Form 990
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

B Check if applicable:
<table>
<thead>
<tr>
<th>Address change</th>
<th>Name change</th>
<th>Initial return</th>
<th>Final return/terminated</th>
<th>Amended return</th>
<th>Application pending</th>
</tr>
</thead>
</table>

C Name of organization
Project Exploration

D Employer identification number
36-4305660

E Telephone number
312-273-4026

F Name and address of principal officer:
Natasha Smith-Walker
4511 South Evans
Chicago
IL 60653

G Gross receipts
969,150

H(a) Is this a group return for subordinates?
Yes [X] No

H(b) Are all subordinates included?
Yes [X] No

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

J Website: Projectexploration.org

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other

L Year of formation: 1999

M State of legal domicile: IL

Part I Summary

1 Briefly describe the organization's mission or most significant activities:

See Schedule O

2 Check this box [X] 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)
4 Number of independent voting members of the governing body (Part VI, line 1b)
5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)
6 Total number of volunteers (estimate if necessary)

7a Total unrelated business revenue from Part VIII, column (C), line 12
7b Net unrelated business taxable income from Form 990-T, line 39

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12)

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

16(a) Professional fundraising fees (Part IX, column (A), line 11e)

16(b) Total fundraising expenses (Part IX, column (D), line 25)

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

18 Total expenses, Add lines 13–17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses. Subtract line 18 from line 12

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances. Subtract line 21 from line 20

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.

Signature of officer
Natasha Smith-Walker

Executive Director

Date 7/15/21

Paid Preparer
Print/Type preparer's name
Rodney C. Scott
Preparer's signature
Rodney C. Scott

Paid Preparer Use Only
Firm's name Kopczyk, Osher & Scott CPA Services
Firm's EIN 20-4206235

Address 4415 Harrison St Ste 552
Hillside, IL 60162-1911

Phone no. 312-527-0111

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

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2019)