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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter Social Security numbers on this form as it may be made public. Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

ড়াবন (১ গ্রাচীর উদ্যানক্ষীয়ের

A	For the 2	013 calen	dar year, or tax year beginning , 2013, and ending				
В	Check if app		C	D Empl	oyer Identifica	tion Number	
	X Address	change	Race Forward	94	-275987	9	
	Name o		32 Broadway #1801	E Telep	hone number		
	Initial re	eturn	New York, NY 10004	21	2-513-7	925	
	Termina	ated					
	Amende	ed return		G Gross	receipts \$	2,757,1	88.
	\vdash	tion pending	F Name and address of principal officer Baishali Rinku Sen	(a) Is this a group ret			XINO
				(b) Are all subordinat If 'No,' attach a lis	tes included?	Yes	No
ī	Tax-exem	nt status	X 501(c)(3) 501(c) () 4947(a)(1) or 527	If 'No,' attach a lis	st (see instruct	tions)	
i	Website	<u> </u>		(c) Group exemption	number ►		
K		rganization	X Corporation Trust Association Other L Year of formatio		State of legal	domicile CA	
		Summar		<u>1301 </u>	- Cutte of legal	doment CII	
	1 Brie	efly descri	be the organization's mission or most significant activities. Race Form	ard's miss	ion is	build	
_		renes	s, solutions and leadership to racial justice 1	w denerati	ing trai	oeformati	
∠∪}∜ Governance	id		nformation and experiences through media, research				<u> </u>
Ē	de	velopm			- A A C T D.I.	-E	
⋛	2 Che	ck this bo		e than 25% of it	s net assets	s	
~ĕ	3 Nur		iting members of the governing body (Part VI, line 1a)		3		11
್ರ್ ಇ	4 Nur		dependent voting members of the governing body (Part VI, line 1b)		4		9
≘;e	5 Tota		of individuals employed in calendar year 2013 (Part V, line 2a)		5		42
Activities	6 lot		of volunteers (estimate if necessary) .		6		30
¥ 5	/a 100		ed business revenue from Part VIII, column (C), line 12 I business taxable income from Form 990-T, line 34		7a 7b		0.
<u>) —</u>	D Net	unrelated	business taxable income from Form 950-1, line 34	Prior Yea		Current Year	0.
7	8 Cor	atributions	and grants (Part VIII, line 1h)	5,208,			
3	1		rice revenue (Part VIII, line 2g)		681.	791,2 333,5	
Revenue	1	-	ncome (Part VIII, column (A), lines 3, 4, and 7d)		652.	39,3	
æ			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e).		871.	14,7	
			e – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,826,		1,178,8	
			milar amounts paid (Part IX, column (A), lines 1-3)	1 3/3=3/			
			to or for members (Part IX, column (A), line 4)				
	I .		er compensation, employee benefits (Part IX, column (A), lines 5-10)	1,869,	916	1,909,0	154
8	16a Pro		fundraising fees (Part IX, column (A), line 11e)	2/003/		2/303/0	
Expenses	L Tot						<u> </u>
ă	D 100		sing expenses (Part IX, column (D), line 25) > 316, 085.	1 000			
		•	es (Part IX, column (A), lines 11a-11d, 11f-24e)	1,328,		910,7	
			es. Add lines 13-17 (must equal Part IX, colu mn (A), line 25). expenses. Subtract line 18 from line 12	3,198,		2,819,8	
8		enue less	4634131	2,628,		-1,641,0	
	7 1	al accets	(D-4 V (10)	Beginning of Curr		End of Year	
A S	M		(Part X, line 16) s (Part X, line 26)	5,979,		4,274,8	
ž	il		12	-1 6	676.	251,0	
	ZZ Net		Tand balances oubtract line 21 from line 20	5,692,	543.	4,023,7	<u> 795.</u>
		Signatur		1			
Und	ler penalties o aplete Declara	of perjury, I de ation of prepa	eclare that I have examined this return, including accompanying schedules and statements, and to the irer (other than officer) is based on all information of which preparer has any knowledge	te best of my knowled	ge and belief, if	t is true, correct, ar	nd
_	·	10	17/hala 17 CO4	- 1 11 /12	1-114		
c:		Shanatu	re of officer	Date	7110		
DI4	gn ere	20	ishali R. Sen, President				
110		Type or	print name and title				
_			·	Charle	T J PTII	N	
_			10000 10000 11141	14 Check	□"		
	id		1,0000	self-empl	oyea IPU	1664922	
	eparer se Only	Firm's name			M - 37/2		
J:	J. Jiny	Firm's addre		Firm's Ell		025 2727	
NA-	w the IDC	discuss 45	Oakland, CA 94612-2151	Phone no	(020/	835-2727	
_			nis return with the preparer shown above? (see instructions)			X Yes	No
6A	w rorra	perwork i	teduction Act Notice, see the separate instructions.	A0113L 11/08/13		Form 990 ((といろ)

				94-2	75987	9	F	age 2
141			ement of Program Service Accomplishments					
			k if Schedule O contains a response or note to any line in this Part III				• • •	. X
1	-		ibe the organization's mission:					
	<u>See</u>	<u>Sche</u>	dule 0	-				
				- - -				
2		•	ization undertake any significant program services during the year which were not listed on the prior					
	•		990-EZ?	• •		Yes	X	No
_		•	cribe these new services on Schedule O.	_				
3		_	nization cease conducting, or make significant changes in how it conducts, any program serving	ces?		Yes	X	No
			cribe these changes on Schedule O.					
4	Descri Section others	be the n 501(c , the to	organization's program service accomplishments for each of its three largest program service (3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grotal expenses, and revenue, if any, for each program service reported	es, as n ants an	neasure d alloca	ed by e itions t	expen o	ses
4	(Code	:) (Expenses \$ 1,127,791. including grants of \$) (Rev	enue	\$)
			dule 0		·—			— —′
	<u>566</u> _	<u> </u>	<u> </u>			- <i>-</i> -	-	
41	(Code) (Expenses \$ 592,260. including grants of \$) (Rev	enue	\$	25	2.51	9.)
	•		rward presents Facing Race, the largest multi-racial, multi					<u>,,,,</u>
			isciplinary conference for racial justice movement-making,				¥	
			e-building, issue-framing, and advancing solutions. In addi				 r	
	Spea	kers	s, trainings and consulting services. In 2013, the Network	Depa	rtmer	ים בע	covi	ded
			on racial justice trainings to over 1,500 individuals and t			. <u>. </u>	=	
			ation/groups.					
	353							
4	: (Code) (Expenses \$ 277, 802. including grants of \$) (Rev	enue	Ś			
٦,				CHUC	~ —			'
	2ee⁻	<u> 2cire</u>	<u>dule_0</u>					
							-	
							-	
							 -	
		-		- - -				
	1 Other	nrogra	am services. (Describe in Schedule O.) See Schedule O					
	Expe)		am services. (Describe in Schedule O.) See Schedule O \$ 135,704. including grants of \$) (Revenue \$		00	000	,	
			m service expenses ► 2,133,557.		80,	, 30 .	/ _	
BAA		₽. ~ B. c	TEEA0102L 07/02/13	_		Form	990	(2013)

Form 990 (2013) Race Forward Checklist of Required Schedules

			Yes	No
ì	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4	х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If 'Yes,' complete Schedule D, Part V</i>	10	Х	
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
i	a Did the organization report an amount for land, buildings and equipment in Part X, line 10° <i>If 'Yes,' complete Schedule D, Part VI</i>	11 a	Х	
	b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.	11 b		Х
	c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
1	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		<u>X</u>
	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	11 f	х	
12:	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	х	
	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	12 b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E.	13		<u> </u>
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
1	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b	_	<u>x</u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15	_	Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV.	16		X
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		<u>x</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		X
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		<u> </u>
١	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 ь	1	

Form 990 (2013) Race Forward

Part M. Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23		Х
24 a	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 24b through 24d and complete Schedule K. If 'No,'go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		$\overline{}$
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
c	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? 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, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		_ X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 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, Parts II, III, IV, and V, line 1	34	X	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
t	olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
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	
BAA		Form	990 (2013)

Form 990 (2013) Race Forward	94-2759	879	Page
Party Statements Regarding Other IRS Filings and Tax Compliance			_
Check if Schedule O contains a response or note to any line in this Part V	· · · · · · · · · · · · · · · · · · ·		
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 a 1 b	8	Yes No
c Did the organization comply with backup withholding rules for reportable payments to vendors and (gambling) winnings to prize winners?	reportable gaming	1 c	Х
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State ments, filed for the calendar year ending with or within the year covered by this return	2 a	42	
b If at least one is reported on line 2a, did the organization file all required federal employments		_2b	Х
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see	•		
3 a Did the organization have unrelated business gross income of \$1,000 or more during the yill be if 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule 0	ear?	3 a	Х
4a At any time during the calendar year, did the organization have an interest in, or a signature or ot financial account in a foreign country (such as a bank account, securities account, or other	her authority over, a financial account)?	4 a	х
b If 'Yes,' enter the name of the foreign country:			
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			V
5a Was the organization a party to a prohibited tax shelter transaction at any time during the	-	5 a	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax she c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	enter transaction?	5 b	
· · · · · · · · · · · · · · · · · · ·	• •	30	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, solicit any contributions that were not tax deductible as charitable contributions?	• •	6 a	х
b if 'Yes,' did the organization include with every solicitation an express statement that such contrib not tax deductible?	utions or gifts were	6 Ь	
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 services provided to the payor?		7 a	Х
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided		7 b	
 c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it Form 8282? d If 'Yes,' indicate the number of Forms 8282 filed during the year . 	1 = 1	7с	Х
e Did the organization receive any funds, directly or indirectly, to pay premiums on a person	al henefit contract?	7 e	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal bit		71	$\frac{1}{x}$
g If the organization received a contribution of qualified intellectual property, did the organization file as required?		7.g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?	he organization file a	7 h	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) suppor supporting organization, or a donor advised fund maintained by a sponsoring organization, holdings at any time during the year?	ting organizations. Did the have excess business	8	
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?		9 a	
b Did the organization make a distribution to a donor, donor advisor, or related person?		9 b	
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities .	10 Ь		
11 Section 501(c)(12) organizations. Enter	11	· .	
a Gross income from members or shareholders	11 a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11·b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu		12a	
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b	_	10
13 Section 501(c)(29) qualified nonprofit health insurance issuers. a is the organization licensed to issue qualified health plans in more than one state?		12	110 14
Note. See the instructions for additional information the organization must report on Sched	fula O	13a	78 72 24 P
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	136		
c Enter the amount of reserves on hand	13c		

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

14a

14b

roim :	(2013) Race Forward		94-2759	879	ŀ	Page (
े हिता	Governance, Management and Disclosure For each 'Yes' response a 'No' response to line 8a, 8b, or 10b below, describe the circumstant Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	to line ices,	es 2 through 70 processes, or o	b below, changes	and in	for
Cocti			· ·	•	•	. д
Secu	on A. Governing Body and Management				T	1
l·	Enter the number of voting members of the governing body at the end of the tax year f there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O	1 a		11	Yes	No
	Inter the number of voting members included in line 1a, above, who are independent	1 1 6		9		
2 [Old any officer, director, trustee, or key employee have a family relationship or a business relation officer, director, trustee or key employee?	ship wi	th any other	2		Х
3 D	old the organization delegate control over management duties customarily performed by or under the officers, directors or trustees, or key employees to a management company or other persons.	he dire son?	ct supervision	3		Х
	old the organization make any significant changes to its governing documents ince the prior Form 990 was filed? See Sch O			. 4	x	
	old the organization become aware during the year of a significant diversion of the organization	ation's	assets?	5	+	X
	old the organization have members or stockholders?			. 6	+	X
	old the organization have members, stockholders, or other persons who had the power to elect or a nembers of the governing body?	appoint	one or more	7 2		x
	are any governance decisions of the organization reserved to (or subject to approval by) metockholders, or other persons other than the governing body?	embers	5,	71		х
8 C	old the organization contemporaneously document the meetings held or written actions undertaken the following:	during	the year by			
аT	he governing body?			8 8	Х	
b E	Each committee with authority to act on behalf of the governing body?			81		
9 Is	s there any officer, director, trustee, or key employee listed in Part VII, Section A, who can irganization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	not be	reached at the	9		x
Secti	on B. Policies (This Section B requests information about policies not re-	guirea	d by the Interna	al Reven	ue C	
					Yes	No
10 a 🛭	old the organization have local chapters, branches, or affiliates?			10 a		X
	'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, perations are consistent with the organization's exempt purposes?	and bra	nches to ensure their	101		
11 a H	as the organization provided a complete copy of this Form 990 to all members of its governing body before filing the	form?		11 a	X	
b 0	Describe in Schedule O the process, if any, used by the organization to review this Form 99	0. S	ee Schedule	0		
	old the organization have a written conflict of interest policy? If 'No,' go to line 13		•	12 a	X	
bγ	Vere officers, directors, or trustees, and key employees required to disclose annually interests that	could	give rise			
c D	o conflicts?. In the organization regularly and consistently monitor and enforce compliance with the policy? If	Yes,' d	escribe in	121		
	Schedule O how this was done See Schedule O			120		<u> </u>
	Old the organization have a written whistleblower policy?			13	Х	
	old the organization have a written document retention and destruction policy?			14	Х	
р	the process for determining compensation of the following persons include a review and approximations, comparability data, and contemporaneous substantiation of the deliberation and deliberatio	ecision	ndependent ?			
	The organization's CEO, Executive Director, or top management official See Schedul	e u	•	15 a		<u> </u>
	Other officers of key employees of the organization See Schedule O	•	•	. 15 t	Х	
	'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)					
ta	Old the organization invest in, contribute assets to, or participate in a joint venture or similal axable entity during the year?		igement with a	16 a		Х
р	'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluarticipation in joint venture arrangements under applicable federal tax law, and taken step rganization's exempt status with respect to such arrangements?	ate its s to sa	feguard the	16 b		
	on C. Disclosure					
	ist the states with which a copy of this Form 990 is required to be filed CA_IL_NY_					
[ner <i>(ex</i>	plaın ın Schedule O)		public
U	escribe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest ne public during the tax year. See Schedule O					
20 S	state the name, physical address, and telephone number of the person who possesses the books a	ind rec	ords of the organiza	ation:		

ParkWIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and **Independent Contractors** Check if Schedule O contains a response or note to any line in this Part VII

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.											
(A) Name and Title	(B) Average hours per week (list	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation	
	any hours for related organiza- tions below dotted line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations	
(1) Baishali Rinku Sen	50										
President & ED	0	X		Х				103,000.	0.	15,785.	
(2) Ellen Gurzinsky	1										
Co-Chair	0	Х		Х				0.	0.	0.	
(3) Dorian Warren	1										
Co-Chair	0	Х		Х		·		0.	0.	0.	
(4) LeeAnn Hall	1										
Treasurer/Sec.	10	Х		Х				0.	0.	0.	
(5) Gary Delgado	1			-							
Dir. Emeritus	0	X.						66,000.	0.	15,319.	
(6) Victor Goode	1										
Director	0	x						0.	0.	O.	
(7) Deepa Iyer	1				\neg						
Director	0	x						0.	0.	0.	
(8) Christopher Rabb	1										
Director	0	Х						0.	0.	0.	
(9) Rashad Robinson	1										
Director	0	x						0.	0.	0.	
(10) Liliana Segura	1										
Director	0	X						0.	0.	0.	
(11) Deanna Zandt	1										
Director	10	Х						0.	0.	0.	
(12) Jeong Bae	40										
CFO	0			Х				80,123.	0.	12,954.	
(13)											
(14)											

Ranty 13 Section A. Officers, Directors, Trus	1	ney	En			es,	and	Hignest Con	pensated Emp	oloyees (continued)
(A) Name and title	Average hours per week	offi	, unk cer a	Po: check ess pi	erson dırect	e than is bot or/trus	h an tee)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	(list any hours for related organiza tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	relatéd organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(15)		-								
(16)										
(17)										
(18)										
(19)									•	
(20)	 									
(21)										
(22)										
(23)										
(24)										
(25)										
b Sub-total c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)		ļ i			l	•	>	249,123. 0. 249,123.	0. 0.	44,058. 0. 44,058.
2 Total number of individuals (including but not limited to from the organization ► 1	o those li	sted	abov	ve) v	vho i	receiv	ved i	more than \$100,00	0 of reportable comp	pensation
 3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such 4 For any individual listed on line 1a, is the sum of results. 	<i>ındıvıdu</i> eportabl	<i>al</i> le coi	mpe	ensa	tıon	and	othe	er compensation		Yes No 3 X
the organization and related organizations greater such individual						•				4 X
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,' Section B. Independent Contractors	compen comple	satio te Sc	n fre hea	om a lule	any <i>J fo</i>	unre r <i>suc</i>	iate h pe	d organization or erson	ındıvıdual	5 X
Complete this table for your five highest compensation from the organization Report compensation.	ated inde	epend	dent	cor	ntrac year	tors endir	thang w	t received more th	nan \$100,000 of ganization's tax year	·
(A) Name and business addre								(B) Description o		(C) Compensation
		_					\exists			
2 Total number of independent contractors (including bu \$100,000 of compensation from the organization		ted to	tho	se li	sted	abov	ve) v	who received more	than .	
4100,000 of compensation from the organization	U									

	Check if Schedule O contains a response or n	ote to any line	ın this Part VI	<u>II</u>	<u></u> .	
		To	(A) otal revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
2 %	1 a Federated campaigns 1 a					
₹₹	b Membership dues 1 b					
A G	c Fundraising events 1c					
등	d Related organizations . 1 d		į			
S E	e Government grants (contributions)			1		
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above 1 f 791 g Noncash contributions included in lines 1a-1f. \$	1,235.				
통용	g Noncash contributions included in lines 1a-1f. \$	-	701 025	1		ļ
نيا	Busines:		791,235.			
圖	2a Fee Income		329,029.	329,029.		
9	b Sales & Registration		4,478.	4,478.	-	
띯	c c		1,1,0.	2, 1, 0,		
	d					
S	e					
8	f All other program service revenue .					
8	g Total. Add lines 2a-2f	P	333,507.			
	3 Investment income (including dividends, interest	and				
	other similar amounts)	•	36,189.		•	36,189.
	4 Income from investment of tax-exempt bond pro	ceeds. >				
	5 Royalties	•	5,385.			5,385.
		ersonal		1		
Ì	6a Gross rents		1]		
	b Less: rental expenses		j			
	c Rental income or (loss)					
	d Net rental income or (loss)	Other			 	
l	/ a Gross amount from sales of		I	ļ		
1	1 27 302 7 3 1 3 1		1			į
	b Less: cost or other basis and sales expenses 1 _ 578 _ 374		Ì	ļ		
- }	and sales expenses 1,578,374. c Gain or (loss) 3,169.		ĺ	1		i
	d Net gain or (loss)		3,169.			3,169.
1	8 a Gross income from fundraising events		3,103.			3,103.
闄	(not including \$	į.	I	}		1
밁	of contributions reported on line 1c).	İ	1	İ		
2	See Part IV, line 18 a					
OTHER REVENUE	b Less: direct expenses b			1		
	c Net income or (loss) from fundraising events	•				
	9a Gross income from gaming activities. See Part IV, line 19					
l	b Less: direct expenses b					
- 1	c Net income or (loss) from gaming activities.				,	
	10a Gross sales of inventory, less returns and allowances		1	1		
l	<u>-</u>		1	Į		
l	b Less: cost of goods sold b					<u></u>
}	c Net income or (loss) from sales of inventory Miscellaneous Revenue Busines	s Code				
ŀ	11a Miscellaneous		9,329.			0 220
	b MISCELLAMEOUS		3,343.			9,329.
	c					
ļ	d All other revenue					
	e Total. Add lines 11a-11d	•	9,329.	~		
	12 Total revenue. See instructions	<u> </u>	,178,814.	_ 333,507.	0.	54,072.

Part X Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX X **(D)** Fundraising (C) Do not include amounts reported on lines Total expenses Program service Management and 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses generăl expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees. 290,181 129,985 83,657 76,539. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) n 0. Other salaries and wages 1,263,797 1,044,082 81,896 137,819. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions). 9,150 8,470 680 Other employee benefits 221,583 186,083 16,918 18,582. 10 Payroll taxes 124,343 94.401 9,859 20,083. 11 Fees for services (non-employees): a Management **b** Legal 3.112 3,112. c Accounting 11,500 11,500 **d** Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0)Sch 313,573 290,997 12,860 9,716. Advertising and promotion 10,270 8,917 74 1,279. 13 Office expenses 229,420 124,943 84,294 20,183. 14 Information technology 15 Royalties 16 Occupancy 101,452 61,630 24,889 14,933. 17 Travel 136,914 120,503. 8.532 7,879. Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20,064. 15,033 3.744 1,287. 20 Interest 1,654 1,654 Payments to affiliates Depreciation, depletion, and amortization 40,328 18,580 17,103 4,645. 14,133 5,965 6,677 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) a Dues and Memberships 19,849 18,464 866 Staff Development 8.517 5,504 883 130 e All other expenses 25 Total functional expenses. Add lines 1 through 24e 2,819,840 2,133,557 370,198 316,085. 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).

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X. (A) (B) End of year Beginning of year Cash - non-interest-bearing . 177,414 79,417. 2 2 Savings and temporary cash investments 800,330. 86,685. Pledges and grants receivable, net 1,700,000. 3 1,400,000. Accounts receivable, net 185,410. 86,888. Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 Notes and loans receivable, net 93,373 86,476. Inventories for sale or use 8 9 9 Prepaid expenses and deferred charges 43,743 87,821. 10a Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D 10a 501,875 10b **b** Less accumulated depreciation. 202.196. 1,334,008. 1,299,679. 11 Investments - publicly traded securities. 1,615,623. 11 1,118,533. 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 Intangible assets 14 15 Other assets See Part IV, line 11.... 15 29,318 29,318. Total assets. Add lines 1 through 15 (must equal line 34) 5,979,219 16 4,274,817. Accounts payable and accrued expenses 17 17 200,947 181,388 18 Grants payable 18 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D. 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 82,064 69,634. Unsecured notes and loans payable to unrelated third parties 24 3,665 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 25 Total liabilities. Add lines 17 through 25 26 286,676 251,022 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 1,454,215. 27 1,418,819. 28 Temporarily restricted net assets 28 4,238,328. 2,604,976. Permanently restricted net assets 29 Q R Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34.

BAA

32

33

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total net assets or fund balances.

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

4,274,817. Form **990** (2013)

4,023,795.

30

31

32

33

5,692,543.

5,979,219

2 c

3 a

3 b

X

Form **990** (2013)

Х

c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,

If the organization changed either its oversight process or selection process during the tax year, explain

3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit

review, or compilation of its financial statements and selection of an independent accountant?

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

in Schedule O

BAA

Audit Act and OMB Circular A-133?

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

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.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Employer identification number

2013

		Forward								75987			
1 1		Reason for Pub	lic Charity Status	(All organizations	must (comple	ete this	part.	See i	nstruct	ions.		
The o	orga	nization is not a priva	ate foundation becaus	e it is (For lines 1 thro	ugh 11,	check o	nly one	box.)					
1	П	A church, convention	n of churches or asso	ciation of churches des	cribed in	sectio	n 170(b)	(1)(A)(i)).				
2	П	A school described in	n section 170(b)(1)(A)	(ii). (Attach Schedule E	Ξ)								
3	П	A hospital or a coop	erative hospital servic	e organization describe	ed in se	ction 17	0(Б)(1)(A)(iii).					
4	П			in conjunction with a h					O(b)(1)(A Y iii). Ei	nter the hos	ioital's	5
	ш	name, city, and state		,					-1-11-11			F	-
5			ted for the benefit of a	college or university own	ed or op	erated b	y a gove	rnmenta	I unit de	scribed in	section		
6				overnmental unit descri	bed in s	ection	170(b)(1	χΑχν).					
7	X	An organization that n		stantial part of its suppor					n the ge	neral pub	lic described	j	
8		A community trust de	escribed in section 17	70(b)(1)(A)(vi). (Comple	te Part	II)							
9		An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)											
10	П	An organization orga	anized and operated e	xclusively to test for pu	ublic saf	ety. See	section	1 509(a)	(4).				
11		An organization organ more publicly support	ized and operated exclined organizations des	usively for the benefit of, scribed in section 509(a lion and complete lines	to perfor	m the fusection !	inctions (of orca	rry out th	ne purpos 5 09(a)(3)	ses of one or . Check the	box f	that
		a Type i b	o ∏Type II c	Type III - Function	nally inte	egrated		d 🗍 i	Type III	- Non-f	unctionally	ıntegr	ated
е		By checking this box other than foundation section 509(a)(2).	, I certify that the org managers and other that	anization is not controll an one or more publicly s	led direc	ctly or in d organiz	directly ations d	by one escribed	or more in section	disqual on 509(a)	ıfıed persor (1) or	IS	
f		, , , ,	eived a written determii	nation from the IRS that i	s a Туре	I, Type	II or Typ	e III sup	porting (organizat	ion, 🦾		
´ g		Since August 17, 200	06, has the organizati	on accepted any gift o	r contrib	ution fr	om any	of the f	ollowing	persons	s?		
_		-	-				•			•	i	Yes	No
		(i) A person who obelow, the gove	directly or indirectly co erning body of the sup	ontrols, either alone or opported organization?	togethe	r with pe	ersons d	lescribe	d ın (ıı)	and (III)	11 g (i)		-33
		(ii) A family memb	er of a person descri	oed in (i) above?							11 g (ii)		
		(iii) A 35% controlle	ed entity of a person	described in (i) or (ii) a	bove?.						11 g (iii)	\dashv	
h		Provide the following	information about th	e supported organization	on(s)						118(11)		
		(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organiz column (your go	s the ation in) listed in overning ment?	(v) Did yo the organ column (supp	ization in	organiz colur organiz	s the tation in (i) ed in the S ?	(vii) Amount sup		etary
					Yes	No	Yes	No	Yes	No			
				_									
(A)							<u> </u>						
(B)													
			•										
(C)													
(D)													
E)													
,													
Total					<u> </u>				L				
BAA	For	Paperwork Reduction	on Act Notice, see the	Instructions for Form	990 or 9	190-FZ.		9	Schedule	A (Form	990 or 990.	F7\ 20	113

Part II. Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support									
begi	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total			
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants').	2,227,097.	3,558,664.	897,860.	5,208,674.	791,235.	12,683,530.			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					_	0.			
3	The value of services or facilities furnished by a governmental unit to the organization without charge		-				0.			
4	Total. Add lines 1 through 3	2,227,097.	3,558,664.	897,860.	5,208,674.	791,235.	12,683,530.			
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						7,267,178.			
6	Public support. Subtract line 5 from line 4.						5,416,352.			
Sec	tion B. Total Support									
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total			
7	Amounts from line 4 .	2,227,097.	3,558,664.	897,860.	5,208,674.	791,235.	12,683,530.			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	61,307.	52,482.	48,274.	34,429.	41,574.	238,066.			
9	Net income from unrelated business activities, whether or not the business is regularly carried on			•	,	-	0.			
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)		1,690.			9, 329.	11,019.			
11	Total support. Add lines 7 through 10						12,932,615.			
12	Gross receipts from related activ	ities, etc (see ins	tructions)	<u> </u>		12	2,069,135.			
13	First five years. If the Form 990 is organization, check this box and	for the organization	n's first, second, th	ird, fourth, or fifth	tax year as a section	on 501(c)(3)	▶ []			
Sec	tion C. Computation of Pu	blic Support P	ercentage							
14	Public support percentage for 20	•	•	ne 11, column (f))		14	41.88%			
15	Public support percentage from	2012 Schedule A,	, Part II, line 14			15_	42.25%			
16 a	33-1/3% support test — 2013. If and stop here. The organization				nd the line 14 is 3	33-1/3% or more,	check this box			
t	33-1/3% support test — 2012. If and stop here. The organization	the organization o i qualifies as a pu	lid not check a bo blicly supported o	x on line 13 or 16 organization	5a, and line 15 is	33-1/3% or more,	check this box			
17 a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-	and-circumstance:	s' test, check this	box and stop her	r e. Explain in Par	t IV how			
	b 10%-facts-and-circumstances test — 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions									
BAA		Lation did not the								
DAA					Sci	ledule A (Form 9	90 or 990-EZ) 2013			

Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support								
	dar year (or fiscal yr beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
1	Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants.').						,		
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose								
3	Gross receipts from activities that are not an unrelated trade or business under section 513								
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. The value of services or facilities furnished by a								
	governmental unit to the organization without charge					·-·			
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons				-				
Ь	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year								
c	: Add lines 7a and 7b				-				
8	Public support (Subtract line 7c from line 6.)								
Sec	tion B. Total Support								
Calen	dar year (or fiscal yr beginning in) 🟲 📗	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
-	Amounts from line 6 Gross income from interest,								
	dividends, payments received on securities loans, rents, royalties and income from similar sources								
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975								
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on								
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)								
13	Total Support. (Add Ins 9,10c, 11 and 12)								
14	First five years. If the Form 990 organization, check this box and			nd, third, fourth, o	r fifth tax year as	a section 501(c)	(3)		
Sec	tion C. Computation of Pu								
15	Public support percentage for 20	•		ne 13, column (f))		. 15	%		
16	Public support percentage from	2012 Schedule A,	Part III, line 15			16	%		
Sec	tion D. Computation of Inv								
17	, ,		* *		mn (f))	17	%		
18	8 Investment income percentage from 2012 Schedule A, Part III, line 17								
	a 33-1/3% support tests — 2013. If is not more than 33-1/3%, check	this box and sto	p here. The orgar	nization qualifies a	as a publicly supp	orted organizatio	n . 🏲 📗		
t	33-1/3% support tests – 2012. If line 18 is not more than 33-1/3%	f the organization 6, check this box	did not check a b and stop here. Th	oox on line 14 or l le organization qu	ine 19a, and line alifies as a public	16 is more than 3 ly supported orga	33-1/3%, and ►		
20	Private foundation. If the organi	zation did not che	eck a box on line	14, 19a, or 19b, c	heck this box and	see instructions	. ▶□		

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Gest to Poste . . Describe

Department of the Treasury Internal Revenue Service Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.
 See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

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

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

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

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

• ;	Section 501(c)(4), (5), or (6) o	rganizations. Complete Part III.	,	,	
Name	e of organization			Employer identification	stion number
	ce Forward			94-275987	9
إيتاء		rganization is exempt under section			zation.
1		organization's direct and indirect political of	ampaign activities in	Part IV	
2		• • •		\$	>
_	Volunteer hours				
		rganization is exempt under section			
1	•	ise tax incurred by the organization under		▶\$	0.
2	Enter the amount of any exc	cise tax incurred by organization managers	under section 4955	►\$	0.
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No
4:	a Was a correction made?				☐Yes ☐No
ı	b If 'Yes,' describe in Part IV				
Pa	the Complete if the o	rganization is exempt under section	on 501(c) , excep	t section 501(c)(3).	
1	Enter the amount directly ex	pended by the filing organization for section	n 527 exempt function	on activities >\$	
2	Enter the amount of the filing of function activities.	organization's funds contributed to other organ	ızatıons for section 527	7 exempt ►\$	
3	Total exempt function expen line 17b	ditures. Add lines 1 and 2. Enter here and	on Form 1120-POL,	► \$	
4	Did the filing organization file	e Form 1120-POL for this year?	•		. Yes No
5	organization made payments	and employer identification number (EIN) s. For each organization listed, enter the ais received that were promptly and directly delal action committee (PAC). If additional spa	nount haid from the t	filing organization's fund	ds Also enter the
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
(1)					
(2)					
(3)				•	_
(4)					
(5)					
(6)	·				

Schedule C (Fulli 350 of 350-EZ) 201	Race Forwar	'd		94-2759	879 Fage 4
Complete if section 501(the organization h)).	n is exempt under se	ction 501(c)(3) and	filed Form 5768 (ele	ection under
A Check ► I if the filing	g organization belong	gs to an affiliated group (and	list in Part IV each affilia	ited group member's name	 ,
address,	EIN, expenses, and	d share of excess lobbying	expenditures).		
B Check ► ☐ if the filing	ng organization che	cked box A and 'limited co	ntrol' provisions apply.		
(The term	Limits on Lobby 'expenditures' mea	ring Expenditures ins amounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	•	•	, ,,	11,419.	
·		egislative body (direct lobb	ying).		
c Total lobbying expenditu	-	nd 1b)	•	11,419.	0.
d Other exempt purpose e	•			2,808,421.	
e Total exempt purpose e	xpenditures (add lir	nes 1c and 1d)		2,819,840.	<u> </u>
f Lobbying nontaxable and both columns.	nount. Enter the am	ount from the following tal	ole in	290, 992.	
If the amount on line 1e, cold	umn (a) or (b) is:	The lobbying nontaxable	amount is:		
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1,		\$100,000 plus 15% of the excess			
Over \$1,000,000 but not over \$		\$175,000 plus 10% of the excess			
Over \$1,500,000 but not over \$		\$225,000 plus 5% of the excess	over \$1,500,000.		
Over \$17,000,000		\$1,000,000.			· · · · · · · · · · · · · · · · · · ·
g Grassroots nontaxable a		· ·		72,748.	0.
h Subtract line 1g from lin		•		0.	<u> </u>
i Subtract line 1f from line			•	0.	0.
j If there is an amount othe section 4911 tax for this	er than zero on either s year?	line 1h or line 1i, did the org	anization file Form 4720	reporting	Yes No
(Som	e organizations tha	4-Year Averaging Period l it made a section 501(h) el is below. See the instructi	ection do not have to o		
	Lobb	ying Expenditures During	4-Year Averaging Peri	od	
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2 a Lobbying non-taxable amount	294,60	7. 288,423.	309,932.	290,992.	1,183,954.
b Lobbying ceiling amount (150% of line 2a, column (e))	· · · · · · · · · · · · · · · · · · ·				1,775,931.
c Total lobbying expenditures	18,68	6. 101,945.	126,750.	11,419.	258,800.
d Grassroots nontaxable amount	73,65	2. 72,106.	77,483.	72,748.	295,989.
e Grassroots ceiling amount (150% of line 2d, column (e))					443,984.
f Grassroots lobbying expenditures	18,68	6. 61,179.	76,050.	11,419.	167,334.
BAA				Schedule C (Form	990 or 990-EZ) 2013

Schedule C (Form 990 or 990-EZ) 2013 Race Forward 94-2759879 Paralles Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768

wash 'Vac' response to lines to through to below provide in Bort IV a detailed description)	(b)	
each 'Yes' response to lines 1a through 1ı below, provide in Part IV a detailed description the lobbying activity.	Yes	No	Amount	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of.				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?		<u> </u>		
e Publications, or published or broadcast statements?				
Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities? .				
j Total. Add lines 1c through 1i	,			
a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If 'Yes,' enter the amount of any tax incurred under section 4912				
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Complete if the organization is exempt under section 501(c)(4), section 50	(c)(5)	or		
section 501(c)(6).				
			Yes	
Were substantially all (90% or more) dues received nondeductible by members? .	•		1	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	
Did the organization agree to carry over lobbying and political expenditures from the prior year?		_	3	
Did the organization agree to carry over lobbying and political expenditures from the prior year?	I(c)(5). Part II	or s I-A, li	3 ection 501(c	
Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 50 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b)	I(c)(5), Part II	or s I-A, li	3 ection 501(c	
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SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

m990. 이웃국에 의기되었 마당로리하다 Employer identification number

Dag	ce Forward		04-2750970
Rac		or Advised Funds or Other Similar Fu	94-2759879
L., I	Complete if the organization ans	wered 'Yes' to Form 990, Part IV, line	e 6.
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and do are the organization's property, subject to the	nor advisors in writing that the assets held in o organization's exclusive legal control?	donor advised funds Yes No
6	Did the organization inform all grantees, done for charitable purposes and not for the benefit impermissible private benefit?	ors, and donor advisors in writing that grant full t of the donor or donor advisor, or for any other	nds can be used only er purpose conferring Yes No
7-11		wered 'Yes' to Form 990, Part IV, line	÷ 7.
1	Purpose(s) of conservation easements held b		
	Preservation of land for public use (e.g.,		of an historically important land area
	Protection of natural habitat	Preservation	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization	held a qualified conservation contribution in the fo	rm of a conservation easement on the
	last day of the tax year		RECENT HALL AND FOUND AND TOUR
	Total number of conservation easements .		Held at the End of the Tax Year
	Total number of conservation easements. Total acreage restricted by conservation ease	ments .	2 b
	: Number of conservation easements on a cert		2c
		` '	
•	Number of conservation easements included structure listed in the National Register	in (c) acquired aπer 8/17/06, and not on a hist	oric 2 d
3	Number of conservation easements modified, tra tax year ►	nsferred, released, extinguished, or terminated by	the organization during the
4	Number of states where property subject to conse	ervation easement is located ►	
5	Does the organization have a written policy reand enforcement of the conservation easeme	egarding the periodic monitoring, inspection, hints it holds?	andling of violations, Yes No
6	Staff and volunteer hours devoted to monitoring,	inspecting, and enforcing conservation easements	during the year
7	Amount of expenses incurred in monitoring, insperience \$	ecting, and enforcing conservation easements duri	ing the year
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of s	ection 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization report include, if applicable, the text of the footnote conservation easements.	s conservation easements in its revenue and expe to the organization's financial statements that	nse statement, and balance sheet, and describes the organization's accounting for
Par	Organizations Maintaining Colle	ections of Art, Historical Treasures, o wered 'Yes' to Form 990, Part IV, line	r Other Similar Assets.
1 8	If the organization elected, as permitted under art, historical treasures, or other similar assets h in Part XIII, the text of the footnote to its fina	eld for public exhibition, education, or research in	enue statement and balance sheet works of furtherance of public service, provide,
ŀ	If the organization elected, as permitted unde historical treasures, or other similar assets held f following amounts relating to these items:	r SFAS 116 (ASC 958), to report in its revenue or public exhibition, education, or research in furth	e statement and balance sheet works of art, nerance of public service, provide the
	(i) Revenues included in Form 990, Part VIII	, line 1	► \$
	(ii) Assets included in Form 990, Part X		► \$
	If the organization received or held works of art, amounts required to be reported under SFAS	116 (ASC 958) relating to these items	incial gain, provide the following
	Revenues included in Form 990, Part VIII, line	e 1	► \$
1	Assets included in Form 990, Part X		► \$

1 a Beginning of year balance. b Contributions C Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 16,928. 26,635. 119,173. 81,712. 0. 4 Administrative expenses g End of year balance 16,928. 26,635. 119,173. 81,712. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment 100.00 % b Permanent endowment \(\)							
3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection terms (check all that apply): a Public exhibition b Scholarly research c Provide a description of truture generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasuries, or other similar assets to be sold for raise funds rather than to be maintained as part of the organization's collection? 5 During the year, did the organization solicit or receive donations of art, historical treasuries, or other similar assets to be sold for raise funds rather than to be maintained as part of the organization's collection? 5 During the year, did the organization solicit or receive donations of art, historical treasuries, or other similar assets to be sold for raise funds rather than to be maintained as part of the organization's collection? Yes 1 a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1 a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 2 a Dut the organization include an amount on Form 990, Part X, line 21? bif 'Yes,' explain the arrangement in Part XIII Check here if the explantion has been provided in Part XIII 2 a Beginning of year balance 1 a Beginning of year balance 1 a Beginning of year balance 2 a Condition of the organization and part XIII (Sheck here if the explantion has been provided in Part XIII (Sheck here if the organization answered 'Yes' to Form 990, Part XII. 2 a Board designation of facilities and programs and programs. 9,707. 92,538. 0. 1 (a) Current year (b) Pror year (c) Two years back (d) Three years back (e) Form 990, Part XIII. 2 because of the advance o	Page :			Tuesday	of Art Historias		
a Public exhibition b Scholarly research c Other Preservation for future generations 4 Provide a description of the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold for raise funds rather than to be maintained as part of the organization's collection? 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold for raise funds rather than to be maintained as part of the organization answered 'Yes' to Form 990, Fart XIII. 1 a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1 a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 2 a But the organization and general in Part XIII and complete the following table. 5 Beginning balance 6 Additions during the year 9 Ending balance 1 c	mnueu)				·		
b Scholarly research Preservation for future generations A Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets Yes 1 Description Scape Scape Scape Scape Scape Scape 1 In Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included Yes 1 In Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included Yes 1 In Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included Yes 1 In Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included Yes 1 In Is the organization and agent, trustee, custodian, or other intermediary for contributions or other assets not included Yes 1 In Is the organization and agent, trustee, custodian, or other intermediary for contributions or other assets not included Yes 1 In Is the organization and agent, trustee, custodian, or other intermediary for contributions or other assets not included Yes If Calman Yes If Calman If		Dilection	significant use of its c	the following that are a	records, check any or	, accession, and other	items (check all that apply):
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b Permanent endowment			<u></u>	column (a)) held as:	end balance (line 1g,	of the current year	2 Provide the estimated percentage
b Permanent endowment					.00%	ent ► 100	a Board designated or quasi-endowme
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(ii) related organizations b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. See Part XIII	Х	3a(i)	[(i) unrelated organizations
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4 Describe in Part XIII the intended uses of the organization's endowment funds. See Part XIII			Ì	e R?	required on Schedul	rganizations listed as	b If 'Yes' to 3a(ii), are the related o
			XIII				
					······································	Equipment.	Part VI Land, Buildings, and I
Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X	(, line 10.	Part 2	a. See Form 990.), Part IV, line 11	Yes' to Form 990		

F

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land		60,000.		60,000.
b Buildings.		1,386,701.	166,765.	1,219,936.
c Leasehold improvements.				
d Equipment		55,174.	35,431.	19,743.
e Other				
otal. Add lines 1a through 1e (Column (d)	must equal Form 990, Part X, c	olumn (B), line 10(c))	•	1,299,679.

BAA

Schedule **D** (Form 990) 2013

	nvestments - Other Securities.		N/A	••
			, Part IV, line 11b. See Form 990, Part X, line	12.
	tion of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
(1) Financial				
	eld equity interests			
(3) Other _			 	
(A)				
<u>(B)</u>				
(C) (D)				
(E)				
<u>(F)</u> — — — — -				
<u>``_</u>				
(H)				
<u>(l)</u>				
	(b) must equal Form 990, Part X, column (B) line 12.) .			
191011/11	nvestments - Program Related.		N/A , Part IV, line 11c. See Form 990, Part X, line	13.
	(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market va	
(1)	· ·			
(2)	•			
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)	(1)			
(10) Total. <i>(Column</i> ((b) must equal Form 990, Part X, column (B) line 13.)			
(10) Total. <i>(Column</i> (, Part IV, line 11d. See Form 990, Part X, line	15.
(10) Total. (Column (Other Assets. Complete if the organization answered		, Part IV, line 11d. See Form 990, Part X, line (b) Book value	
(10) Total. (Column (Other Assets. Complete if the organization answered	N/A 'Yes' to Form 990		
(10) Total. (Column (Other Assets. Complete if the organization answered	N/A 'Yes' to Form 990		
(10) Total. (Column ((1) (2) (3)	Other Assets. Complete if the organization answered	N/A 'Yes' to Form 990		
(10) Total. (Column ((1) (2) (3) (4)	Other Assets. Complete if the organization answered	N/A 'Yes' to Form 990		
(10) Total. (Column ((1) (2) (3) (4) (5)	Other Assets. Complete if the organization answered	N/A 'Yes' to Form 990		
(10) Total. (Column ((1) (2) (3) (4)	Other Assets. Complete if the organization answered	N/A 'Yes' to Form 990		
(10) Total. (Column ((1) (2) (3) (4) (5) (6) (7) (8)	Other Assets. Complete if the organization answered	N/A 'Yes' to Form 990		
(10) Total. (Column ((1) (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answered	N/A 'Yes' to Form 990		
(10) Total. (Column (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	Other Assets. Complete if the organization answered (a) De	N/A Yes' to Form 990 scription		
(10) Total. (Column ((1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (()))))))))))))))))))))))))))))))))))	Other Assets. Complete if the organization answered (a) December (a) December (b) must equal Form 990, Part X, column (b)	N/A Yes' to Form 990 scription		
(10) Total. (Column (C	Other Assets. Complete if the organization answered (a) December (a) December (b) must equal Form 990, Part X, column (b) Other Liabilities.	N/A 'Yes' to Form 990 scription 3), line 15.)	(b) Book value	
(10) Total. (Column (C	Other Assets. Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (b) Ther Liabilities. Complete if the organization answered 'Yes' to Form	N/A 1 'Yes' to Form 990 scription 3), line 15.)	(b) Book value	
(10) Total. (Column ((1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column ((1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	Other Assets. Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (b) Other Liabilities. Complete if the organization answered 'Yes' to Foliability	N/A 'Yes' to Form 990 scription 3), line 15.)	(b) Book value	
(10) Total. (Column ((1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column ((1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	Other Assets. Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (b) Ther Liabilities. Complete if the organization answered 'Yes' to Form	N/A 1 'Yes' to Form 990 scription 3), line 15.)	(b) Book value	
(10) Total. (Column (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (1) (1) Federal (2) (3)	Other Assets. Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (b) Other Liabilities. Complete if the organization answered 'Yes' to Foliability	N/A 1 'Yes' to Form 990 scription 3), line 15.)	(b) Book value	
(10) Total. (Column ((1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column ((1) Federal (2) (3) (4)	Other Assets. Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (b) Other Liabilities. Complete if the organization answered 'Yes' to Foliability	N/A 1 'Yes' to Form 990 scription 3), line 15.)	(b) Book value	
(10) Total. (Column (1)) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (1)) Federal (2) (3) (4) (5)	Other Assets. Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (b) Other Liabilities. Complete if the organization answered 'Yes' to Foliability	N/A 1 'Yes' to Form 990 scription 3), line 15.)	(b) Book value	
(10) Total. (Column (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (1) (1) (2) (3) (4) (5) (6) (1) Federal (2) (3) (4) (5) (6)	Other Assets. Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (b) Other Liabilities. Complete if the organization answered 'Yes' to Foliability	N/A 1 'Yes' to Form 990 scription 3), line 15.)	(b) Book value	
(10) Total. (Column (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (1) (1) (2) (3) (4) (5) (6) (7) (1) Federal (2) (3) (4) (5) (6) (7)	Other Assets. Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (b) Other Liabilities. Complete if the organization answered 'Yes' to Foliability	N/A 1 'Yes' to Form 990 scription 3), line 15.)	(b) Book value	
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(10) Total. (Column (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) (10) Total. (Column (1) (10) (10) Total. (Column (1) (10) (10) (10) (10) (10) (10) (10) (Other Assets. Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (b) Other Liabilities. Complete if the organization answered 'Yes' to Foliability	N/A 1 'Yes' to Form 990 scription 3), line 15.)	(b) Book value	
(10) Total. (Column (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) (1) Federal (2) (3) (4) (5) (6) (7) (8)	Other Assets. Complete if the organization answered (a) Description (b) must equal Form 990, Part X, column (b) Other Liabilities. Complete if the organization answered 'Yes' to Foliability	N/A 1 'Yes' to Form 990 scription 3), line 15.)	(b) Book value	

Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

X

Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	1,151,092.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments		
b Donated services and use of facilities . 2b		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2 e	-27,722.
3 Subtract line 2e from line 1	3	1,178,814.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b.		
b Other (Describe in Part XIII)		
c Add lines 4a and 4b	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	1,178,814.
Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retur	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1 1	2,819,840.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		2,013,040.
a Donated services and use of facilities 2a		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII)	-	
e Add lines 2a through 2d.	2 e	
3 Subtract line 2e from line 1	3	2 010 040
4 Amounts included on Form 990, Part IX, line 25, but not on line 1	3	2,819,840.
a Investment expenses not included on Form 990, Part VIII, line 7b.		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4 c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	2,819,840.
PariXIII Supplemental Information.	<u></u>	
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b; Par line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any	t V, / additio	nal information
Part V, Line 4 - Intended Uses Of Endowment Fund		
The Board of Directors of the Organization has designated unspent rev	venue:	s_earned_by
its_fiscally_sponsored_projects_for_use_by_those_projects		
Part X - FIN 48 Footnote		·
The Organization has evaluated its current tax positions as of December	oer_3	1, 20 <u>13</u> and
is not aware of any significant uncertain tax positions for which a	reser	ve_would_be_
necessary		.
, 		
BAA	Schedul	e D (Form 990) 2013
		•

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047 **2013** প্ৰায়েশ ভিশ্বিষ্টাহি ভিন্ন কৰিব

Department of the Treasury Internal Revenue Service Name of the organization

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Employer identification number

Race Forward 94-2759879	
Form 990, Part III, Line 1 - Organization Mission	
Race Forward's mission is to build awareness, solutions and leadership for racial	
justice by generating transformative ideas, information and experiences. We define	
raical justice as the systematic fair treatment of people of all races, resulting in	
equitable opportunities and outcomes for all and we work to advance racial justice	
through media, research and leadership development.	
Form 990, Part III, Line 4a - Program Service Accomplishments	
The Media Program at Race Forward is at the forefront of bringing racial justice into	<u>.</u> _
the national coversation for media and politics. Our signature on-line publication,	- -
Colorlines.com, has been instrumental in serving as a vehicle making racial justice	
visible with concrete examples that can be supplied to the national media. In 2013,	
Colorlines had an average of 498,000 unique visitors a month and continued its	
growth	
Colorlines also played a prominent role in advancing news, and being a credible	
source on matters of racial justice. In 2013, Race Forward had an all-time high of	
2000+ media mentions. Some of the most notable media mentions were:	
Better Together and stories about issues affecting the LGBT community had 90 media	
mentions. The study was reprinted by higher education institutions including Rice	
University's Center for the Study of Women, Gender and Sexuality, Division of Equity	
& Inclusion at the University of California Berkeley, and used in the syllabus at the	<u>. </u>
University of Michigan's School of Social Work. The National Council for Research on	
Women featured Better Together: Research Findings on the Relationship between Racial	
Justice and LGBT Communities	

Name of the organization	Employer identification number				
Race Forward	94-2759879				
Form 990, Part III, Line 4a - Program Service Accomplishments					
Rinku Sen's "Building a New Racial Justice Movement" garnered interviews on radio and TV					
including NPR Tell Me More, PIX11 Morning News, KALW San Francisco, Uprising					
Pacifica Radio. Rinku was interviewed and guoted in The Nation magazine and the NY					
Daily News and was interviewed on The Marc Steiner show for her	article "The Racist				
Mind." Rinku was on MSNBC's Melissa Harris Perry show discussing	race and the images of				
black_women_in_the_media. Our_coverage_on_the_March_on_Washingt	on was featured on USA				
Today, Cincinnati.com, and The Root					
~					
Shattered Families had a total of 45 media mentions and was fe	eatured in the LA				
Times, NY Times, KPBS TruthOut, Raw story, Truthdig, and Fox Ne	ews Latino. It was used				
and quoted in the "Help Separated Families Act" introduced and by	U.S. Representatives				
Karen Bass and Lucille Roybal-Allard in California. The report'	s author, Seth				
Freed-Wessler, wrote a cover story for Elle magazine citing the	e report.				
Form 990, Part III, Line 4c - Program Service Accomplishments					
Race Forward's research explores the significance of race and e	thnicity to our				
society's economic and social outcomes. Focusing largerly on s	structural and				
institutional racism instead of personal prejudices, Race Forwa	ard's research seeks				
to reveal the hidden or ignored inequities of public policies a	and practices both				
within and across interconnected sectors such as education, imm	nigration, criminal				
justice, employment and health.	·				
In 2013, Research accomplished the following:					
• Produced a Research Project Protocol template to proactively	generate more				
community and impact-oriented research, and greater organization	onal clarity on				
strategy, audiences and desired impacts on the front-end of maj	or projects in 2014				
and beyond.					

full Board of Directors and a comment period of at least one-week is allowed for

quesitons or comments before filing.

Name of the organization	Employer identification number				
Race Forward_	94-2759879				
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts					
Board members complete conflict of interest policy statements a	nnually. The				
Executive Director and the Board Chair(s) track any potential c	onflicts. When				
potential conflicts are identifed, they are diclosed to the ful	l Board of Directors				
and_the_potentially_conflicted_director_is_excused_from_all_rel	ated conversations.				
Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO, Top	Management				
Independent members of the board, without the Executive Directo	r's participation, do				
a compensation review as part of the E.D.'s yearly performance	evaluation. They				
examine published data on non-profit salaries to determine comp	arable compensation				
levels. The results of the review are then discussed with the E	.D. and a final				
compensation recommendation is approved by the Board.					
Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers &	Key Employees				
The Executive Director sets the compensation for Officers and K	ey Employees subject				
to Board review as part of the yearly budget approval process.					
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available					
Race Forward's form 990 and yearly audited financial statements	are available upon				
request. Requests for all other documents are made on a case-b	y-case basis.				

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Race Forward

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
► Attach to Form 990. ► See separate instructions. Related Organizations and Unrelated Partnerships

► Information about Schedule R (Form 990) and its instructions is at www.lrs.gov/form990.

OMB No 1545-0047

2013

Creation of Additional Control of the Additi

Employer identification number 94-2759879

Part Identification of Disregarded Entities Complete	: =	the organization answered 'Yes' on Form 990, Part IV, line 33.	on Form 990,	Part IV, line 33.			
(a) Name, address, and EIN (if applicable) of disregarded entity	entity Primary activity	ctivity (e) (c) (c) (c) (state or foreign country)		(d) Total income End-c	(e) End-of-year assets DII	(f) Direct controlling entity	ling
(i)							
(2)							
	1						
(3)							
Part II Identification of Related Tax-Exempt Organization one or more related tax-exempt organizations duri	Prganizations Complete if the zations during the tax year.	ns Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had ng the tax year.	answered 'Yes'	on Form 990, Part	IV, line 34 becau	ise it had	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Sec 512(b)(13) controlled entity?	o)(13) entity?
						Yes	No
(1) Equity Action - 900 Alice St. #400 - 0akland, CA 94607 - 20-3745400	Advocacy on racial & economic justice issues	S	501 (c) (4)		Race Forward	×	
ଲ ।							
(3)							
(4)							
BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	ctions for Form 990.		TEEA5001L 06/26/13		Schedule R	Schedule R (Form 990) 2013	2013

Schedule R (Form 990) 2013 Race Forward

(f) Sec 512(b)(13) controlled entity? (k) Percentage ownership ž Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. 34 Yes Identification of Related Organizations Taxable as a Partnership Complete if the organization answered 'Yes' on Form 990, Part IV, line because it had one or more related organizations treated as a partnership during the tax year. (f) General or managing partner? Š (h) Percentage ownership Yes Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) (g) Share of end-of-year assets (h)
Disproportionate
allocations? ŝ Yes (f) Share of total income (g) Share of end-of-year assets (e)
Type of entity
(C corp, S corp, or trust) (f) Share of total income (d)
Direct
controlling
entity (e)
Predominant income (related, unrelated, excluded from tax under sections 512-514) (c) Legal domicile (state or foreign country) (d)
Direct
controlling
entity (b) Primary activity (c) Legal domicile (state or foreign country) (a)
Name, address, and EIN of related organization (b)
Primary activity (a)
Name, address, and EIN of related organization PartIII PartIV ı BAA E ଫ¦ ୟ¦ ئ ଟ୍ର¦ ĮΞ¦

Schedule R (Form 990) 2013

TEEA5002L 06/27/13

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rward	Organizations Complete If the organization answered 'Yes' on Form 990, Part IV, line 34, 35b, or 36.
e Forward	elated Organizations (
Race Forward	ith Related Organizations (
)) 2013 Race Forward	ons With Related Organizations (
orm 990) 2013 Race Forward	sactions With Related Organizations (
e R (Form 990) 2013 Race Forward	🛭 Transactions With Related Organizations (

	f Dividends from related organization(s) g Sale of assets for related organization(s) h Purchase of assets from related organization(s) i Exchange of assets with related organization(s) j Lease of facilities, equipment, or other assets from related organization(s) k Lease of facilities, equipment, or other assets from related organization(s) i Performance of services or membership or fundraising solicitations for related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) o Sharing of paid employees with related organization(s) for expenses q Reimbursement paid to related organization(s) for expenses r Other transfer of cash or property to related organization(s)
ust complete this line, including covered relationships and transaction type (a-s)	r information on who must complete this line, including covered relanization
	or information on who must complete

Race Forward Schedule R (Form 990) 2013 PartVI | Unrelated Organizations Taxable as a Partnership Complete if the organization answered 'Yes' on Form 990, Part IV, line 37

(k) Percentage ownership General or managing partner? 욷 Yes Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships Code V-UBI amount in box 20 of Schedule K-1 Form (1065) (h)
Disproportionate
allocations? ટ્ટ Yes (g) Share of end-of-year assets (f) Share of total income Predominant Are all partners income (related, unre-from tax under from tax under section 512-514) (e)
Are all partners section 501(c)(3) organizations? (c)
Legal domicile
(state or foreign country) (a) (b) Primary activity (b) Primary activity i i 1 1 1 E¦ **&**¦ |@¦ €! ତ୍ୱ ତ୍ରା

Schedule R (Form 990) 2013 TEEA5004L 06/27/13 1111 1 1 1 1 1 1111 BAA

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Schedule R (Form 990) 2013 Race Forward	94-2759879	Page 5
Supplemental Information Provide additional information for responses to questions on Schedule R (s	see instructions).	
<u>·</u>	· · · · · · · · · · · · · · · · · · ·	
Part VII - Supplemental Information		
Schedule R Part V Transactions With Related Organizations		
Equity Action was inactive during fiscal year ended December 3	1. 2013.	
	- -	
	-	
		-

Form **8868** (Rev January 2014)

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Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

Department of the Treasury Internal Revenue Service

► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

If you a	re filing for an Automatic 3-Month Extension, c	omplete only	Part I and check this box		► X
If you a	re filing for an Additional (Not Automatic) 3-Mo	nth Extensio	n, complete only Part II (on page 2 of the	nis form).	
Do not con	nplete Part II unless you have already been gran	ited an auton	natic 3-month extention on a previously	filed Form 8868.	
Electronic of corporation request an e Associated	filing (e-file). You can electronically file Form 88 required to file Form 990-T), or an additional (rextension of time to file any of the forms listed in Pa With Certain Personal Benefit Contracts, which alling of this form, visit www irs gov/efile and clicit	68 if you need not automatic int I or Part II or must be sent	ed a 3-month automatic extension of time) 3-month extension of time. You can ell with the exception of Form 8870, information to the IRS in paper format (see instruc	e to file (6 months ectronically file For n Return for Transfer	m 8868 to
15.00	Automatic 3-Month Extension of Tim	e. Only su	bmit original (no copies needed)		
A corporation	on required to file Form 990-T and requesting a				lv ▶□
	rporations (including 1120-C filers), partnership		nd trusts must use Form 7004 to reques		me to file
	Name of exempt organization or other filer, see instructions		Enter mer sident	Employer identification	
Type or	The state of the s			Linployer identification	number (EIN) or
print	Dago Formand			0.4 0.750070	
	Race Forward Number, street, and room or suite number. If a P.O. box, see	instructions	 	94-2759879 Social security number	78280
File by the due date for		, mode octions		Social security number	(3311)
filing your return See	900 Alice Street #400 City, town or post office, state, and ZIP code For a foreign a	ddroes soo instri	vettone	<u></u>	
instructions		duress, see msur	actions		
	Oakland, CA 94607				
Enter the R	eturn code for the return that this application is	for (file a se	parate application for each return).		01
Application Is For		Return Code	Application Is For		Return Code
Form 990 or	Form 990-EZ	01	Form 990-T (corporation)		07
Form 990-B	iL .	02	Form 1041-A		08
Form 4720 (individual)	03	Form 4720 (other than individual)		09
Form 990-P		04	Form 5227		10
Form 990-T	(section 401(a) or 408(a) trust)	05	Form 6069		11
	(trust other than above)	06	Form 8870		12
Telephor If the or If this is check the exter The exterior in the exterior	ension is for. est an automatic 3-month (6 months for a corporation	ur digit Group check this b on required to ganization re , and endir	te United States, check this box Exemption Number (GEN) and attach a list with the natifile Form 990-T) extension of time trun for the organization named above.	f this is for the who imes and EINs of a	
3a If this nonre	application is for Forms 990-BL, 990-PF, 990-T, fundable credits See instructions	, 4720, or 606	59, enter the tentative tax, less any	3a \$	0.
tax pa	application is for Forms 990-PF, 990-T, 4720, or syments made. Include any prior year overpaym	ent allowed a	s a credit	3 b \$	0.
•	ce due. Subtract line 3b from line 3a 'Include yo S (Electronic Federal Tax Payment System) Se			3 c \$	0.
Caution. If payment in:	you are going to make an electronic funds witho structions.	Irawal (dırect	debit) with this Form 8868, see Form 84	153-EO and Form 8	879-EO for

 If the organization does not have an office or place of business in the United States, check this box 	▶ 🗍
 If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN). 	. If this is for the
whole group, check this box . If it is for part of the group, check this box ▶ and attach a list with the nembers the extension is for.	
I request an additional 3-month extension of time until 11/15 , 20 14. For calendar year 2013 , or other tax year beginning , 20 , and ending If the tax year entered in line 5 is for less than 12 months, check reason: Initial return F Change in accounting period Taxpayer respectfully requests additing the information necessary to file a complete and accurate tax respectively.	inal return ional time to
8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a \$
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8 b \$
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c\$
Cinchus and VaiGastion must be consisted for Dad Hamb	

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is to	rue.
correct, and complete, and that I am authorized to prepare this form	ï

Signature - Adelle Kaneda Title - LPA Da

20 13	Sche	dule O	- Suppleme	ental Informa	ation	Page 3
Client APL07			Race Forwa	rd		94-275987
11/04/14						10:18A
Form 990, Part IX, Other Fees For Se	Line 11g rvices		•			
	•		(A) <u>Total</u>	(B) Program <u>Services</u>	(C) Management <u>& General</u>	(D) Fund- raising
Board Proj Con Other contract Program Contra	services ctors		14,400. 22,576. 254,607.	14,400. 254,607.	12,860.	9,716.
Sponsored Proj	ect consult	Total	21,990. \$ 313,573.	21,990. \$ 290,997.	\$ 12,860.	\$ 9,716.
,				•		

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013	Schedule A	A, Part IV	- Supplen	nental li	nform	ation	F	age
lient APL07		F	Race Forward					2759 87
/04/14								10·18/
Part II, Line 10 - Oth	er Income							
Nature and Source	<u></u>	2013	2012	2011		2010	2009	
Miscellaneous	\$	9,329. 9,329. \$	0.		<u>\$</u> 0. \$	1,690. 1,690.	<u>. </u>	0.
	10tul <u>+</u>	<u> </u>			<u>~</u>	1,050.	Y	
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