/		100		500	AMORTIZ	3.0	486							
In Servio															
SOFTWARE - N	1 09/15	-	100		48	AMORTIZ	3.0	47							
		48													
In Servio															
MICROSOFT OF	5 08/16	141	100		141	AMORTIZ	3.0	141							
Depreciati			hand	ling eq	uipment										
In Servio	e Year:	2010													
COMPUTERS	08/10	7490	100			MACRS	5.0 H	Y 7490							
STATE	INFO:	7490				MACRS	5.0 H	Y 7490							
In Servio	e Year:	2013													
COMPUTER EQU	J 07/13	2502	100		2502	MACRS	5.0 H	Y 2501			2502				
STATE	INFO:	2502			2502	MACRS	5.0 H	Y 2501			2502				
In Servio	e Year:	2014													
COMPUTER EQU	J 04/14	2104	100		2104	MACRS	5.0 H	Y 2103			2104				
In Servio	e Year:	2015													
3 HP STREAM	06/15	1072	100		1072	MACRS	5.0 H	Y 1009	62		983	89			
MACBOOK FOR	08/15	2154	100		2154	MACRS	5.0 H	Y 2030	124		1974	179			

Page: 2

2020 ASSET DETAIL REPORT

Description	Date Acqd	Cost		179+ Spec.	Basis	Method	Rec. Per.	Cv	Prior Depr.	Current Depr.	Next Year	Prior AMT	Current AMT	Gain/ Price	Sales Price	Date Sold
CAMCORDER AN	04/15		100		170	MACRS	5.0	ΗY	161	9		155	14			
		170				MACRS	5.0									
		3396			3396				3200	195		3112				
In Service	Year:	2016														
MICROSOFT LA	08/16	450	100		450	MACRS	5.0	ΗY	372	52	26	338	75			
		450														
In Service	e Year:	2020														
APPLE COMPUT	12/20	7790	100	7790		MACRS	5.0	ΗY								
STATE		7790		7790		MACRS	5.0	ΗY								
Depreciatio	on Clas	s: Furn	iture	and fi	xtures :	nonrenta	1									
In Service	e Year:	2010														
BENCH & BULL	01/10	240	100			MACRS	7.0	ΗY	240							
STATE	INFO:	240				MACRS	7.0	ΗY	240							
In Service	e Year:	2017														
LOCKING STOR	06/17	1340	100		1340	MACRS	7.0	ΗY	753	167	120	601	164			
		1340														
CLASSROOM CH	06/17	215	100		215	MACRS	7.0	ΗY	122	27	19	96	26			
		215														
		1555			1555				875	194	139	697	190			
In Service	e Year:	2019														
FURNITURE	08/19	1155	100		1155	MACRS	7.0	ΗY	165	283	202	124	221			
		1155														

Depreciation Class: Machinery and equipment other

In Service Year: 2014

Page: 3

2020 ASSET DETAIL REPORT

	Date Acqd Cost		179+ Spec.	Basis	Method	Rec. Per. Cv	-	Current Depr.	Next Year	Prior AMT	Current AMT	Gain/ Price	Sales Price	
CHAIR LIFT 09	9/14 12942	2 100		12942	MACRS	7.0 HY	11208	1156	577	10562	1585			
AUTOMATED EX 0		100 L		601	MACRS	7.0 HY	338	75	54	269	74			
Form Totals:	41139	-)	7790	 25619			29326	 1981	1024	 19839	2464			

Form 8879-EO		ure Authorization t Organization	1	OMB No. 1545-0047
Department of the Treasury Internal Revenue Service	For calendar year 2020, or fiscal year beginning Do not send to the IRS Go to www.irs.gov/Form887			2020
Name of exempt organization	r person subject to tax		xpayer identification n	umber
AUSTIN HOME BASE Name and title of officer or per	con subject to tax	20	-1508336	
ALEXA CORBETT		PRESIDENT		
Part I Type of F	eturn and Return Information (Whole	Dollars Only)		
If you check the box on form was blank, then le	turn for which you are using this Form 8879- ine 1a, 2a, 3a, 4a, 5a, 6a , or 7a below, and we line 1b, 2b, 3b, 4b, 5b, 6b , or 7b , which nter -0- on the applicable line below. Do not	the amount on that line for th ever is applicable, blank (do r	e return being filed not enter -0-). But, i	l with this
1a Form 990 check he				624,966
2a Form 990-EZ check	here b Total revenue, if any (For	m 990-EZ, line 9)	2b	
3a Form 1120-POL ch	eck here 🕨 🔄 b Total tax (Form 1120	-POL, line 22)	3b	
4a Form 990-PF check	here b Tax based on investment	t income (Form 990-PF, Par	t VI, line 5) 4b	
5a Form 8868 check h	ere b Balance due (Form 8868,	line 3c)		
6a Form 990-T check				
7a Form 4720 check h				
Part II Declarati	on and Signature Authorization of Office of the above of			
Agent to initiate an electro software for payment of th a payment, I must contact (settlement) date. I also au confidential information ne	fund, and (c) the date of any refund. If applicable, ic funds withdrawal (direct debit) entry to the financi- federal taxes owed on this return, and the financi- he U.S. Treasury Financial Agent at 1-888-353-45 horize the financial institutions involved in the pro- ressary to answer inquiries and resolve issues rela- as my signature for the electronic return and, if ap	cial institution account indicated al institution to debit the entry to 37 no later than 2 business days cessing of the electronic paymen ted to the payment. I have select	in the tax preparation this account. To revo prior to the payment t of taxes to receive ted a personal	n ike
PIN: check one box o	lv			
X I authorize Le	-	to enter my PIN	78751 Enter five numbers, b do not enter all zeros	as my signature ut
a state agency	2020 electronically filed return. If I have indi (ies) regulating charities as part of the IRS F in the return's disclosure consent screen.		copy of the return	
electronically	r person subject to tax with respect to the org led return. If I have indicated within this retur ities as part of the IRS Fed/State program, I	n that a copy of the return is	being filed with a s rn's disclosure con	state agency(ies) sent screen.
Signature of officer or person	ubject to tax 🕨 Aler Con MA		Date ► 5/13	/2021
Part III Certificat	on and Authentication			
	your six-digit electronic filing identification			
number (EFIN) followed	by your five-digit self-selected PIN.	7015	7178723 do not enter a	III zeros
	umeric entry is my PIN, which is my signatur return in accordance with the requirements of susiness Returns. Michael Diesling	Pub. 4163, Modernized e-File		
	ERO Must Retain This F			
	Do Not Submit This Form to the I	RS Unless Requested To		
For Paperwork Reductio	Act Notice, see back of form.		Fo	rm 8879-EO (2020)