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Department of the Treasury Internal Revenue Service

EXTENDED TO FEBRUARY 15, 2017

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.lrs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

<u>A</u>	For t	he 2015 calendar year, or tax year beginning APR 1, 2015 and endin	g MAR 31, 2016
В	Check	C Name of organization	D Employer identification number
	Add	ress EQUAL RIGHTS ADVOCATES, INC.	
	Nar	ne	23-7217027
Ĺ	Initi	al Total Control of the Control of t	
	Fina	1170 MADEEM CONDERM 700	•
	terr ate	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$ 2,711,294.
	Am retu	ended CAN EDANGECOO CA 04103	H(a) Is this a group return
	tion		for subordinates? Yes X No
	per	SAME AS C ABOVE	H(b) Are all subordinates included? Yes No
1	Tax-e	xempt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or	527 If "No," attach a list. (see instructions)
		site: WWW.EQUALRIGHTS.ORG	H(c) Group exemption number ▶
			Year of formation: 1974 M State of legal domicile: CA
ŀ	Part	Summary	
9	լ 1	Briefly describe the organization's mission or most significant activities: TO PROT	
Š		AND EDUCATIONAL ACCESS AND OPPORTUNITIES FO	
Activities & Governance	2	Check this box I if the organization discontinued its operations or disposed or	1)
Š	3 3	Number of voting members of the governing body (Part VI, line 1a)	. 3 19
٩	4	Number of independent voting members of the governing body (Part VI, line 1b)	. 19
٩	g 5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5 14
Š	6	Total number of volunteers (estimate if necessary)	6 15
Š		a Total unrelated business revenue from Part VIII, column (C), line 12	7a 0.
_	+-	Net unrelated business taxable income from Form 990-T, line 34	. 7ь 0.
		Contributions and greats /Dest VIII. Inc. 1b)	Prior Year Current Year 1, 256, 094. 1, 109, 317.
.017, Bevenie	8 9	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)	17,513. 1,045,116.
2017,	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,561. 2,064.
23	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<53,394.> 374,942.
œ	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,222,774. 2,531,439.
•	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0. 0.
2	14	Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.
CANNED MAR	٠	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	773,035. 917,546.
	16	a Professional fundraising fees (Part IX, column (A), line 11e)	0. 0.
		o Total fundraising expenses (Part IX, column (D), line 25) 283,900.	
Z í	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	532,428. 528,743.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,305,463. 1,446,289.
Ü	19	Revenue less expenses Subtract line 18 from line 12	<82,689.> 1,085,150.
Sol	3		Beginning of Current Year End of Year
sets	20	Total assets (Part X, line 16)	1,078,522. 2,234,935.
t As	21	Total liabilities (Part X, line 26)	209,054. 280,318.
Net Assets or	<u> 22</u>	Net assets or fund balances. Subtract line 21 from line 20	869,468. 1,954,617.
P	art I	Signature Block	
Un	der pe	nalties of perjury, I declare that I have examined this return, including accompanying schedules and	statements, and to the best of my knowledge and belief, it is
tru	e, corr	ect, and complete. Declaration of preparer (other than officer) is based on all information of which pr	eparer has any knowledge.
		I want your	2/10/17
Sig	gn	Signature of officer	Date / /
He	ere	NOREEN FARRELL, EXECUTIVE DIRECTOR	
		Type or print name and title	Date Check PTIN
D-1		Print/Type preparer's name Proparer's signature	
Pai		MARY ANN CROPPER ACCOUNTS AND CORPORATE AND CORPORATE ACCOUNTS AND CORPORATE AND CORPO	
	eparer e Only	Firm's name CROPPER ACCOUNTANCY CORPORATION K	111111111111111111111111111111111111111
US	e only	Firm's address 2977 YGNACIO VALLEY RD., #460 WALNUT CREEK, CA 94598	EB 1 5 2017 hone Ro! (925) 932-3860
144	av the	i destitution in the second se	101
_		IRS discuss this return with the preparer shown above? (see instructions)	X Yes No

Forn	1990 (2015) EQUAL RIGHTS ADVOCATES, INC. 23-7217027 Page	e 2
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	TO PROTECT AND EXPAND ECONOMIC AND EDUCATIONAL ACCESS AND	
	OPPORTUNITIES FOR WOMEN AND GIRLS	
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	No
_	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
4a	revenue, if any, for each program service reported. (Code) (Expenses \$ 805, 475 • including grants of \$) (Revenue \$	
40	(Code) (Expenses \$ 805,475. including grants of \$) (Revenue \$) LEGAL REPRESENTATION AND ADVOCACY - ERA REPRESENTED INDIVIDUALS AND	一 ′
	CLASSES OF PEOPLE IN IMPACT LITIGATION. THE ORGANIZATION SPECIALIZED	
	IN CASES RELATING TO SEX DISCRIMINATION, SEXUAL HARRASSMENT, FAMILY AN	D
	MEDICAL LEAVE, DISCRIMINATORY WORKING CONDITIONS, FAMILY	<u> </u>
	RESPONSIBILITIES DISCRIMINATION, AND UNEQUAL TREATMENT AND	
	DISCRIMINATION IN EDUCATIONAL INSTITUTIONS RECEIVING FEDERAL FUNDING.	
	THE ORGANIZATION UTILIZES LITIGATION TO ADVANCE THE RIGHTS OF THE	
	MARGINALIZED WOMEN WORKERS AND STUDENTS PARTICULARLY LOW-INCOME,	
	IMMIGRANTS, AND WOMEN OF COLOR.	
4b	(Code) (Expenses \$)
	MEDIA/EDUCATION/ADVOCACY - ERA EDUCATED THE PUBLIC THROUGH ITS "KNOW	
	YOUR RIGHTS" BROCHURES ON SEXUAL HARRASSMENT AT WORK, SEX	
	DISCRIMINATION, AND FAMILY AND MEDICAL LEAVE AND PREGNANCY DISCRIMINATION. ERA ALSO CONDUCTED "KNOW YOUR RIGHTS" TRAININGS ON	
	DISCRIMINATION. ERA ALSO CONDUCTED "KNOW YOUR RIGHTS" TRAININGS ON EMPLOYMENT-RELATED ISSUES, SUCH AS SEXUAL HARRASSMENT. IN ADDITION,	
	ERA DISTRIBUTED INFORMATION ABOUT LEGAL AND ECONOMIC ISSUES AFFECTING	
	WOMEN VIA PRESENTATIONS, ITS WEBSITE, E-LETTERS, AND GENERAL BROCHURES	
	AND ACTS AS A RESOURCE FOR THE MEDIA.	
	·	
4c	(Code) (Expenses \$)
	MEDIA/EDUCATION/ADVOCACY - ERA PROVIDED FREE LEGAL INFORMATION AND	
	ADVICE TO CALLERS FROM THROUGHOUT THE UNITED STATES CONCERNING ISSUES	
	SUCH AS FAMILY LEAVE, SEXUAL HARRASSMENT, AND DISCRIMINATION IN THE	
	WORKPLACE AND IN SCHOOLS THROUGH THE ORGANIZATION'S TOLL FREE ADVICE	
	AND COUNSELING LINE. IN ADDITION, THE ORGANIZATION PROVIDED CALLERS	
	WITH REFERRALS TO ATTORNEYS AND OTHER ADVOCACY ORGANIZATIONS. THE	
	ORGANIZATION'S SERVICES WERE PROVIDED IN MULTIPLE LANGUAGES THROUGH TH	<u>E</u>
	USE OF BILINGUAL STAFF AND A TELEPHONE TRANSLATION SERVICE.	
		—
4d	Other program services (Describe in Schedule O)	
	(Expenses \$ 50,736 • including grants of \$) (Revenue \$)	
4e	Total program service expenses ▶ 957,683.	_
	Form 990 (20)15)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	<u>X</u>	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2	X	
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		<u> </u>
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_	_X_	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
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_		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		7.7
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
_	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?		v	
40	If "Yes," complete Schedule D, Part IV	9	X	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	40		.
44	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
a	Part VI	11a	х	
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	- 14		
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		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	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			ŀ
	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	12b	_	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	ļ .	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,		1	
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	1		
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </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		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			l
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	-	<u> </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	<u> </u>	<u>X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19	000	<u>X</u>
		Form	990	(2015)

Form 990 (2015) ' EQUAL RIGHTS ADVOC Part IV Checklist of Required Schedules (continued)

			Yes	No
2 0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	į		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X_
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
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 "Yes,"			
	complete Schedule L, Part II	26		X
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	<u> </u>	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			ļ
	instructions for applicable filing thresholds, conditions, and exceptions):			1
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
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	ļ	X
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	1		
	contributions? If "Yes," complete Schedule M	30	<u> </u>	X
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			4,
	Schedule N, Part II	32	ļ	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		1	-
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	_33_	 	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			17
	Part V, line 1	34	┼	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	 	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	 	-
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			-
	If "Yes," complete Schedule R, Part V, line 2	36	-	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		1	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	_37_	-	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	1		
	Note. All Form 990 filers are required to complete Schedule O	38_	<u> X</u>	1
		Forn	טאָפ ו	(2015

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	Check if Schedule O contains a response or note to any line in this Part V				
	Should Conduct Contains a response of note to any line in this hart v			Va- T	No No
12	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	18	+	Yes	NO
b		0		Ì	
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable game				
٠	(gambling) winnings to prize winners?		lc	\mathbf{x}	
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	<u> </u>		-	
Za	filed for the calendar year ending with or within the year covered by this return	14	Ì		
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	x	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	F			
За		ء ا	3a	ì	X
-	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,		-	$\neg \neg$	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	1	ta		X
b	If "Yes," enter the name of the foreign country:		_	$\neg \neg$	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAI	A).			
5a			5a		<u>X</u>
b			5b		X
С	tema hada a a a a a a a a a a a a a a a a a		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	1 solicit			
	any contributions that were not tax deductible as charitable contributions?	1	3а		<u>X</u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		- 1	ĺ	
	were not tax deductible?	_6	6b		
7	Organizations that may receive deductible contributions under section 170(c).	1	- (ľ	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided	to the payor? 7	7a		<u>_X</u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	İ	- 1	ĺ	
	to file Form 8282?	<u> -7</u>	7c		<u>X</u>
d	If "Yes," indicate the number of Forms 8282 filed during the year		-	ł	
е	3	-	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<u> </u>	7f		<u> </u>
9			7g	}	
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Fori	ווייטיאפטר וויי	7h	+	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		_	Ì	İ
0	sponsoring organization have excess business holdings at any time during the year?	-	8		_
9	Sponsoring organizations maintaining donor advised funds.] ,	00		
a b		· —	9a 9b		
10	Section 501(c)(7) organizations. Enter:		30	$\neg \neg$	
а				1	
b					
11	Section 501(c)(12) organizations, Enter.			}	l
а			İ		1
	Gross income from other sources (Do not net amounts due or paid to other sources against			1	1
	amounts due or received from them.)		i	-	ĺ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	1	12a	l	ĺ
	and the second s				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		[_ [İ
а	and the second of the second o	1	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.	Γ	\neg		
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1		-	
	organization is licensed to issue qualified health plans		1		
С	Enter the amount of reserves on hand				
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		14b		
		!	Form	990	(2015)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to line 6a, 6b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.								
	Check if Schedule O contains a response or note to any line in this Part VI		·-·	X					
Sec	tion A. Governing Body and Management								
			Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 19	-							
	If there are material differences in voting rights among members of the governing body, or if the governing								
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.	İ							
	Enter the number of voting members included in line 1a, above, who are independent 19								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	_		x					
^	officer, director, trustee, or key employee?	2_							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	3		x					
,	of officers, directors, or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?								
4 5	Did the organization hake any significant changes to its governing documents since the prior roth 950 was filed. Did the organization become aware during the year of a significant diversion of the organization's assets?	5	_	X					
6	Did the organization become aware during the year of a significant diversion of the organization's assets:	6		X					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or								
, ,	more members of the governing body?	7a		х					
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or								
_	persons other than the governing body?	7b		Х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
	The governing body?	8a	X						
b	Each committee with authority to act on behalf of the governing body?	8b_	X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the								
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9_		X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)								
			Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			Ì					
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	-					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		Х						
40	In Schedule O how this was done	12c	X	-					
13	Did the organization have a written whistleblower policy?	13	X						
14 15	Did the organization have a written document retention and destruction policy?	14		 					
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
_	The organization's CEO, Executive Director, or top management official	15a	x						
a h	Other officers or key employees of the organization	15b	X						
D	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		<u></u>						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a								
- 4	taxable entity during the year?	16a]	х					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation								
_	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's		ļ						
	exempt status with respect to such arrangements?	16b							
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ▶CA								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and 990-T (Section 501(c)(3)s only) are	avaılat	le						
	for public inspection. Indicate how you made these available. Check all that apply.								
	Own website Another's website X Upon request Other (explain in Schedule O)								
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cial						
	statements available to the public during the tax year.								
20	State the name, address, and telephone number of the person who possesses the organization's books and records 🕨								
	NOREEN FARRELL - (415) 575-2398								
	1170 MARKET STREET, SUITE 700, SAN FRANCISCO, CA 94102								
		Fore	എവ	(2015					

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

(A)	(B)	d organization compensat						(D)	(E)	(F)
Name and Title	Average	l (do n		Position (do not check more than one				Reportable	Reportable	Estimated
	hours per	box,	unles	ss per	rson	is boti or/trus	n an	compensation	compensation	amount of
	week	-			recic	77,103		from the	from related	other compensation
	(list any hours for	direct						organization	organizations (W-2/1099-MISC)	from the
	related	ee or	stee			usate		(W-2/1099-MISC)	(** 2, ,00000,	organization
	organizations	Individual trustee or director	nstitutional trustee		Key employee	Highest compensated employee				and related
	below	Mdua	tutio	a 5	empt	loyee	횰			organizations
	line)	ig.	Inst	Officer	Key	E E	Former			
(1) GHADA SALIBA MALOUF	3.00	ļ								
BOARD CHAIR		X		X		_		0.	0.	0.
(2) GAY CROSTWAIT GRUNFELD	2.00	l				1		_		•
VICE CHAIR		X		X		—		0.	0.	0.
(3) MONICA IP	2.00		'					1		
TREASURER		X	_	Х	<u> </u>	-		0.	0.	0.
(4) ROBERTA STEELE	2.00			 '	l					
SECRETARY		X	_	X		┾	_	0.	0.	0.
(5) CHRISTINE BRIGAGLIANO	2.00									_
BOARD MEMBER		X	├-	-	-	┼	<u> </u>	0.	0.	0.
(6) SIMONA A. FARISE	2.00	٠,		Ì	ĺ	İ	ĺ	0.	0.	1
BOARD MEMBER	2 00	X	-		├—	+	-		<u> </u>	0.
(7) EMILY KATZ KISHAWI	2.00	X						0.	0.	0.
BOARD MEMBER	2.00	┢		-	-	╁		<u></u>		
(8) JAMES STURDEVANT	2.00	X						0.	0.	0.
BOARD MEMBER (9) JENNIFER LIU	2.00	^	t		l	1				
BOARD MEMBER	2.00	X			l			0.	0.	_ 0.
(10) JOY A. KRUSE	2.00	-		\vdash	t			<u> </u>		<u>-</u> -
BOARD MEMBER	2.00	X						0.	0.	0.
(11) MIKA MAYER	2.00		†			1				
BOARD MEMBER		\mathbf{x}			l			0.	0.	0.
(12) NISHA NANDA	2.00		┢							1
BOARD MEMBER		x			l			0.	0.	0.
(13) KRISTEN PALUMBO	2.00						İ			
BOARD MEMBER		X				ļ		0.	_0.	0.
(14) LUCIA CORAL PENA	2.00					T				<u> </u>
BOARD MEMBER		X						0.	0.	0.
(15) KIMBERLY VAN VOORHIS	2.00									
BOARD MEMBER		X		<u> </u>	\perp		<u> </u>	0.	0.	0.
(16) BARBARA S. BRYANT	2.00	_								
BOARD MEMBER		X	↓_	<u> </u>	<u> </u>	ــــــــــــــــــــــــــــــــــــــ	<u> </u>	0.	0.	0.
(17) DRUCILLA S. RAMEY	2.00	1								
BOARD MEMBER		<u>X</u>	L			\perp	<u></u>	0.	. 0.	Form 990 (2015

532007 12-16-15

Form **990** (2015)

Part VII Section A. Officers, Directors, 1		ploy	ees,			ghe	st C			$\neg \top$		<u></u>	
(A) Name and title	(B) (C) Average Position			1		(D)	(E) Reportable		Ect	(F) ımate	ч		
Name and title	hours per					than		Reportable Reportable compensation compensation				ount o	
	week		cer and a director/tru					from	from related		C	other	
	(list any §				the	organizations			ensa				
	hours for related	5 o	tee			sated	j	organization (W-2/1099-MISC)	(W-2/1099-MISC	ilSC) from the organization			
	organizations	truste	al trus		ae Xe	E E	}	(** 27 1033 141100)		-	_	relate	
	below	Individual trustee or director	Institutional trustee	 jaj	Key employee	Highest compensated employee	賣			j	orga	nizatı	ons
	line)	亨	Inst	Officer	ě.	물등	Ē			\rightarrow			
(18) GILDA TURITZ	2.00]			ļ	}							^
BOARD MEMBER	2.00	X		<u> </u>				0.		0.			0.
(19) CARL WHITAKER	2.00	X						0.		0.			0.
BOARD MEMBER	38.00	^	-	├	-	+	┢			'			
(20) NOREEN FARRELL EXECUTIVE DIRECTOR	38.00	1		x	l		1	133,428.	(0.			0.
EARCOITVE DIRECTOR		┢	\vdash	1		 		133,420.	·	' †			<u> </u>
		1			Ì					İ			
		1				1						 -	
		<u> </u>				<u> </u>							
				}	Γ		Γ						
		<u> </u>		ļ	<u> </u>	<u> </u>	_				_		
]	1]	ļ			}			
		├-	ļ		-	+-	<u> </u>	ļ			_		
	<u> </u>	-								Ì			
		├-		_	-	┼-	├-	 		\dashv			
		1		l			i			l			
1b Sub-total			<u> </u>	<u> </u>	<u> </u>			133,428.		0.			0.
c Total from continuation sheets to Pa	rt VII. Section A							0.		0.			0.
d_ Total (add lines 1b and 1c)	11 VIII, 000 II OII A						•	133,428.		0.			0.
2 Total number of individuals (including b	out not limited to th	nose	liste	ed a	bov	e) w	ho r		0,000 of reportable				
compensation from the organization	>												1
										_		Yes	No
3 Did the organization list any former off			e, ke	ey e	mpl	oyee	, or	highest compensated e	mployee on	- }			
line 1a? If "Yes," complete Schedule J										- -	3		X
4 For any individual listed on line 1a, is the			-						the organization				3,-
and related organizations greater than			-						: d a1 f a a a a a	-	4		<u> X</u>
5 Did any person listed on line 1a receive	=						rela	ted organization or indiv	idual for services		5		x
rendered to the organization? If "Yes," Section B. Independent Contractors	complete Screau	e J	tor s	ucn	per	son					<u> 5 1</u>		
Complete this table for your five highes	st compensated in	den	ende	ent d	cont	tract	ors	that received more than	\$100,000 of comp	ensa	ation f	rom	
the organization. Report compensation	•	_											
(A)								(B)			(C	;)	
Name and busin	ness address	N	ON	E_				Description of	services	Cc	ompe	nsatio	ก
	 												
								 					
							-						
2 Total number of independent contractor	ors (including but i	not I	ımıte	ed to	o the	ose I	ste	d above) who received r	nore than				
\$100,000 of compensation from the or						0							
												000	

Form 990 (2015) EQUAL R
Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII								
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
nts	1 a	Federated campaigns	1a					
ar our	b	Membership dues	1b					
S, G	С	Fundraising events	1c					
ar /		Related organizations	1d					
S, C		Government grants (contribute	. —					
Sign		All other contributions, gifts, grant	· —					
but		similar amounts not included above		109,317.				
E O	a	Noncash contributions included in lines		/				
Contributions, Gifts, Grants and Other Similar Amounts	_	Total. Add lines 1a-1f		<u> </u>	1,109,317.			
				Business Code	-			
စ္ပ	2 a	LEGAL FEE AWARD	S		1,021,582.			
ه چَ	b	FEES FOR SERVIC	ES	541100	20,177.			
SE	С	REIMBURSEMENTS	AND OTH	541100	3,357.	3,357.		
Program Service Revenue	d	·						
ğ.	е						 	
- □	f	All other program service reve	nue	541100				
	g	Total. Add lines 2a-2f			1,045,116.			
	3	Investment income (including	dıvıdends, ıntere	est, and				
		other similar amounts)		>	2,064.	2,064.		
	4	Income from investment of tax	k-exempt bond p	roceeds >				<u> </u>
	5	Royatties		<u> </u>				
			(i) Real	(ii) Personal				
	6 a	Gross rents	11,282.					
	b	Less rental expenses	0.			ļ		
	С	Rental income or (loss)	11,282.					
	d	Net rental income or (loss)		▶	11,282.	11,282.		
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory				Ì		
	b	Less: cost or other basis						
		and sales expenses			4			
	С	Gain or (loss)		L	1			ŀ
	d	• , ,	•		-			
e l	8 a	Gross income from fundraising	-					
		including \$		ļ				
Other Reven		contributions reported on line	•	F 4 6 6 6 0				
Ĕ		Part IV, line 18		546,662.	4			
₹		Less, direct expenses		179,855.	266 007			266 007
		Net income or (loss) from fund	_		366,807.			366,807.
	9 a	Gross income from gaming ac	tivities. See					
		Part IV, line 19	a		-			
		Less direct expenses	b		-			
		Net income or (loss) from gam	-					
	то а	Gross sales of inventory, less						
	_	and allowances	а		_			
		Less. cost of goods sold	. b		-			
ł	<u>c</u>	Net income or (loss) from sale Miscellaneous Revenu		Business Code		 		
ŀ	11 ^	REALIZED AND UN		541100	<3,147.	> <3,147.	.	
	ii a			241100	\ <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>	\ \J \ 1 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
	C	·			-			
	d	A.II			 			
		Total. Add lines 11a-11d			<3,147			
	12	Total revenue See instructions.			2.531 439	1,055,315.	0	. 366,807.
	12	TOTAL ICACING OCCURSUOUS.			<u>, </u>	, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		Form 990 (2015)

Part IX | Statement of Functional Expenses

	Check if Schedule O contains a respons		this Part IX		
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				-
	Benefits paid to or for members				
	Compensation of current officers, directors,				
	trustees, and key employees				
	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	755,296.	490,640.	102,224.	162,432.
	Other salaries and wages Pension plan accruals and contributions (include	133,490.	470,040.	104,444	104,434.
	section 401(k) and 403(b) employer contributions)	1		Ì	
	Other employee benefits	99,748.	63,029.	10,753.	25,966.
	Payroll taxes	62,502.	40,690.	8,178.	13,634.
	Fees for services (non-employees)	02,302.	±0,050.	0,170	13,034.
	Management				
	Legal				
	Accounting	27,833.		27,833.	
	Lobbying	2,,0331		2.70000	
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other (If line 11g amount exceeds 10% of line 25,				
_	column (A) amount, list line 11g expenses on Sch O.)	129,764.	118,974.	2,296.	8,494.
	Advertising and promotion	2,087.	1,429.	343.	8,494. 315.
13	Office expenses	19,518.	9,387.	3,310.	6,821.
14	Information technology				
15	Royalties				
16	Occupancy	162,152.	103,482.	21,924.	36,746.
17	Travel	28,131.	21,661.	1,923.	4,547.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	10,075.	4,593.	3,897.	1,585
	Insurance	14,587.	9,145.	2,011.	3,431.
	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.)				
	PRINTING AND PRODUCTION	31,910.	20,671.	1,262.	9,977
	EQUIPMENT RENTAL AND MA	26,388.	19,108.	2,793.	4,487
	TELEPHONE AND TELECOMMU	23,763.	20,145.	1,344.	2,274
	PUBLICATIONS, DUES, AND	17,069.	14,809.	935.	1,325
	All other expenses	35,466.	19,920.	13,680.	1,866
	Total functional expenses. Add lines 1 through 24e	1,446,289.	957,683.	204,706.	283,900
	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 X if following SOP 98-2 (ASC 958-720)		_		

t X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X		-	
	-	(A) Beginning of year		(B) End of year
1	Cash · non-interest-bearing	585,344.	1	499,494
2	Savings and temporary cash investments	75,720.	2	945,316
3	Pledges and grants receivable, net	321,731.	3	641,924
4	Accounts receivable, net	30,540.	4	10,309
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		_5_	
6	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 instr). Complete Part II of Sch L		6	
7	Notes and loans receivable, net		7_	
8	Inventories for sale or use		8_	
9	Prepaid expenses and deferred charges	25,764.	9	51,988
10a	Land, buildings, and equipment cost or other			
	basis Complete Part VI of Schedule D 10a 63,802.			
b	Less accumulated depreciation 10b 56,440.	12,938.	10c	7,362 52,057
11	Investments · publicly traded securities		11	<u>52,057</u>
12	Investments - other securities See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets .		14	
15	Other assets See Part IV, line 11		15	26,485
16	Total assets. Add lines 1 through 15 (must equal line 34)			2,234,935
17	Accounts payable and accrued expenses	76,672.	17	72,348
	, -	50 540	18	400 004
	-	78,743.		128,321
	·			
	_ · · · ·		21	
22				
	•			
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	· · · · · · · · · · · · · · · · · · ·		_24	
25				
	, ,	E2 620	05	70 640
ne .	· • •			79,649 280,318
20		203,034.	20	200,310
	. "			
27		375 717	27	1,427,616
	·			527,010
	· · · · · · · · · · · · · · · · · · ·	493,131.		527,003
29			29	
30			20	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
J 1		-	32	
32	Retained earnings, endowment, accumulated income, or other funds			
32 33	Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances	869,468.	33	1,954,617
_	1 2 3 4 5 6 7 8 9 10a b 11 12 13 14 15 16	Check if Schedule O contains a response or note to any line in this Part X Cash - non-interest-bearing	Check if Schedule O contains a response or note to any line in this Part X Cash - non-interest-bearing 5.85 , 3.44 .	Check if Schedule O contains a response or note to any line in this Part X Cash - non-interest-bearing 585, 344, 1 75, 720, 2 2 3 2 3 3 2 1 7 7 7 7 7 7 7 7 7

Form **990** (2015)

Form	1990 (2015) EQUAL RIGHTS ADVOCATES, INC.	23-721	7027	Pac	ge 12
	rt XI Reconciliation of Net Assets		<u> </u>		
	Check if Schedule O contains a response or note to any line in this Part XI	_			
1	Total revenue (must equal Part VIII, column (A), line 12)	1 _	2,533	L,4	39.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,440		
3	Revenue less expenses. Subtract line 2 from line 1	3	1,08		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			68.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7	_		
8	Prior period adjustments	8	_		
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	1,95	4,6	18.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other		1 1		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both.		1 1		
	Separate basis Consolidated basis Both consolidated and separate basis		1 1		
b	Were the organization's financial statements audited by an independent accountant?		2b	_X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,	1 1	!	
	consolidated basis, or both.		1 1		
	X Separate basis Consolidated basis Both consolidated and separate basis		1 1		
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ie audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	<u>X</u>	
	if the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ııred audıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		36		

Form **990** (2015)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

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

▶ 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

Open to Public

Employer identification number Name of the organization RIGHTS ADVOCATES, 23-7217027 INC. Part I Reason for Public Charity Status (All organizations must complete this part) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 An 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 An organization organized and operated exclusively to test for public safety See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. J Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s) (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of listed in your organization (described on lines 1-9 support (see other support (see governing document? above (see instructions)) instructions) instructions)

LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 532021 09-23-15

Schedule A (Form 990 or 990 EZ) 2015 EQUAL RIGHTS ADVOCATES, INC. 23-7217027 Page 2

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

_	talls to qualify under the tests	ilsted below, plea	se complete Part				
Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not			į			
	include any "unusual grants.")	816,186.	800,458.	1428236.	1256094.	1109317.	5410291.
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge				<u></u>		
4	Total. Add lines 1 through 3	816,186.	800,458.	1428236.	1256094.	1109317.	5410291.
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,				Ì		
	column (f)						371,368.
	Public support. Subtract line 5 from line 4						5038923.
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4	816,186.	800,458.	1428236.	1256094.	1109317.	5410291.
8	Gross income from interest,					1	
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	7,519.	10,681.	25,634.	10,171.	10,199.	64,204.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on			ļ			
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						5474495.
12	Gross receipts from related activities,	etc. (see instruction	ons)		•	12 1	,646,475.
13	First five years. If the Form 990 is for	r the organization's	s first, second, thii	d, fourth, or fifth t	ax year as a sectio	on 501(c)(3)	
	organization, check this box and stor	here				•	
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2015 (line 6, column (f) d	ivided by line 11,	column (f))		14	92.04 %
15	Public support percentage from 2014	Schedule A, Part	II, line 14			15	98.68 %
	33 1/3% support test - 2015. If the			n line 13, and line	14 is 33 1/3% or r	nore, check this b	ox and
	stop here. The organization qualifies	as a publicly supp	orted organization	า			$\triangleright [X]$
b	33 1/3% support test - 2014. If the	organization did no	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/3%	6 or more, check t	his box
	and stop here. The organization qual	lifies as a publicly s	supported organiz	ation			ightharpoonup
17a	10% -facts-and-circumstances tes				e 13, 16a, or 16b.	and line 14 is 10%	or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"			-			▶□
h	10% -facts-and-circumstances tes	-			=	17a, and line 15 is	10% or
~	more, and if the organization meets the	-					
	organization meets the "facts-and-cire				•		- ▶□
18	Private foundation. If the organization		-	•			
<u></u>		sig not onoun a	200 011 1110 10, 10	<u>, 100, 170, 01 17</u>		edule A (Form 90)	

(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 com	plete Part II.)	-			
Section A. Public Support	-	1	Τ	<u></u>	,	
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014_	(e) 2015	(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 per- formed, 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 bus-						
iness under section 513					. =	
4 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on tines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6) Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6		15/	(0) = 0.10	(4)-5:	1 19/ = 0 10	(17 : 5 : 5 : 5 : 5 : 5 : 5 : 5 : 5 : 5 :
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	, [
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support (Add lines 9, 10c, 11, and 12)			<u></u>	<u> </u>		L
14 First five years. If the Form 990 is for	or the organization	's first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3) organi;	zation,
check this box and stop here	lie Cupped De					P
Section C. Computation of Pub					TT	
15 Public support percentage for 2015		-	column (t))		15	
16 Public support percentage from 201					16	%
Section D. Computation of Inve			·		122	
17 Investment income percentage for 2	•	• • •	ne 13, column (f))		17	%
18 Investment income percentage from	•	•	on line 4.4 · · · · ·	. 45	18	<u>%</u>
19a 33 1/3% support tests - 2015. If th	_					ı / is not
more than 33 1/3%, check this box b 33 1/3% support tests - 2014. If the			_			▶ ∟_ land
line 18 is not more than 33 1/3%, ch						
20 Private foundation. If the organization		-				▶ □

Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A and D and complete Part V)

	Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)			
<u>Sec</u>	tion A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No" describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
_	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported		i i	
	organization was described in section 509(a)(1) or (2).	2	1	
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	-		
-	(b) and (c) below	3a		
h	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and	Ja	-	
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination.	3b		
_	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)	35		
·	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
40	· · · · · · · · · · · · · · · · · · ·			
44	Was any supported organization not organized in the United States ("foreign supported organization")? If	4-		
	"Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
D	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations	4b	-	
C	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes.	4c	ļ	
ъa	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			
	(iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	<u>5a</u>		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		
_	Substitutions only. Was the substitution the result of an event beyond the organization's control?	<u>5c</u>		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class	İ		
	benefited by one or more of its supported organizations, or (III) other supporting organizations that also			
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			
	Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with		ļ	
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?			
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	88	ļ	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described			
	ın section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a	<u> </u>	
þ	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			1
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b	Щ.	<u> </u>
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		L
I0a	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated		1	l
	supporting organizations)? If "Yes," answer 10b below	10a		<u> </u>
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			

determine whether the organization had excess business holdings.)

Sche	edule A (Form 990 or 990-EZ) 2015 EQUAL RIGHTS ADVOCATES,	INC.	·	23-7217027 Page 6
Pa				
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust or	Nov. 20, 1970. See in:	structions. All
	other Type III non-functionally integrated supporting organizations must co	mplete S	ections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
_1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3_	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7_	Other expenses (see instructions)	7		
8_	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):		·	
<u>a</u>	Average monthly value of securities	1a		
<u>_b</u>	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
<u>d</u>	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3	<u></u>	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
<u>_6</u> _	Multiply line 5 by .035	6		
<u>_7</u> _	Recoveries of prior-year distributions	7		
8_	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3_	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	lv-integra	ted Type III supporting	organization (see

Schedule A (Form 990 or 990-EZ) 2015

instructions)

23-7217027 Page 7 Schedule A (Form 990 or 990-EZ) 2015 EQUAL RIGHTS ADVOCATES, INC. Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required) 6 Other distributions (describe in Part VI). See instructions Total annual distributions. Add lines 1 through 6 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions Distributable amount for 2015 from Section C, line 6 10 Line 8 amount divided by Line 9 amount (i) (iii) Underdistributions Distributable **Excess Distributions** Amount for 2015 Section E - Distribution Allocations (see instructions) Pre-2015 Distributable amount for 2015 from Section C, line 6 2 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions) Excess distributions carryover, if any, to 2015: b C d From 2013 e From 2014 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2015 distributable amount i Carryover from 2010 not applied (see instructions) j Remainder Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2015 from Section D. line 7 a Applied to underdistributions of prior years b Applied to 2015 distributable amount c Remainder. Subtract lines 4a and 4b from 4. Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions) 6 Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions) Excess distributions carryover to 2016. Add lines 31 and 4c Breakdown of line 7: b c Excess from 2013 d Excess from 2014

Schedule A (Form 990 or 990-EZ) 2015

e Excess from 2015

Schedule A	(Form 990 or 990-EZ	2015 EQUAL	RIGHTS	ADVOCAT	ES, INC.		<u>23-7217027</u>	Page 8
Part VI	Supplemental Part IV, Section A, I line 1; Part IV, Sect	Information. Plines 1, 2, 3b, 3c, 4 ion D, lines 2 and 3	Provide the exp lb, 4c, 5a, 6, 9a 3; Part IV, Sect	lanations require a, 9b, 9c, 11a, 1 ion E, lines 1c, 2	ed by Part II, line 1 1b, and 11c; Part 2a, 2b, 3a and 3b;	IV, Section B, lines Part V, line 1; Part	or 17b; Part III, line 12, s 1 and 2, Part IV, Section V, Section B, line 1e; Part	C,
	Section D, lines 5, 6 (See instructions)	6, and 8, and Part	V, Section E, III	nes 2, 5, and 6	Also complete this	s part for any addit	ional information.	_
							-	
							-	
		*						
								
								
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						<u> </u>		
					<u> </u>			

SCHEDULE'C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public

Inspection

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

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

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

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

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

	,,				
	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III			
Nan	ne of organization			Emp	loyer identification number
	EQUAL F	RIGHTS ADVOCATES			23-7217027
Pa	art I-A Complete if the or	ganization is exempt un	der section 501(c)	or is a section 527 of	organization.
			·		
1	Provide a description of the organi	zation's direct and indirect politi	cal campaign activities	ın Part IV	
	Political expenditures				S
	Volunteer hours				
Ū	Volumeer floars				
Pa	art I-B Complete if the or	ganization is exempt un	der section 501(c)	(3).	
1	Enter the amount of any excise tax			> \$	 B
	_				\$
	If the organization incurred a section			• •	Yes No
	Was a correction made?		, ,	•	Yes No
	o If "Yes," describe in Part IV.	•			
		ganization is exempt un	der section 501(c)	, except section 501	(c)(3).
1	Enter the amount directly expende	d by the filing organization for s	ection 527 exempt fund	ction activities	B
	Enter the amount of the filing organ				
	exempt function activities			▶ 9	B
3	Total exempt function expenditure	s. Add lines 1 and 2. Enter here	and on Form 1120-POL	- 1	
	line 17b			-, ▶ \$	6
4	Did the filing organization file Form	1120-POL for this year?		,	Yes No
5	Enter the names, addresses and e	•	FIN) of all section 527 pe	olitical organizations to whi	
	made payments For each organiza	· ·	· · ·		
	contributions received that were p	·	0 0		•
	political action committee (PAC) If	, ,			5 5
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) Name	(b) Address	(C) EIN	filing organization's	contributions received and
				funds If none, enter -0	
				· ·	delivered to a separate
				1	political organization. If none, enter -0
					11 Holle, enter -0-:
		 			-
					
		 			
		1			
					
		 			

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

Schedule C (Form 990 or 990-EZ) 2015

Sobodulo C (form 990 or 990-EZ) 2015	EOUXT.	ртсит	C 3 DV/OC3 TEC	TNC	23_7	217027 Page 2
Part II-A	Complete if the org	anizatio	on is exer	npt under sectio	n 501(c)(3) and file	ed Form 5768 (e	lection under
	section 501(h)).			•		•	
A Check	If the filing organization	tion belon	gs to an affil	liated group (and list in	n Part IV each affiliated	group member's name	e, address, EIN,
	expenses, and shar		_	-		-	
B Check ▶	if the filing organiza	tion check	ed box A ar	nd "limited control" pro	ovisions apply		
			bying Exper leans amou	nditures ints paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lo	bbying expenditures to influ	ence pub	lic opinion (grass roots lobbying)			
	bbying expenditures to influ					50,736.	
c Total lo	c Total lobbying expenditures (add lines 1a and 1b)					50,736.	
d Other e	d Other exempt purpose expenditures						
e Total ex	e Total exempt purpose expenditures (add lines 1c and 1d)						
f_Lobbyir	f Lobbying nontaxable amount. Enter the amount from the following table in both columns						
If the an	nount on line 1e, column (a) o	r (b) is:	The lob	bying nontaxable am	ount is:		
Not ove	er \$500,000		20% of	the amount on line 1e			
Over \$5	500,000 but not over \$1,000	0,000	\$100,00	00 plus 15% of the exc	cess over \$500,000		
Over \$1	,000,000 but not over \$1,5	00,000	\$175,00	00 plus 10% of the exc	cess over \$1,000,000		
Over \$1	1,500,000 but not over \$17,	000,000		00 plus 5% of the exce			
Over \$1	17,000,000		\$1,000,0	000			
g Grassro	oots nontaxable amount (er	iter 25% c	of line 1f)			54,907.	
h Subtrac	ct line 1g from line 1a If zer	o or less,	enter -0-			0.	
i Subtrac	ct line 1f from line 1c If zero	or less, e	nter -0-			0.	
j If there	is an amount other than ze	ro on eith	er line 1h or	line 1i, did the organiz	ation file Form 4720	_	
reportin	ng section 4911 tax for this	year?		<u> </u>			Yes No
	(Some organizations to		a section 5	eraging Period Under 01(h) election do not ate instructions for li	have to complete all	of the five columns b	elow.
		Lob	bying Expe	nditures During 4-Ye	ar Averaging Period		
	Calendar year al year beginning in)	(a)	2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a Lobbyir	ng nontaxable amount					219,629.	219,629.
•	ng ceiling amount						
(150%	of line 2a, column(e))				<u> </u>		329,444.
<u>c</u> Total lo	bbying expenditures					50,736.	50,736.
d Grassro	oots nontaxable amount					54,907.	54,907.
	oots ceiling amount						<u> </u>
	of line 2d, column (e))			}			82,361.
			·				
f Grassro	oots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2015

Schedule C (Form 990 or 990-EZ) 2015 EQUAL RIGHTS ADVOCATES, INC. 23-7217027 Page 3

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

of the lobbying activity	For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description				
	Yes	No	0	Amo	ount
1 During the year, did the filing organization attempt to influence foreign, national, state or					
local legislation, including any attempt to influence public opinion on a legislative matter					
or referendum, through the use of			ļ		
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	L				
c Media advertisements?	ļ	<u> </u>			
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?			\longrightarrow		
f Grants to other organizations for lobbying purposes?	<u> </u>	 			_
g Direct contact with legislators, their staffs, government officials, or a legislative body?		1			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		 			
i Other activities?	<u> </u>	+			
j Total. Add lines 1c through 1i					
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		ļ			
b If "Yes," enter the amount of any tax incurred under section 4912	l		Į		
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912		ļ			_
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	5011	\ <u>\</u>		-4: c	
Part III-A Complete if the organization is exempt under section 501(c)(4), se 501(c)(6).	ection 501(c	;)(5), o	or se	ction	
JO NCAO).				Yes	N
30 1(c)(o).			į.	163	
		Г	1	165	
Were substantially all (90% or more) dues received nondeductible by members?		. [1 2	165	
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), set 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answer. 	ection 501(c		2 3 or se	ction	ne 3,
Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes."	ection 501(c		2 3 or se Part	ction	ne 3,
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), se 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members 	ection 501(d ered "No," C		2 3 or se	ction	ne 3,
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), see 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of part of the prior year? 	ection 501(d ered "No," C		2 3 or se Part	ction	ne 3,
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), se 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pexpenses for which the section 527(f) tax was paid). 	ection 501(d ered "No," C		2 3 or se Part	ction	ne 3,
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pexpenses for which the section 527(f) tax was paid). a Current year 	ection 501(d ered "No," C		2 3 or se Part	ction	ne 3,
1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), so 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pexpenses for which the section 527(f) tax was paid). a Current year b Carryover from last year	ection 501(d ered "No," C		2 3 Or se Part 1 2a 2b	ction	ne 3,
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), see 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pexpenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 	ection 501(c ered "No," C colitical		2 3 or se Part 1 2a 2b 2c	ction	ne 3,
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), see 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of percent year Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due 	ection 501(cered "No," Cered "		2 3 Or se Part 1 2a 2b	ction	ne 3,
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), see 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pexpenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the 	ection 501(cered "No," Cered "Cered "No," Cered "Cered "No," Cered "Cered "No," Cered "Cered "Cered "No," Cered "Cer		2 3 or se Part 1 2a 2b 2c	ction	ne 3,
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), see 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pexpenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying 	ection 501(cered "No," Cered "Cered "No," Cered "Cered "No," Cered "Cered "No," Cered "Cered "Cered "No," Cered "Cer		2 3 or se Parl 1 2a 2b 2c 3	ction	ne 3,
 Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answer answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pexpenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the 	ection 501(cered "No," Cered "Cered "No," Cered "Cered "No," Cered "Cered "No," Cered "Cered "Cered "No," Cered "Cer		2 3 or se Part 1 2a 2b 2c	ction	ne 3,

(Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No 1545-0047 **Open to Public**

Department of the Treasury Internal Revenue Service

Inspection

Nam	e of the organization EQUAL RIGHTS ADVOC	ATES. INC.		Employer identification number 23-7217027
Par			s or Ac	
	organization answered "Yes" on Form 990, Part IV, lin			·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed fund	
	are the organization's property, subject to the organization's	•		Yes No
6	Did the organization inform all grantees, donors, and donor a	J	e used o	nly
	for charitable purposes and not for the benefit of the donor of	5 5		
	impermissible private benefit?			Yes No
Par		ganization answered "Yes" on Form 990,	Part IV,	
1	Purpose(s) of conservation easements held by the organization			
	Preservation of land for public use (e.g., recreation or e		torically	important land area
	Protection of natural habitat	Preservation of a cei		
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a co	nservation easement on the last
	day of the tax year.		ſ	Held at the End of the Tax Year
а	Total number of conservation easements		Ī	2a
b	Total acreage restricted by conservation easements		Ī	2b
С	Number of conservation easements on a certified historic str	ucture included in (a)		2c
ď	Number of conservation easements included in (c) acquired	• •	ture	
	listed in the National Register	,		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	ne organi	zation during the tax
	year >			•
4	Number of states where property subject to conservation ea	sement is located		
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	F	
	violations, and enforcement of the conservation easements i	t holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cor	nservatio	on easements during the year
				
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	ation ea	sements during the year
	> \$			
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 17	0(h)(4)(B)(ı)
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expens	se staten	nent, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza			
	conservation easements			
Par	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or (Other S	Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8		
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue state	ement an	nd balance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in further	ance of	public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descr	ibes these items.		
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue stateme	nt and ba	alance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of p	ublic ser	vice, provide the following amounts
	relating to these items			
	(i) Revenue included on Form 990, Part VIII, line 1			> \$
	(ii) Assets included in Form 990, Part X			> \$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financ	ıal gaın, ı	
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:		
а	Revenue included on Form 990, Part VIII, line 1			> \$
b	Assets included in Form 990, Part X			> \$

532051 11-02-15

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

Schedule D (Form 990) 2015

	edule D (Form 990) 2015 EQUAL R	IGHTS ADVO				or Othe		3-72 r Asse			<u>age 2</u>
3	Using the organization's acquisition, accessi										
	(check all that apply).	•	·	•	Ū		•				
а	Public exhibition		d 🔲 L	oan or exc	hange progra	ams					
b	Scholarly research			Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	un how the	ey further t	he organization	on's exe	npt purpos	se in Pari	XIII.		
5	During the year, did the organization solicit of										
	to be sold to raise funds rather than to be ma						_		Yes		No
Pa	rt IV Escrow and Custodial Arran reported an amount on Form 990, Pa		lete if the	organizatio	n answered '	"Yes" on	Form 990,	Part IV,	line 9, or		
1a	Is the organization an agent, trustee, custod	an or other interme	diary for d	contribution	s or other as	sets not	ıncluded				
	on Form 990, Part X?							X	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the f	ollowing ta	able							
									Amoun	t	
С	Beginning balance						1c			3,6	94.
d	Additions during the year						1d				
е	Distributions during the year .						1e				
f	Ending balance						1f			3,6	94.
2a	Did the organization include an amount on F	orm 990, Part X, line	e 21, for e	scrow or c	ustodial acco	unt liabil	ıty?		Yes	X	No
	If "Yes," explain the arrangement in Part XIII]
Pa	t V Endowment Funds. Complete	f the organization a	nswered '	"Yes" on Fo	orm 990, Part	IV, line	10				
		(a) Current year	(b) Pr	nor year	(c) Two year	rs back	(d) Three ye	ears back	(e) Four	r years	back
1a	Beginning of year balance		<u> </u>								
b	Contributions										
c	Net investment earnings, gains, and losses										
d	Grants or scholarships										
e	Other expenditures for facilities										
	and programs		<u>.</u>								
f	Administrative expenses			-							
g	End of year balance				<u> </u>						
2	Provide the estimated percentage of the cur	rent year end balan	ce (line 1ç	g, column (a	a)) held as:						
а	Board designated or quasi-endowment		%								
b	Permanent endowment	%									
С	Temporarily restricted endowment	%									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.									
3a	Are there endowment funds not in the posse	ssion of the organi	zation tha	t are held a	ınd admınıste	red for t	he organiza	ation			
	by:									Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza								3b		
4	Describe in Part XIII the intended uses of the		lowment f	unds.			_				
Par											
	Complete if the organization answere	d "Yes" on Form 99	0, Part IV	, line 11a. S	See Form 990), Part X,	line 10.				
	Description of property	(a) Cost or basis (invest			or other (other)		ccumulated preciation	d	(d) Boo	k value	Э
1a	Land										
b	Buildings						-				
	Leasehold improvements										
	Equipment		İ	6	3,802.		56,44	10.		7,3	62.
<u>е</u>	Other										
Total	. Add lines 1a through 1e (Column (d) must e	gual Form 990 Par	t X colum	n (R) line	1001					7 3	62

Schedule D (Form 990) 2015

Schedule D (Form 990) 2015 EQUAL RIGHTS	S ADVOCATES.	INC.	23-7217027 Page
Part VII Investments - Other Securities.	HD VOCHILLO,		23 / 21 / 02 / Tage
Complete if the organization answered "Yes" o	n Form 990, Part IV, line	e 11b. See Form 990, Part X,	line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation	n. Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)		_	
(E)	<u> </u>		
(F)	. <u> </u>		
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" or		e 11c. See Form 990, Part X,	line 13.
(a) Description of investment	(b) Book value	(c) Method of valuatio	n: Cost or end-of-year market value
(1)			·
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			.
Part IX Other Assets.			
Complete if the organization answered "Yes" o		e 11d. See Form 990, Part X	
	Description		(b) Book value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			_
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line	<u>15)</u>	<u></u>	
Part X Other Liabilities.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, lin		Part X, line 25
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2) DEFERRED RENT LIABILITY		78,374.	
(3) SECURITY DEPOSITS PAYABLE		1,275.	
(4)			
(5)			

(7) (8) 79,649. Total. (Column (b) must equal Form 990, Part X, col. (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

Schedule D (Form 990) 2015

	1 10 10				
	dule D (Form 990) 2015 EQUAL RIGHTS ADVOCATES, IN	IC.			7217027 Page 4
Pai	T XI Reconciliation of Revenue per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a		Revenue per R	eturr	1.
1	Total revenue, gains, and other support per audited financial statements	1		1	2,697,005.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	•		-	
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	64,995.		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d	100,571.		
е	Add lines 2a through 2d			2e	165,566.
3	Subtract line 2e from line 1			_3_	2,531,439.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.	1 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
D	Other (Describe in Part XIII.)	4b			0
5	Add lines 4a and 4b Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		•	4c 5	2,531,439.
$\overline{}$	rt XII Reconciliation of Expenses per Audited Financial Staten	nents Wit	h Expenses per		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	a			
1	Total expenses and losses per audited financial statements		٠.	1	1,611,855.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	54 005		
а	Donated services and use of facilities	2a	64,995.	}	
b	Prior year adjustments .	2b			
ر د	Other losses	2c	100,571.	}	
a	Other (Describe in Part XIII.) Add lines 2a through 2d	2d	100,3/1.	20	165,566.
е 3	Subtract line 2e from line 1	•	•	2e 3	1,446,289.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				2/130/2051
· a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		·	
b	Other (Describe in Part XIII)	4b]	
С	Add lines 4a and 4b			4c	0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	<u>. </u>		5	1,446,289.
	t XIII Supplemental Information.				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pai			4, Part	X, line 2, Part XI,
iines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any ad	ditional infor	mation		
PAF	RT X, LINE 2:				
THI	ORGANIZATION HAS EVALUATED ITS CURRENT	POS	SITIONS AS	OF_	YEAR END
A ATT	TO NOW AWADE OF ANY CTONTETOANW INTOEDWA:	C37 M3V	DOCTOTONO	EQD.	WILL OIL A
AIVI	O IS NOT AWARE OF ANY SIGNIFICANT UNCERTA	LN TAX	POSITIONS_	FUR	WHICH A
RES	SERVE WOULD BE NECESSARY.				
PAF	RT XI, LINE 2D - OTHER ADJUSTMENTS:				
DIE	RECT EXPENSES OF FUNDRAISING EVENT NETTED	ACATNO	ייי איני איני		
<u> </u>	CECT EXPENSES OF FUNDARISING EVENT METTED	AGAINS	OI EAEMI		
INC	COME ON FORM 990				100,571.
ם א ם	RT XII, LINE 2D - OTHER ADJUSTMENTS:				
<u>+ 177.</u>	ATT, HIME 2D CHER ADOUGHERIS:				
DIF	RECT EXPENSES OF FUNDRAISING EVENT NETTED	AGAINS	T EVENT		
TNIC	COME ON FORM 990				100,571.
532054 09-21-				Sche	dule D (Form 990) 2015
	· -				\ \- \

Schedule D (Form 990) 2015	EQUAL RIGHTS ADVOCATES, INC. Information (continued)	23-7217027 Page 5
Fart Alli Supplemental li	nformation (continued)	
		
		
		Schedule D (Form 990) 2015

09-21-15

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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.

Open to Public

OMB No 1545-0047

Inspection

Name of the organization

Employer identification number

EQUAL RIGHTS ADVOCATES, INC.	23-7217027
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:	
ERA WORKED CLOSELY WITH COMMUNITY-BASED ORGANIZATIONS AND	OTHER CIVIL
AND HUMAN RIGHTS ORGANIZATIONS TO PROMOTE SOCIAL JUSTICE	AND EQUAL
RIGHTS AND OPPORTUNITIES FOR WOMEN AND GIRLS, INCLUDING P	ROMOTING
PUBLIC POLICIES MORE RESPONSIVE TO THE ORGANIZATION'S CON	STITUENTS;
SUPPORTING AND OPPOSING LEGISLATIVE MEASURES BASED ON THE	IR ANTICIPATED
EFFECTS ON THE ORGANIZATION'S CONSTITUENTS; AND EXPRESSIN	G THE
ORGANIZATION'S VIEWS WITH REGARD TO JUDICIAL NOMINEES.	
EXPENSES \$ 50,736. INCLUDING GRANTS OF \$ 0. REVENUE \$	0.
FORM 990, PART VI, SECTION B, LINE 11:	
FORM 990 IS REVIEWED BY THE EXECUTIVE DIRECTOR AND THE TR	EASURER PRIOR TO
FILING. A COPY OF THE FORM 990 IS ALSO MADE AVAILABLE TO	ALL BOARD MEMBERS
PRIOR TO FILING.	
FORM 990, PART VI, SECTION B, LINE 12C:	
ALL BOARD MEMBERS ARE ASKED TO RUN CONFLICT CHECKS BEFORE	THEY JOIN THE
BOARD AND THEY ALSO SIGN A FORM THAT OBLIGATES THEM TO DI	SCLOSE ANY
CONFLICTS THAT ARISE DURING THEIR TENURE ON THE BOARD.	
FORM 990, PART VI, SECTION B, LINE 15:	
THE EXECUTIVE DIRECTOR'S SALARY IS SET BY THE PERSONNNEL	COMMITTEE IN
CONSULTATION WITH THE FINANCE AND EXECUTIVE COMMITTEES OF	THE BOARD. THE
PERSONNEL COMMITTEE REVIEWS THE PERFORMANCE OF THE EXECUT	IVE DIRECTOR
ANNUALLY. IN SETTING SALARIES, THE PERSONNEL COMMITTEE R	REVIEWS SALARY
COMPARABILITY DATA FROM OTHER ORGANIZATIONS, WHICH PROCES	S IS DOCUMENTED.
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schero	dule O (Form 990 or 990-EZ) (2015)

Schedule O (Form 990 or 990-EZ) (2015)	Page 2
Name of the organization EQUAL RIGHTS ADVOCATES, INC.	Employer identification number 23-7217027
IN ADDITION, SALARIES ARE SET BY THE BOARD WHEN ADOPTING	A BUDGET EACH YEAR
AT THE ANNUAL MARCH MEETING. THE BOARD REVIEWS THE BUDGET	AFTER
RECOMMENDATION BY THE FINANCE COMMITTEE, TAKING INTO ACCO	OUNT THE SALARY OF
ALL STAFF MEMBERS.	
FORM 990, PART VI, SECTION C, LINE 18:	
THE ORGANIZATION MAKES ITS FORM 990 AND FORM 1023 AVAILAR	SLE TO THE PUBLIC
UPON REQUEST.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT	OF INTEREST
POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC	UPON REQUEST.
	
	
	
	