### **Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047

Department of the Treasury

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

Open to Public

_		nue Service	ndar year, or tax year beginning , 2017, and ending			, 20	
<u>A</u>				<del>'</del>	D Employer identification number		
В		f applicable	C Name of organization Michigan Energy First  Doing business as		D Ciripioyi		
$\sqcup$	Address	s change			47-2568177		
$\sqcup$	Name cl	hange	e	E Telephor	ne number		
	Initial re	turn	2145 Commons Parkway				
	Final retu	ım/terminated	City or town, state or province, country, and ZIP or foreign postal code				
	Amende	ed return	Okemos, MI 48864		<b>G</b> Gross re		
	Applicat	tion pending	F Name and address of principal officer	H(a) Is this a g	roup return for s	subordinates? 🗌 Yes 🗹 No	
	_		Theresa Uzenski, 2145 Commons Parkway, Okemos, MI 48864	H(b) Are all	subordinates	s included? Tyes No	
ī	Tax-exe	empt status	☐ 501(c)(3)	If "N	o," attach a	list (see instructions)	
J	Website	e: ►		H(c) Group	exemption	number ►	
K	Form of	organization	Corporation ☐ Trust ☐ Association ☐ Other ►	on <b>2014</b>	M State	of legal domicile MI	
P	art I	Summ	ary				
	1	Briefly de	scribe the organization's mission or most significant activities:				
ë		Educate	egislators and the general public on issues facing Michigan, and to advoca	te citizen pa	rticipation	and obtain grassroots	
Governance			or public policies relating to federal, state, or local legislation, and ballot qu				
eri	2		is box $ ightharpoonup \square$ if the organization discontinued its operations or disposed o		25% of	its net assets.	
Š	3		of voting members of the governing body (Part VI, line 1a)		3	3	
۵	4		of independent voting members of the governing body (Part VI, line 1b)		4	0	
ies	5		nber of individuals employed in calendar year 2017 (Part V, line 2a)		5	0	
Activities &	6		nber of volunteers (estimate if necessary)		6	0	
Act.	7a		elated business revenue from Part VIII, column (C), line 12		7a	0	
	b		ated business taxable income from Form 990-T, line 34		7b	0	
_				Prior Ye	ar	Current Year	
Revenue	8	Contribu	3,000,000	15,000,000			
	9		service re <del>venue (</del> Part VIII, Jine 2g)		-,,		
	10	Investme	nt income (Part Mil-column)(A)liñes 3, 4, and 7d)		7,407	22,609	
æ	11	Other rev	renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		27102		
	12	Total reve	enue – add dines 8 through 11 (must equal Part VIII, column (A), line 12)		3,007,407	15,022,609	
_	13	Grants a	nd similar ar ounts paid (Part XPcolumn (A), lines 1–3)		1,110,000	2,143,172	
	14	Benefits	paid to of for-members (Part IX, colum (A), line 4)		.,,		
(A	14-	Salaries.	other compensation, employee penerits (Part IX, column (A), lines 5-10)				
Se	16a		onal fundraising fees (Part IX, column (A), line 11e)				
Expenses	.   b		draising expenses (Part IX, column (D), line 25) ▶				
Ä	17		penses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,224,397	1,308,014	
	18		penses. Add lines 13–17 (must equal Part IX, column (A), line 25)		4,334,397	3,451,186	
	19		less expenses. Subtract line 18 from line 12		,326,990>	11,571,423	
<u>_</u>		110101140		Beginning of Cu		End of Year	
Assets or	20	Total ass	ets (Part X, line 16)		3,166,229	14,737,652	
Ass	21		illities (Part X, line 26)		0	. 1,707,00 <u>2</u>	
Net A	22		ts or fund balances. Subtract line 21 from line 20		3,166,229	14,737,652	
_	art II		ture Block		<u>0,100,220</u>	11/10//002	
			ry, I declare that I have examined this return, including accompanying schedules and stater	nents, and to t	he best of r	ny knowledge, and belief, it is	
tri	ue, corre	ct, and comp	ete Deligration of preparer (other than officer) is based on all information of which preparer	has any know	ledge		
_		T	That esa million with		5/5	2/18	
Si	gn	Sign	ature of officer	Da	ite	1 /	
	ere		Theresa M. Uzenski, Treas	MON			
•••		Type	or print name and title	0101		<del></del>	
_			pe preparer's name Preparer's signature Da	te	Ch. I	T , PTIN	
	aid				Check self-emp		
	repare	1	ame •	Fire	n's EIN ▶	·	
U	se On		ddress ►		one no		
M:	av the I		s this return with the preparer shown above? (see instructions)			Yes No	
				o. 11282Y	<del>-</del>	Form <b>990</b> (2017)	
	upci		Val IV	<del></del> .			

Part		` <u>*</u>
	Check if Schedule O contains a response or note to any line in this Part III	<u> </u>
1	Briefly describe the organization's mission:	*-:
	Educate legislators and the general public on issues facing Michigan, and to advocate citizen participation and ob support for public policies relating to federal, state, or local legislation, and ballot questions.	
2	Did the organization undertake any significant program services during the year which were not listed on the	e
	prior Form 990 or 990-EZ?	☐ Yes ☑ No
3	If "Yes," describe these new services on Schedule O.  Did the organization cease conducting, or make significant changes in how it conducts, any progran	2
	services?	'' □Yes ☑No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program service	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allege the total expenses, and revenue if any for each program across sended.	ocations to others
	the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 2,657,500 including grants of \$ ) (Revenue \$	15,000,000)
	In this fourth year of operations, the organization's program activities were primarily contributions to other non-program activities were primarily contributions at the program activities were primarily contributions at the program activities and the program activities activities at the program activities at the pr	ofits with
	similar objectives and mission. The Organization also conducted surveys and research regarding public policy an	
	a website to convey findings to the general public.	
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		·
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$	<u> </u>
4c	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$	
	(10 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	/
		·
		·
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$ )	
4e	Total program service expenses > 2 657 500	



Part IV	Chacklist	of Required	Schedules
	OHCCRIISE	oi iloquiica	OULCUGICS

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	Yes	No
^	·	$\overline{}$		<b>-</b>
2 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i>	3	✓	
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		<b>V</b>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	<b>-</b>		
•	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	✓	
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		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		✓
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		✓
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		✓
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<b>√</b>
С	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		<b>√</b>
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		<b>√</b>
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<b>√</b>
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		<b>√</b>
12 a		4.0		,
b	Schedule D, Parts XI and XII	12a		<b>✓</b>
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		<b>√</b>
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		<b>√</b>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		<u>·</u>
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 (see instructions)	17		<b>✓</b>
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		✓
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	

20 a Oit the organization operate one or more hospital facilities? If "Yes," complete Schedule H.  10 If "Nee" to line 20st, did the organization attent a copy of its audited financial statements to this return?  21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or comestic government on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and III  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  23 Did the organization resort 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  24 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 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 25e  25 Did the organization maintain an escrow account other than a refunding secrow at any time during the year?  26 Did the organization act as an "on behalf of" issuer for bonds beyond a temporary penid exception?  27 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  28 Section \$5(1)(3), \$50(1)(4), and \$50(1)(2)) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I.  28 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  29 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  29 Did the organization act as an "on behalf of" issuer for bonds beyond a temporary penide schedule I, Part II.  29 Did the organization act as an "on behalf of" issuer for bonds of the second of the second of the second of th	Form 99	0 (2017)		F	age 4
Do It the organization operate one or more hospital facilities? If "Yes," complete Schedule I.  b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  2D Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or comestic organization report more than \$5,000 of grants or other assistance to any domestic organization or comestic organization or organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 21 if "Yes," complete Schedule I, Parts I and III  2D Did the organization are organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 21 if "Yes," complete Schedule I, Parts I and III  2D Did the organization are accessed by the Yes, "favor than a refunding escrew and injusted complete Schedule I.  2D Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the last day of the year, flat was issued after December 31, 2002 If "Yes," answer lines 24d through 24d and complete Schedule I. "If "No," go to line 25a  2D Did the organization maintain an ascrow account other than a refunding secrew at any time during the year of the organization organization maintain an ascrow account other than a refunding secrew at any time during the year of the Yes," complete Schedule I. Part II  b Is the organization as a an "on behalf of" issue for bonds outstanding at any time during the year of the Yes," complete Schedule I. Part II  b It the organization as an including the year if "Yes," complete Schedule I. Part II  b It the organization as a sea of the entry of the organization provide a grant or other assistance to an officer, director, trustee, well and the trust of the provide that the trust of the provide in the provide and the provide in the provide in the provide in the provided persons II "Yes," complete Schedule II. Part I	Part	V Checklist of Required Schedules (continued)		7	
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  1 Did the organization from the than \$5,000 of grants or other assistance to any domestic organization or other assistance to any domestic organization or other assistance to any domestic organization or other assistance to any officers of the domestic preventment on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II and the organization answer "Yes" to Part VI, Section A, line 3, 4, or 5 about compensation of the organizations current and former officers, cirectors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, Part I and III and officers of the study of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule II. This," go to line 25a  b Did the organization invest any proceads of tax-exampt bonds beyond a temporary pend exception?  b Is the organization act as an "on behalf of" issuer for bonds outstanding escrow at any time during the year?  b Is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  b Is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  b Is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  b Is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  b Is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  b Is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  b Is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  b Is the organization act that it engaged in an excess benefit transaction with a disqualified person in a price year, and that the transaction has not been reported on any of these penalty of the organization				Yes	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 17 if "ex", complete Schedule i, Parts I and if!  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 27 if "res," complete Schedule I, Parts I and III  23 Did the organization saver "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 2-db through 24d and complete Schedule K. If "No." go to line 25e  24 Did the organization was any proceade of tax-exempt bonds beyond a temporary penid exception? .  25 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year of delease any tax-exempt bonds?  26 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .  27 Did the organization and as any behalf of "sour for bonds outstanding at any time during the year? .  28 Section 50 ((6)), 50 ((6)), 40 50 ((6)), 40 on 50 ((6)),		· · · · · · · · · · · · · · · · · · ·	_		<b>✓</b>
comestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			200		
Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 27 lf "Yes," complete Schedule I, Parts I and III and the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of 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," yo to line 25a b Did the organization mental an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d Did the organization maintain an escrow account other than a refunding escrow at any time during the year?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  25a Section 60 (c)(a), 601(c)(4), and 501(c)(23) organizations. Did the organization engage 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 or prome 990 or 990-EZ??  If "Yes," complete Schedule I, Part II I I I I I I I I I I I I I I I I I	21	·	21	1	
Part IX, column (A), line 27 if "Yes," complete Schedule I, Part I and III cranization are controlled some state of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization is current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, "Yes," complete Schedule I, "I" ("No," go to fine 25s	22			<u> </u>	
organization's current and former officers, directors, trustees, key amployees, and highest compensated employees? If Yes," complete Schedule J.  23			22		✓
amployees? If "Yes," complete Schedule J.  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  Did the organization misest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization misintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Section 501(16)(16), 301(e)(4), and 501(e)(29) organizations. Did the organization engage in an excess benefit transaction with a disquallified person during the year? If "Yes," complete Schedule L. Part I is the organization aware that it engaged in an excess benefit transaction with a disquallified person in a prior year, and that the transaction has not been reported on any of the organization prior forms 990 or 990-E77 if "Yes," complete Schedule L. Part I is 1.  Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any ourrent or former officers, directors, trustees, key employees, brighest compensated employees, or disqualified persons? If "Yes," complete Schedule L. Part II is 1.  Was the organization a party to a business transaction with one of the following parties (see Schedule L. Part IV is 1.  A current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or director indirect owner? If "Yes," complete Schedule R. Part IV.  Did the organization sell, exchange, dispose of, or transfer more than 25% of its n	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
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 Insea 2th through 2dd and complete Schedule K. If "No," go to line 25a  b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary peniod exception?  c) Did the organization aminatin an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d) Did the organization acts as in "on behalf of" issuer for bonds outstanding at any time during the year?  24d					
\$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 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  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  b is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  Did the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction are proprieted on any of the organization provide a grant or other assistance to an officer, director, trustee, key employees, 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 II  Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV.  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  A current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirector worn? If "Yes," complete Schedule L, Part IV.  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV.  Did the organization receive contributions of art, historical treasures, or other similar			23		<b>✓</b>
through 24d and complete Schedule K. If "No." go to line 25a b) Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception? c) Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d) Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization encases benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I   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-E27 If "Yes," complete Schedule L, Part I   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, brighest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II   Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selecture committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV   A family member of any of these persons? If "Yes," complete Schedule L, Part IV   A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV   Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I   Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, III   Did the organization sell, exchange, dispose of, or transfer more than 25% of its	24a	· · · · · · · · · · · · · · · · · · ·			
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and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		related organization? If "Yes," complete Schedule R, Part V, line 2	36		
Part VI	37				
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and					,
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Part	V Statements Regarding Other IRS Filings and Tax Compliance		-	
	Check if Schedule O contains a response or note to any line in this Part V		<u>.</u>	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 4			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
_	reportable gaming (gambling) winnings to prize winners?	1c		✓_
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a c			<b>!</b>
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
20	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	20		
3a b	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3a 3b	<b>✓</b>	<b>√</b>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	30	•	
Tu	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		✓
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
L	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		<b>✓</b>
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	OD		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Ý
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
n 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7h		
U	sponsoring organizations maintaining donor advised failus. Bid a donor advised failus sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			

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

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

14a

14b

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response or note to any line in this Part VI	ee ins	structi	ions.
Secti	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
ь 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		<b>√</b>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		<b>√</b>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<b>✓</b>
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1
6	Did the organization have members or stockholders?	6		1
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		<b>√</b>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		<b>√</b>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b	<b>\</b>	
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		✓
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C		<del></del>
40-	Did the assessingtion have local aboutous bysesshes as effiliates?	40-	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	<b>√</b>	✓
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	<b>▼</b>	
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	<b>/</b>	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	<u> </u>	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	<b>√</b>	
13	Did the organization have a written whistleblower policy?	13	<b>√</b>	
14 15	Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by	14	✓	
_	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45		
a	The organization's CEO, Executive Director, or top management official	15a		<b>√</b>
b	Other officers or key employees of the organization	15b	-	<b>-</b>
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	40		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	16a		<b>✓</b>
Б	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	4Ch		
Secti	on C. Disclosure	16b		L
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	501(	c)(3)s	only)
19	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interinancial statements available to the public during the tax year.	erest (	oolicy	, and
20	State the name, address, and telephone number of the person who possesses the organization's books and reconstruction and telephone number of the person who possesses the organization's books and reconstruction and telephone number of the person who possesses the organization's books and reconstruction and telephone number of the person who possesses the organization's books and reconstruction and telephone number of the person who possesses the organization's books and reconstruction and telephone number of the person who possesses the organization and telephone number of the person who possesses the organization and telephone number of the person who possesses the organization and telephone number of the person who possesses the organization and telephone number of the person who possesses the organization and telephone number of the person who possesses the organization and telephone number of the person who possesses the organization and the person of the person o	cords	<b>&gt;</b>	

Form	990 (	2017)
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## 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.

☐ Check this box if neither the organization no	r any relate	d org	aniz	atio	n c	ompe	nsa	ted any currer	t officer, directo	r, or trustee.
				•	C)					
(A) Name and Title	(B)		Position (do not check more t box, unless person is officer and a director.			ore than one		(D)	(E)	(F)
Name and Tille	Average hours per week (list any	office				or/trust	ee)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Theresa Uzenski	4									
Director, Treasurer		✓		✓			<u> </u>	0	0	
(2) Renze Hoeksema	11			١,						
Director, President		<b>✓</b>		✓				0	0	
(3) Eric Doster	3	,		١,						
Director, Secretary		<b> </b>		✓				44,695	0	
(4)	1									
(5)										
(6)										
(7)										
(8)			_							
(9)									-	
(10)										
(11)										
(12)										
(13)										
(14)										

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
					(0	•								
	(A) (B) Position (D) (E)						(F)							
	Name and title	Average	box,	unles	s pe	rson	is both	an	Reportable	npensation compensation from			mated	
		hours per week (list any			_		or/trust	·	from			· · · · · · · · · · · · · · · · · · ·		
		hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	emp	Form	the	organizations			ensatio	nc
		related organizations	/idu	<u>t</u>	er	emp	lest	룍	organization (W-2/1099-MISC)	(W-2/1099-MISC	<sup>3</sup>		m the nizatioi	n
		below dotted	or tn	nal		Joy	com		,			and	related	t
		line)	ıste	trus		e e	pen					organ	ıızatıor	is
			П Ф	tee			Highest compensated employee							
(15)						<u> </u>	_	-			-			
(10)		}												
(16)						$\vdash$					+			
110)														
(17)											+		-	
<u> </u>														
(18)						_					-			
3														
(19)						-		<del> </del>			$\top$			
32														
(20)														
J														
(21)														
			l				L		ļ					
(22)														
(23)								-						
(24)								1						
				L				<u> </u>	ļ					
(25)														
	· · · · · · · · · · · · · · · · · · ·			<b>.</b>		L	l	Ļ						
1b	Sub-total		٠.	•	•		•		ļ					
C	Total from continuation sheets to Part	-		•	•		•				_			
<u>d</u>		· · · ·						<u> </u>	44,695		0			0
2	Total number of individuals (including but		to tr	ose	list	ted :	above	e) w	no received m	ore than \$100,	000 c	o†		
	reportable compensation from the organ	Zation												Τ
3	Did the organization list any former of	ficer direc	tor c	or tr	11014	۵۵	kov d	-mr	Novee or high	est compens	hate		Yes	No
•	employee on line 1a? If "Yes," complete											3		1
4	For any individual listed on line 1a, is the											-		┼
-	organization and related organizations											4		
	individual											4		1
5	Did any person listed on line 1a receive of												٠.	<b> </b>
•	for services rendered to the organization											5		1
Section	on B. Independent Contractors									<del></del>				
1	Complete this table for your five highest	compensat	ed inc	depe	end	ent	contr	act	ors that receive	ed more than \$	100,0	000 of		
	compensation from the organization. Rep													ax
	year.													
	(A)								(B)			(C)		
	Name and business add	ress							Description of s	ervices	C	ompens	ation	
NONE														
								$oxedsymbol{oxed}$						
								oxdot						
								<u> </u>						
_		<del>,</del>	_											
2	Total number of independent contractor							o th	nose listed abo	ove) who				

Part VIII										
		Check if Schedule O contains a respon	se or note to							
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514			
nts	1a	Federated campaigns 1a								
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b		1						
Arr (	С	Fundraising events 1c								
Gifts, ilar An	d	Related organizations 1d								
ns,	е	Government grants (contributions) 1e								
er S	f	All other contributions, gifts, grants,								
년 된		and similar amounts not included above	15,000,000							
Contributions, and Other Sim	g	Noncash contributions included in lines 1a-1f \$								
	h	Total. Add lines 1a-1f	usiness Code	15,000,000						
Program Service Revenue	0-		usiness Code							
Seve	2a									
Se F	b									
evi	d d			· · · · · · · · · · · · · · · · · · ·	<del></del>					
n S	e			+						
grar	f	All other program service revenue .								
Pro	g	Total. Add lines 2a–2f				ı	<u> </u>			
	3	Investment income (including dividend								
		and other similar amounts)		22,609						
	4	Income from investment of tax-exempt bond	proceeds ►				-			
	5	Royalties	·							
			(II) Personal							
	6a	Gross rents								
	b	Less. rental expenses								
	С	Rental income or (loss)								
	d	Net rental income or (loss)	•			1111				
	7a	Gross amount from sales of (i) Securities	(II) Other							
		assets other than inventory								
	b	Less: cost or other basis								
	ĺ	and sales expenses .								
	С	Gain or (loss)								
	d	Net gain or (loss)	🕨							
Other Revenue	8a	Gross income from fundraising events (not including \$								
er Re		of contributions reported on line 1c). See Part IV, line 18 a								
₹		Less: direct expenses b								
		Net income or (loss) from fundraising eve	nts . ▶							
	9a	Gross income from gaming activities.				ł				
		See Part IV, line 19 a								
		Less: direct expenses b			· · · · · · · · · · · · · · · · · · ·					
	C	Net income or (loss) from gaming activities	es ►							
	10a	Gross sales of inventory, less returns and allowances a								
	.	~ <u>~</u>								
		Less: cost of goods sold b	n/ -							
	<u>c</u>	Net income or (loss) from sales of invento								
	44	MISCEIIANEOUS HEVENUE BI	usiness Code				-			
	11a									
	b									
	C	All other revenue								
	d	All other revenue		-						
	12	Total. Add lines 11a-11d	· · · 🟲	15 022 000						

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must com	nplete all columns. A	ll other organization:	s must complete co	lumn (A).
	Check if Schedule O contains a respons	se or note to any lir	e in this Part IX .		
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	2,143,172	2,143,172		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits			-	
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				<u></u>
b	Legal	44,695		44,695	
C	Accounting	5,300		5,300	
d	Lobbying				
e f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
40					
12 13	Advertising and promotion	273		274	<del>" -</del>
14	Information technology	213		271	
15	Royalties				
16	Occupancy				
17	Travel				
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 .				
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column				:
	(A) amount, list line 24e expenses on Schedule O.)				
а	000 T and 1120 POL Tayon	743,418		743,418	
b	Advocacy	514,328	514,328	743,410	
c		31,1520	31,11010		<del></del>
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	3,451,186	2,657,500	793,684	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs		İ		
	from a combined educational campaign and			ļ	
	fundraising solicitation. Check here    if following SOP 98-2 (ASC 958-720)				

34

Total liabilities and net assets/fund balances . . . . . . . . . . .

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) Beginning of year End of year 1 3,166,229 14,737,652 2 2 Savings and temporary cash investments . . . . . . . . . . . . . . . 3 3 4 4 5 Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L . . . . . . . 6 Assets 7 8 Prepaid expenses and deferred charges . . . 9 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a | Less: accumulated depreciation . . . . 10b 10c 11 investments—publicly traded securities . . . . . . . . . . . . . . . 11 12 Investments—other securities. See Part IV, line 11 . . . . . . . . 12 13 Investments—program-related. See Part IV, line 11 . . . . . . 13 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . . . 16 3,166,229 14,737,652 17 Accounts payable and accrued expenses . . . . . . . . . . . . 17 18 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 Loans and other payables to current and former officers, directors, 22 trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . . . . . 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties . . . 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 26 Total liabilities. Add lines 17 through 25 . . . . n 26 Organizations that follow SFAS 117 (ASC 958), check here ► □ and **Vet Assets or Fund Balances** complete lines 27 through 29, and lines 33 and 34. 27 27 28 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds . . . . . . . . . 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 32 Retained earnings, endowment, accumulated income, or other funds. 3,166,229 32 14,737,652 33 3,166,229 33 14,737,652

14,737,652

34

3,166,229

_	4	
Page	-1	4

					_
Part	XI Reconciliation of Net Assets			,	•
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		15,02	2,609
2	Total expenses (must equal Part IX, column (A), line 25)	2		3,45	1,186
3	Revenue less expenses. Subtract line 2 from line 1	3		11,57	1,423
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		3,16	6,229
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			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		14,73	7,652
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		
				Yes	No
1	Accounting method used to prepare the Form 990: 🗸 Cash 🗀 Accrual 🗀 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	plain in	į		
_					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were com- reviewed on a separate basis, consolidated basis, or both:	olled or	İ		
	·				
L	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?		Oh		<b>√</b>
D	If "Yes," check a box below to indicate whether the financial statements for the year were audited.	 ad on a	2b		<u>√</u>
	separate basis, consolidated basis, or both:	o on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
_	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	/ersiaht			
Ū	of the audit, review, or compilation of its financial statements and selection of an independent account		2c		./
	If the organization changed either its oversight process or selection process during the tax year, ex				
	Schedule O.	, p. 14			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in			
	the Single Audit Act and OMB Circular A-133?		За		1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	rgo the			•
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b		
			Forr	n <b>990</b>	(2017)
					,

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

#### **Political Campaign and Lobbying Activities**

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-E2. ► Go to www.irs.gov/Form990 for instructions and the latest information.

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.

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

- 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

• Se	ection 501(c)(4), (5), or (6) orga	nızatıons <sup>.</sup> Complete Part III.			
Name	of organization			Employer ider	ntification number
Michig	an Energy First				47-2568177
Part	I-A Complete if the	e organization is exempt un	der section 501(	c) or is a section 527 of	organization.
1	definition of "political can	the organization's direct and inpaign activities")	·		·
2	Political campaign activity	y expenditures (see instructions)		\$	}
3		cal campaign activities (see instru			
Part	I-B Complete if the	e organization is exempt un	der section 501(	c)(3).	
1	Enter the amount of any	excise tax incurred by the organi	zation under sectio	n 4955 ▶ \$	} 
2	Enter the amount of any	excise tax incurred by organization	on managers under	section 4955 🕨 💲	) 
3	If the organization incurre	ed a section 4955 tax, did it file F	orm 4720 for this y	ear?	LYes LNo
4a					LYes LNo
ь	If "Yes," describe in Part			-\	(-\(0\)
Part		e organization is exempt un			(c)(3).
1	Enter the amount direct	ly expended by the filing organ	ization for section	527 exempt function	
2		filing organization's funds contr			
		vities			'
3	Total exempt function e	expenditures. Add lines 1 and	2. Enter here and	on Form 1120-POL,	
	line 17b			▶ \$	
4	Did the filing organization	file Form 1120-POL for this yea	ır?		🗌 Yes 🗌 No
5	organization made payme the amount of political co	ses and employer identification nents. For each organization listed ontributions received that were prefund or a political action commit	, enter the amount omptly and directly	paid from the filing organion delivered to a separate p	ization's funds. Also enter political organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Cat No 50084S

Schedule C (Form 990 or 990-EZ) 2017

Page	2
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Schedule	С	(Form	990	or	990-	EZ)	2017
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5000		000 0, 000 11, 2011					raye z
	t II-A	Complete if the organizat section 501(h)).					
4 (	Check >	If the filing organization beloaddress, EIN, expenses, an				iliated group memb	er's name,
<b>B</b> (	Check >	If the filing organization che	cked box A and	"limited control" p	rovisions apply.		
		Limits on Lo	bbying Expendit	tures		(a) Filing	(b) Affiliated
		(The term "expenditures"	means amounts	paid or incurred.	.)	organization's totals	group totals
1a	Total lo	obbying expenditures to influence	ce public opinion	(grass roots lobby	/ing)		
b	Total lo	obbying expenditures to influence	ce a legislative b	ody (direct lobbyin	g)		
c	Total lo	obbying expenditures (add lines	1a and 1b) .				
C		exempt purpose expenditures					
е		xempt purpose expenditures (a					
f	Lobbyi columi	ng nontaxable amount. Ente	r the amount f	rom the following	g table in both		
	If the ar	nount on line 1e, column (a) or (b)	is: The lobbying	nontaxable amoun	t is:		
	Not ove	r \$500,000	20% of the ar	nount on line 1e.			
	Over \$5	00,000 but not over \$1,000,000	\$100,000 plus	s 15% of the excess	over \$500,000		
	Over \$1	,000,000 but not over \$1,500,000	\$175,000 plus	s 10% of the excess	over \$1,000,000.		
	Over \$1	,500,000 but not over \$17,000,000		s 5% of the excess o			
	Over \$1	7,000,000	\$1,000,000.				
g	Grassr	oots nontaxable amount (enter	25% of line 1f)				
h	Subtra	ct line 1g from line 1a. If zero or	less, enter -0-				
i	Subtra	ct line 1f from line 1c If zero or	less, enter -0-				
j	If there	e is an amount other than zer	ro on either line	1h or line 1ı, dic	the organization	file Form 4720	
	reporti	ng section 4911 tax for this yea	ar?	<u> </u>	<u> </u>	[	Yes 🗌 No
	(Som	e organizations that made a s See tl	section 501(h) el ne separate inst	ructions for lines	e to complete all 2a through 2f.)	l of the five column	s below.
		Lobbyi	ng Expenditures	During 4-Year A	veraging Period		
	Cale	ndar year (or fiscal year beginning in)	<b>(a)</b> 2014	<b>(b)</b> 2015	(c) 2016	<b>(d)</b> 2017	(e) Total
<b>2</b> a	Lobbyi	ng nontaxable amount					
b	•	ng ceiling amount of line 2a, column (e))					
C	Total lo	obbying expenditures					
d	l Grassr	oots nontaxable amount					
e		oots ceiling amount of line 2d, column (e))					
f	Grassr	oots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2017

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Form	5768		
For a	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(	a)		(b)	
	iption of the lobbying activity.	Yes	No	Aı	mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
a b	Volunteers?			a de la companya de		
С	Media advertisements?				The Authorities	
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?	<u></u>				
f	Grants to other organizations for lobbying purposes?		ļ	-		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	<u></u>	<u> </u>			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		ļ			
į	Other activities?	40075KB	atalas (2-D):			
j	Total. Add lines 1c through 1			CB#2x3rxi	asimiran	on the said
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	****	Marie Co.			
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 . If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		2.58	THE WYD		W 300
d		\	0.00	otion		松為後
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	,)(ə), ·	or se	Cuon		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	$\sqcup$	✓
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	$\sqcup$	<u>√</u>
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				Ц	<u> </u>
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."	)(5), ( )R (b)	or se ) Part	ction : III-A,	line 3	i, is
1	Dues, assessments and similar amounts from members		1	15	5,000,00	00.00
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).	s of				
а	Current year		2a		1,445,77	70.0
b	Carryover from last year		2b			
С	Total	•	2c	•	1,445,77	<u>70.0:</u>
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion or excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb	the	3			(
	and political expenditure next year?		4			(
5	Taxable amount of lobbying and political expenditures (see instructions)		5		506,01	19.5°
Par	t IV Supplemental Information					
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro instructions); and Part II-B, line 1. Also, complete this part for any additional information.	up lis	st); Pai	t II-A, I	ines 1	and
		******	•••••			

	rm 990 or 990-EZ) 2017	Page 4
Part IV	Supplemental Information (continued)	
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# SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

► Attach to Form 990. ► Go to www.irs.gov/Form990 for the latest information.

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OMB No 1545-0047

Employer identification number

Michigan Energy First							47-2568177
Part I General Information on Grants and Assistance	on Grants and	Assistance			,		
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	ain records to subsaward the grants	stantiate the amou	int of the grants or	assistance, the g	rantees' eligibility fo	or the grants or assistance	e, and Nes INo
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ization's procedur	es for monitoring	the use of grant fur	nds in the United	States.		
Part II Grants and Other As 990, Part IV, line 21, f	ssistance to Do for any recipient	mestic Organiz that received mo	ations and Domore than \$5,000.	nestic Governm Part II can be d	ients. Complete il uplicated if additi	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	ered "Yes" on Form
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) 21st Century Fund PO Box 130611, Ann Arbor, MI 48113	38-1323848	527	250,000				Unrestricted Donation
(2) Michigan Republican Party Adm 520 Seymour, Lansing, MI 48933	38-1221182	527	550.000				Unrestricted Donation
(3) Huron Wind Energy Coalition 144 E. Huron Ave, Bad Axe, MI 48413	82-0935029	501(c)4	438,172				Unrestricted Donation
(4) Making Government Accountab PO Box 13024, Lansing, MI 48901	47-3461382	501(c)4	200,000				Unrestricted Donation
(5) MI Citizens Fiscal Responsibiti 106 W Allegan, Lansing, MI 48933	27-1993953	501(c)4	75,000				Unrestricted Donation
(6) American Jobs Council 106 W Allegan, Lansing MI 48933	81-1205783	501(c)4	20,000				Unrestricted Donation
(7) Empower Michigan 5420 Beckley Rd, Battle Creek, MI 490	20-0335121	501(c)4	20,000				Unrestricted Donation
(8) Ignite Michigan Fund 215 S Washington Sq, Lansing, MI 48		501(c)4	20,000				Unrestricted Donation
(9) Michigan Chamber of Commerc 600 Walnut, Lansing, MI 48933	38-1626029	501(c)6	100,000				Unrestricted Donation
(10) On Duty for Michigan 5915 Eastman Ave, Midland, MI 48640		501(c)4	25,000				Unrestricted Donation
(11) Fund for Michigan Jobs PO Box 14097, Lansing, MI 48901	26/3459676	501(c)4	100,000				Unrestricted Donation
(12) Detroit Regional Chamber One Woodward, Detroit, MI 48226	38-0477570	501(c)6	125,000				Unrestricted Donation
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table	1 501(c)(3) and gov	ernment organizat	tions listed in the li	ne 1 table			0
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Schedule I (Form 990) (2017)

Cat No 50055P

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

Schedule 1 (Form 990) (2017)

(f) Description of noncash assistance Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of noncash assistance (c) Amount of cash grant Part III can be duplicated if additional space is needed. (b) Number of recipients (a) Type of grant or assistance Part IV Part III N ო 4 Ŋ ဖ

Schedule I (Form 990) (2017) •

**SCHEDULE 1** (Form 990) Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

47-2568177

Michigan Energy First Name of the organization

Part II, continued

(h) Purpose of grant or Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed
1 (a) Name and address of organization or government (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non- (f) Method of (g) Description of (h) Purpose of grant or

		(if applicable)	grant	cash assistance	FMV, appraisal,	noncash assistance	assistance
(13) Civic Action Fund-Serving MI Fund PO Box 24215, Lansing, MI 48909	27-55455409	501(c)4	\$15,000		(iain)		Unrestricted Donation
PO Box 15173, Lansing, MI 48901	20-2674360	501(c)4	\$75,000				Unrestricted Donation
(19) Reloin Auto No-Fault Now 201 Townsend St, Lansing, MI 48933	82-2946379	501(c)4	\$100,000				Unrestricted Donation

(16) (17) (18) (19) (20) (21) (23) (23)

#### SCHEDULE O (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-EZ

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

2017

OMB No 1545-0047

Open to Public Inspection

**Employer identification number** 

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

47-2568177 Michigan Energy First PART VI, SECTION B, LINE 15--PAYROLL POLICY The organization has no employees PART VI, SECTION B, LINE 11b--990 APPROVAL POLICY The 990 is reviewed by the Board members before filing. PART VI, SECTION B, LINE 12C--CONFLICT OF INTEREST POLICY At each Board of Directors' meeting, potential conflicts of interest are discussed as these issues arise. Board members do not vote on issues where there may be a conflict of interest. PART VI, SECTION C, DISCLOSURE Upon request, the governing documents, financial statements and IRS form 990 are made available to the public. PART V, Line 3b The Organization filed the 2017 1120-POL and a 990-T for the sole purpose of reporting and paying the proxy tax.

Schedule O (Form 990 or 990-EZ) (2017)	Page <b>2</b>
Name of the organization	Employer identification number
	<u>-</u>
·	