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Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ 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? ☐ 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 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 revenue, if any, for each program service reported

4a	(Code)	(Expenses \$	including grants of \$	(Revenue \$	)
See Additional Data					

4b	(Code)	(Expenses \$	including grants of \$	(Revenue \$	)
See Additional Data					

4c	(Code)	(Expenses \$	including grants of \$	(Revenue \$	)
See Additional Data					

(Code)	(Expenses \$	including grants of \$	(Revenue \$	)
OPTIONAL PARTICIPATION FOR MEMBERS IN THE FILM SOCIETY, MEMBERS CAN JOIN FOR THE PURPOSE OF REVIEWING FILMS				

4d	Other program services (Describe in Schedule O)	(Expenses \$	including grants of \$	(Revenue \$	)
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4e Total program service expenses ▶

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	No
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	No
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	No
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	
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	Yes
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	No
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	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
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	Yes
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	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a	Yes
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	No
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	No
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	Yes
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e	Yes
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	Yes
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a	No
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	Yes
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
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	Yes
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	Yes
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	No
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	No
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	No
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	No

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	No
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 domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes
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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	No
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	No
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
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? <i>If "Yes," complete Schedule L, Part I</i>	25a	
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? <i>If "Yes," complete Schedule L, Part I</i>	25b	
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? <i>If "Yes," complete Schedule L, Part II</i>	26	No
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? <i>If "Yes," complete Schedule L, Part III</i>	27	No
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	No
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? <i>If "Yes," complete Schedule L, Part IV</i>	28c	No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	No
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	No
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	No
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	No
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	174
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes
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	654
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	No
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	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
c	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 organization solicit any contributions that were not tax deductible as charitable contributions?	6a	No
b	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).		
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	
c	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	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
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	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9a	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		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b	
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.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a	
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	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructionsCheck if Schedule O contains a response or note to any line in this Part VI ☒**Section 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 80		
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			
b Enter the number of voting members included in line 1a, above, who are independent	1b 80		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
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		No
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6 Did the organization have members or stockholders?	6	Yes	
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	Yes	
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	Yes	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a The governing body?	8a	Yes	
b Each committee with authority to act on behalf of the governing body?	8b	Yes	
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		No

Section 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	Yes
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes
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 Describe in Schedule O the process, if any, used by the organization to review this Form 990		No
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13 Did the organization have a written whistleblower policy?	13	No
14 Did the organization have a written document retention and destruction policy?	14	Yes
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?		
a The organization's CEO, Executive Director, or top management official	15a	Yes
b Other officers or key employees of the organization	15b	Yes
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section 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 Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☐ Own website ☐ Another's website ☒ Upon request ☒ Other (explain in Schedule O)	
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶ARIANNA OZZANTO 5757 WILSHIRE BOULEVARD 7TH FLOOR LOS ANGELES, CA 90036 (323) 549-6689	

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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

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[illegible]

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 124

Section B. Independent Contractors

(A) Name and business address	(B) Description of services	(C) Compensation
INTEGRITY VOTING SYSTEMS 3001 112TH AVE NE SUITE 100 BELLEVUE, WA 98004	ELECTION SERVICES	1,045,281
BUSH GOTTLIEB 500 N CENTRAL AVE SUITE 800 GLENDALE, CA 91203	LEGAL FIRM	1,022,141
COHEN WEISS & SIMON LLP 330 W 42 STREET NEW YORK, NY 10036	LEGAL FIRM	876,512
OFFICE TEAM PO BOX 743295 LOS ANGELES, CA 900743295	TEMP STAFFING	802,685
PACIFIC TUSK BUILDERS INC 1100 QUAIL ST 213 NEWPORT BEACH, CA 92660	CONTRACTOR	792,591

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 31	
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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	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a				
	b	Membership dues . . .	1b				
	c	Fundraising events . . .	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f				
	g	Noncash contributions included in lines 1a-1f \$ _____					
	h	Total. Add lines 1a-1f ▶					
Program Service Revenue			Business Code				
	2a	MEMBERSHIP & INITIATION DUES	900099	102,791,726	102,791,726		
	b	AWARDS SHOW INCOME	900099	4,130,853	4,130,853		
	c	FILM SOCIETY	900099	573,580	573,580		
	d	CONSERVATORY	900099	186,039	186,039		
	e	CONVENTION INCOME	900099	6,759	6,759		
	f	All other program service revenue					
	g	Total. Add lines 2a-2f ▶	107,688,957				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶	691,209			691,209	
	4	Income from investment of tax-exempt bond proceeds ▶					
	5	Royalties ▶					
	6a	Gross rents	(i) Real	(ii) Personal			
			2,383,307				
		b	Less rental expenses	0			
		c	Rental income or (loss)	2,383,307			
	d	Net rental income or (loss) ▶	2,383,307			2,383,307	
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
			2,633,073				
		b	Less cost or other basis and sales expenses	2,599,333			
		c	Gain or (loss)	33,740			
	d	Net gain or (loss) ▶	33,740			33,740	
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 a					
	b	Less direct expenses b					
	c	Net income or (loss) from fundraising events . . . ▶					
	9a	Gross income from gaming activities See Part IV, line 19 a					
	b	Less direct expenses b					
	c	Net income or (loss) from gaming activities . . . ▶					
	10a	Gross sales of inventory, less returns and allowances a					
b	Less cost of goods sold b						
c	Net income or (loss) from sales of inventory . . . ▶						
Miscellaneous Revenue		Business Code					
11a	UNCLAIMED RESIDUALS	900099	1,160,000	1,160,000			
b	LATE FEES	900099	768,782	768,782			
c	RECORDING ARTIST SERVICE FEES	900099	744,067	744,067			
d	All other revenue		1,772,673	1,275,423	497,250		
e	Total. Add lines 11a-11d ▶		4,445,522				
12	Total revenue. See Instructions ▶		115,242,735	111,637,229	497,250	3,108,256	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	866,534			
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, line 15 and 16.	41,500			
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	4,889,380			
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.	41,840,117			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	5,439,777			
9 Other employee benefits.	6,247,780			
10 Payroll taxes.	3,408,982			
11 Fees for services (non-employees):				
a Management.				
b Legal.	2,529,339			
c Accounting.	354,372			
d Lobbying.	352,640			
e Professional fundraising services. See Part IV, line 17.				
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).	3,336,034			
12 Advertising and promotion.	207,362			
13 Office expenses.	1,171,383			
14 Information technology.	5,774,897			
15 Royalties.				
16 Occupancy.	15,066,494			
17 Travel.	3,393,787			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	539,142			
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	3,155,376			
23 Insurance.	656,675			
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a PUBLICATIONS EXPENSE	474,356			
b PRINTING & POSTAGE	3,178,583			
c CREDIT CARD FEES	1,329,914			
d PER CAPITA DUES	1,312,223			
e All other expenses	1,721,785			
25 Total functional expenses. Add lines 1 through 24e.	107,288,432			
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720).				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		61,633,579	1	74,313,268
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		1,968,528	4	1,891,557
	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 instructions). Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		2,483,109	9	2,730,089
	10a	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	10a	45,064,721		
	b	Less: accumulated depreciation	10b	32,899,119		
				12,916,718	10c	12,165,602
	11	Investments—publicly traded securities		19,551,518	11	20,376,355
	12	Investments—other securities. See Part IV, line 11		1,894,204	12	1,963,685
	13	Investments—program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
15	Other assets. See Part IV, line 11		185,054,783	15	202,197,380	
16	Total assets. Add lines 1 through 15 (must equal line 34)		285,502,439	16	315,637,936	
Liabilities	17	Accounts payable and accrued expenses		16,942,289	17	18,756,144
	18	Grants payable			18	
	19	Deferred revenue		9,866,471	19	13,327,642
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		183,919,759	21	201,155,138
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		13,280,671	25	12,590,950
	26	Total liabilities. Add lines 17 through 25		224,009,190	26	245,829,874
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		61,493,249	27	69,808,062
	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets			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	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
33	Total net assets or fund balances		61,493,249	33	69,808,062	
34	Total liabilities and net assets/fund balances		285,502,439	34	315,637,936	

Part XI Reconciliation of Net AssetsCheck 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	115,242,735
2	Total expenses (must equal Part IX, column (A), line 25)	2	107,288,432
3	Revenue less expenses Subtract line 2 from line 1	3	7,954,303
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	61,493,249
5	Net unrealized gains (losses) on investments	5	360,510
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	69,808,062

Part XII Financial Statements and ReportingCheck 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 ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		No
b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis	Yes	
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a 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?		No
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Additional Data

Software ID:

Software Version:

EIN: 45-4931719

Name: SCREEN ACTORS GUILD-AMERICAN FEDERATION
OF TELEVISION AND RADIO ARTISTS

Form 990 (2017)

Form 990, Part III, Line 4a:

THE UNION HOLDS FUNDS IN TRUST FOR MEMBERS IN SECONDARY MARKETS

Form 990, Part III, Line 4b:

SAG-AFTRA HOLDS AN ANNUAL AWARD SHOW TO HONOR SCREEN ACTORS FOR THEIR ACCOMPLISHMENTS

Form 990, Part III, Line 4c:

ACTIVITIES OF THE CONSERVATORY COMMITTEE PROVIDE EDUCATION IN THE CRAFT OF ACTING IN THE FORM OF SEMINARS, WORKSHOPS, LECTURES, ETC

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
GABRIELLE CARTERIS NATIONAL PRESIDENT	1 00	X		X				0	0	0
REBECCA DAMON EXECUTIVE VICE PRESIDENT	1 00	X		X				0	0	0
JANE AUSTIN NATIONAL SECRETARY-TREASURER	1 00	X		X				0	0	0
ILYSSA FRADIN NATIONAL VICE PRESIDENT, MID-SIZED LOCALS	1 00	X		X				0	0	0
SAMANTHA MATHIS NATIONAL VICE PRESIDENT, ACTORS/PERFORMERS	1 00	X		X				0	0	0
CATHERINE BROWN NATIONAL VICE PRESIDENT, BROADCASTERS	1 00	X		X				0	0	0
CLYDE KUSATSU NATIONAL VICE PRESIDENT, LOS ANGELES	1 00	X		X				0	0	0
MIKE HODGE NATIONAL VICE PRESIDENT, NEW YORK	1 00	X		X				0	0	0
LIZ ZAZZI NATIONAL VICE PRESIDENT, NEW YORK	1 00	X		X				0	0	0
DAN NAVARRO NATIONAL VICE PRESIDENT, REC ARTISTS/SINGERS	1 00	X		X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DAVID HARTLEY MARGOLIN NATIONAL VICE PRESIDENT, SMALL LOCALS	1 00	X		X				0	0	0
SUZANNE BURKHEAD NATIONAL VICE PRESIDENT, SMALL LOCALS	1 00	X		X				0	0	0
DON AHLES NATIONAL BOARD MEMBER	1 00	X						0	0	0
ED ASNER NATIONAL BOARD MEMBER	1 00	X						0	0	0
BOBBIE BATES NATIONAL BOARD MEMBER	1 00	X						0	0	0
RANDAL BERGER NATIONAL BOARD MEMBER	1 00	X						0	0	0
SUSAN BOYD JOYCE NATIONAL BOARD MEMBER	1 00	X						0	0	0
RODGER BRAND NATIONAL BOARD MEMBER	1 00	X						0	0	0
JOHN CARTER BROWN NATIONAL BOARD MEMBER	1 00	X						0	0	0
BOB BUTLER NATIONAL BOARD MEMBER	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOANNA CASSIDY NATIONAL BOARD MEMBER	1 00	X						0	0	0
WILLIAM CHARLTON NATIONAL BOARD MEMBER	1 00	X						0	0	0
ELLEN CRAWFORD NATIONAL BOARD MEMBER	1 00	X						0	0	0
JANE DALY NATIONAL BOARD MEMBER	1 00	X						0	0	0
JOE D'ANGERIO NATIONAL BOARD MEMBER	1 00	X						0	0	0
MAUREEN DONNELLY NATIONAL BOARD MEMBER	1 00	X						3,420	0	0
STEVE DRESSLER NATIONAL BOARD MEMBER	1 00	X						0	0	0
NANCY DUERR NATIONAL BOARD MEMBER	1 00	X						0	0	0
HAL EISNER NATIONAL BOARD MEMBER	1 00	X						0	0	0
GREG EVIGAN NATIONAL BOARD MEMBER	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JIM FERGUSON NATIONAL BOARD MEMBER	1 00	X						0	0	0
CHARLES FERRARA NATIONAL BOARD MEMBER	1 00	X						0	0	0
MARIE FINK NATIONAL BOARD MEMBER	1 00	X						0	0	0
FRANCES FISHER NATIONAL BOARD MEMBER	1 00	X						0	0	0
HECTOR GARCIA NATIONAL BOARD MEMBER	1 00	X						0	0	0
ANNE GARTLAN NATIONAL BOARD MEMBER	1 00	X						0	0	0
JASON GEORGE NATIONAL BOARD MEMBER	1 00	X						0	0	0
MARGIE GHIGO NATIONAL BOARD MEMBER	1 00	X						1,015	0	0
TRACI GODFREY NATIONAL BOARD MEMBER	1 00	X						0	0	0
HOLTER GRAHAM NATIONAL BOARD MEMBER	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ABIGAIL GRENLEY NATIONAL BOARD MEMBER	1 00	X						0	0	0
PAMELA GUEST NATIONAL BOARD MEMBER	1 00	X						0	0	0
LINDA HARCHARIC NATIONAL BOARD MEMBER	1 00	X						0	0	0
KATHRYN HOWELL NATIONAL BOARD MEMBER	1 00	X						0	0	0
JON HUERTAS NATIONAL BOARD MEMBER	1 00	X						0	0	0
MICHELLE HURD NATIONAL BOARD MEMBER	1 00	X						0	0	0
DAVID JOLLIFFE NATIONAL BOARD MEMBER	1 00	X						0	0	0
EZRA KNIGHT NATIONAL BOARD MEMBER	1 00	X						0	0	0
JOE KREBS NATIONAL BOARD MEMBER	1 00	X						0	0	0
CHRIS LACEY NATIONAL BOARD MEMBER	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DIANE LADD NATIONAL BOARD MEMBER	1 00	X						0	0	0
ELAINE LEGARO NATIONAL BOARD MEMBER	1 00	X						0	0	0
ANA LILIA NATIONAL BOARD MEMBER	1 00	X						0	0	0
JODI LONG NATIONAL BOARD MEMBER	1 00	X						0	0	0
ART LYNCH NATIONAL BOARD MEMBER	1 00	X						0	0	0
MEL MACKARON NATIONAL BOARD MEMBER	1 00	X						0	0	0
ADRIAN MARTINEZ NATIONAL BOARD MEMBER	1 00	X						0	0	0
MARY MCDONALD-LEWIS NATIONAL BOARD MEMBER	1 00	X						0	0	0
ELIZABETH MCLAUGHLIN NATIONAL BOARD MEMBER	1 00	X						0	0	0
HELEN MCNUTT NATIONAL BOARD MEMBER	1 00	X						0	0	0

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(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN R MITCHELL NATIONAL BOARD MEMBER	1 00	X						0	0	0
MATTHEW MODINE NATIONAL BOARD MEMBER	1 00	X						0	0	0
BILL MOOTOS NATIONAL BOARD MEMBER	1 00	X						0	0	0
ESAI MORALES NATIONAL BOARD MEMBER	1 00	X						0	0	0
SUE-ANNE MORROW NATIONAL BOARD MEMBER	1 00	X						0	0	0
CHRISTINE NAGY NATIONAL BOARD MEMBER	1 00	X						0	0	0
DEBRA NELSON NATIONAL BOARD MEMBER	1 00	X						0	0	0
JENNY O'HARA NATIONAL BOARD MEMBER	1 00	X						0	0	0
RON OSTROW NATIONAL BOARD MEMBER	1 00	X						0	0	0
JANICE PENDARVIS NATIONAL BOARD MEMBER	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ROBERT PINE NATIONAL BOARD MEMBER	1 00	X						0	0	0
JAY POTTER NATIONAL BOARD MEMBER	1 00	X						0	0	0
LINDA POWELL NATIONAL BOARD MEMBER	1 00	X						0	0	0
JASPER RANDALL NATIONAL BOARD MEMBER	1 00	X						0	0	0
AUTUMN REESER NATIONAL BOARD MEMBER	1 00	X						0	0	0
PATRICIA RICHARDSON NATIONAL BOARD MEMBER	1 00	X						0	0	0
ROBIN RIKER NATIONAL BOARD MEMBER	1 00	X						0	0	0
SCOTT ROGERS NATIONAL BOARD MEMBER	1 00	X						0	0	0
JOHN ROTHMAN NATIONAL BOARD MEMBER	1 00	X						0	0	0
WOODY SCHULTZ NATIONAL BOARD MEMBER	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
KEVIN SCULLIN NATIONAL BOARD MEMBER	1 00	X						0	0	0
RICHARD SHAVZIN NATIONAL BOARD MEMBER	1 00	X						0	0	0
MARTIN SHEEN NATIONAL BOARD MEMBER	1 00	X						0	0	0
LESLIE SHREVE NATIONAL BOARD MEMBER	1 00	X						0	0	0
SUSAN SNYDER NATIONAL BOARD MEMBER	1 00	X						0	0	0
ABIGAIL SPENCER NATIONAL BOARD MEMBER	1 00	X						0	0	0
JEFF SPURGEON NATIONAL BOARD MEMBER	1 00	X						0	0	0
JONATHAN TAYLOR THOMAS NATIONAL BOARD MEMBER	1 00	X						0	0	0
PETER TOCCO NATIONAL BOARD MEMBER	1 00	X						0	0	0
SHEILA TRAISTER NATIONAL BOARD MEMBER	1 00	X						0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
STACEY TRAVIS NATIONAL BOARD MEMBER	1 00	X						0	0	0
MONICA TROMBETTA NATIONAL BOARD MEMBER	1 00	X						0	0	0
LISA VIDAL NATIONAL BOARD MEMBER	1 00	X						0	0	0
PAMELA WEAVER NATIONAL BOARD MEMBER	1 00	X						0	0	0
PETE ANTICO ALTERNATE	1 00	X						0	0	0
JEFF AUSTIN ALTERNATE	1 00	X						0	0	0
MARC BARON ALTERNATE	1 00	X						0	0	0
NITASHA BHAMBREE ALTERNATE	1 00	X						0	0	0
AVIS BOONE ALTERNATE	1 00	X						0	0	0
CHRISTINE BRUNO ALTERNATE	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ANDREW CAPLE-SHAW ALTERNATE	1 00	X						0	0	0
NATALIA CASTELLANOS ALTERNATE	1 00	X						0	0	0
PARVESH CHEENA ALTERNATE	1 00	X						0	0	0
TOM CHOI ALTERNATE	1 00	X						0	0	0
ASSAF COHEN ALTERNATE	1 00	X						0	0	0
MIMI COZZENS ALTERNATE	1 00	X						0	0	0
ASHLEY DEARBORN ALTERNATE	1 00	X						0	0	0
CATHERINE DENT ALTERNATE	1 00	X						0	0	0
RIK DESKIN ALTERNATE	1 00	X						0	0	0
SUSIE DUFF ALTERNATE	1 00	X						0	0	0

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(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CAROLE ELLIOTT ALTERNATE	1 00	X						0	0	0
DEBBIE EVANS ALTERNATE	1 00	X						0	0	0
NICK FONDULIS ALTERNATE	1 00	X						0	0	0
CHARLES ANDREW GARDNER ALTERNATE	1 00	X						0	0	0
JANETTE GAUTIER ALTERNATE	1 00	X						0	0	0
RICHARD HADFIELD ALTERNATE	1 00	X						0	0	0
BRIAN HAMILTON ALTERNATE	1 00	X						0	0	0
SAMANTHA HARTSON ALTERNATE	1 00	X						0	0	0
CUPID HAYES ALTERNATE	1 00	X						0	0	0
JOHN HENREHAN ALTERNATE	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
PHOEBE JONAS ALTERNATE	1 00	X						0	0	0
SANDRA KARAS ALTERNATE	1 00	X						0	0	0
MATT KAVANAUGH ALTERNATE	1 00	X						0	0	0
VERANIA KENTON ALTERNATE	1 00	X						0	0	0
JIM KERR ALTERNATE	1 00	X						0	0	0
GERALD KLINE ALTERNATE	1 00	X						0	0	0
LANCE LEWMAN ALTERNATE	1 00	X						0	0	0
KATE LINDER ALTERNATE	1 00	X						0	0	0
KURT LOTT ALTERNATE	1 00	X						0	0	0
MYKLE MCCOSLIN ALTERNATE	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOSEPH MELENDEZ ALTERNATE	1 00	X						0	0	0
JULIE MICHAELS ALTERNATE	1 00	X						0	0	0
RON MORGAN ALTERNATE	1 00	X						0	0	0
JACK MULCAHY ALTERNATE	1 00	X						0	0	0
PEGGY LANE O'ROURKE ALTERNATE	1 00	X						0	0	0
MICHELE PROUDE ALTERNATE	1 00	X						0	0	0
LEE PURCELL ALTERNATE	1 00	X						0	0	0
RIC REITZ ALTERNATE	1 00	X						0	0	0
RICK ROCKNE ALTERNATE	1 00	X						0	0	0
MIKE SAKELLARIDES ALTERNATE	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
GEORGE SANCHEZ ALTERNATE	1 00	X						0	0	0
SARAH SEEDS ALTERNATE	1 00	X						0	0	0
SHAAN SHARMA ALTERNATE	1 00	X						0	0	0
JACK SPEER ALTERNATE	1 00	X						0	0	0
JAMAL STORY ALTERNATE	1 00	X						0	0	0
ARTTOURS WEEDEN ALTERNATE	1 00	X						0	0	0
BEN WHITEHAIR ALTERNATE	1 00	X						0	0	0
VIVICCA A WHITSETT ALTERNATE	1 00	X						0	0	0
RODD WOLFF ALTERNATE	1 00	X						0	0	0
ERIC WYDRA ALTERNATE	1 00	X						0	0	0

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(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
RICK ZAHN ALTERNATE	1 00	X						0	0	0
ANDREW ZIMMERMAN ALTERNATE	1 00	X						0	0	0
DAVID WHITE NATIONAL EXECUTIVE DIRECTO	40 00			X				677,294	0	199,802
ARIANNA OZZANTO CHIEF FINANCIAL OFFICER	40 00			X				353,079	0	104,159
DUNCAN CRABTREE-IRELAND CHIEF OPERATING OFFICER / GENERAL COUNSEL	40 00				X			360,025	0	106,207
RAY RODRIGUEZ CHIEF CONTRACTS OFFICER	40 00				X			344,773	0	101,708
MATHIS DUNN JR ASSOCIATE NATIONAL EXECUTIVE DIRECTOR	40 00				X			331,053	0	97,661
PAMELA GREENWALT CHIEF COMMUNICATIONS & MARKETING OFFICER	40 00				X			286,811	0	84,609
DAVID VIVIANO CHIEF ECONOMIST	40 00				X			258,106	0	76,141
MARTHA HOLDRIDGE CHIEF HUMAN RESOURCES OFFICER	40 00				X			253,435	0	74,763

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DANIEL INUKAI CHIEF INFORMATION OFFICER	40 00				X			257,686	0	76,018
MARY CAVALLARO CHIEF BROADCAST OFFICER	40 00				X			257,230	0	75,883
KATHY CONNELL SAG AWARDS & NATIONAL PROGRAMMING	40 00				X			253,633	0	74,822
JOHN MCGUIRE SENIOR ADVISOR	24 00				X			201,288	0	59,380
JEFF BENNETT EXEC DIRECTOR, NY LOCAL & CHIEF DEPUTY GENERAL CO	40 00					X		257,256	0	75,890
RICHARD LARKIN ASSOC EXECUTIVE DIRECTOR/LABOR COUNSEL	40 00					X		267,004	0	78,767
BRAD KEENAN EXEC DIRECTOR, CONTRACT ADMINISTRATION & ENFORCEMENT	40 00					X		263,089	0	77,611
MICHELLE BENNETT EXECUTIVE DIRECTOR, GOVERNANCE	40 00					X		219,941	0	64,883
DEBORAH SKELLY SENIOR DEPUTY GENERAL COUNSEL	40 00					X		210,970	0	62,236

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

2017

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) organizations Complete Part III

Name of the organization SCREEN ACTORS GUILD-AMERICAN FEDERATION OF TELEVISION AND RADIO ARTISTS	Employer identification number 45-4931719
--	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$
- 3 Volunteer hours for political campaign activities (see instructions) ▶

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$
- 3 Total exempt function 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 year? ☐ Yes ☐ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(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				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)**(a)** Filing
organization's
totals**(b)** Affiliated
group totals

1a Total lobbying expenditures to influence public opinion (grass roots lobbying)

b Total lobbying expenditures to influence a legislative body (direct lobbying)

c Total lobbying expenditures (add lines 1a and 1b)

d Other exempt purpose expenditures

e Total exempt purpose expenditures (add lines 1c and 1d)

f Lobbying nontaxable amount Enter the amount from the following table in both columns

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

g Grassroots nontaxable amount (enter 25% of line 1f)

h Subtract line 1g from line 1a If zero or less, enter -0-

i Subtract line 1f from line 1c If zero or less, enter -0-

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

☐ **Yes** ☐ **No****4-Year Averaging Period Under section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

		(a)		(b)
		Yes	No	Amount
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	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total. Add lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1 Yes	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	No
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	No

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
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As Filed Data -

DLN: 93493073016569

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

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

2017

Open to Public Inspection

Name of the organization
SCREEN ACTORS GUILD-AMERICAN FEDERATION
OF TELEVISION AND RADIO ARTISTS

Employer identification number
45-4931719

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

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

(a) Donor advised funds

(b) Funds and other accounts

5

Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

Yes

No

6

Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Yes

No

Part II

Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐

Preservation of land for public use (e g , recreation or education)

☐

Protection of natural habitat

☐

Preservation of open space

☐

Preservation of an historically important land area

☐

Preservation of a certified historic structure

2

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

2a

Total number of conservation easements

2b

Total acreage restricted by conservation easements

2c

Number of conservation easements on a certified historic structure included in (a)

2d

Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4

Number of states where property subject to conservation easement is located ►

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes

No

6

Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►

7

Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes

No

9

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other 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 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

1b

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, 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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a

Revenue included on Form 990, Part VIII, line 1

► \$

b

Assets included in Form 990, Part X

► \$

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

Cat No 52283D

Schedule D (Form 990) 2017

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☒ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☒ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

☒

Part V

Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

b

Permanent endowment

c

Temporarily restricted endowment

The percentages on lines 2a, 2b, and 2c should equal 100%

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

(ii) related organizations

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		112,942		112,942
b Buildings				
c Leasehold improvements		13,227,981	7,687,387	5,540,594
d Equipment		31,723,798	25,211,732	6,512,066
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				12,165,602

Part VII

Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 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 Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶		

Part VIII

Investments—Program Related.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶		

Part IX

Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1) ADVANCES AND DEPOSITS	118,035
(2) FUNDS HELD IN TRUST	201,155,138
(3) DEFERRED RENT RECEIVABLE	924,207
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ▶	202,197,380

Part X

Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f.
See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
DEFERRED RENT	12,590,950
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	12,590,950

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

☒

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	
	Schedule D (Form 990) 2017

Part XIII **Supplemental Information** *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 45-4931719
Name: SCREEN ACTORS GUILD-AMERICAN FEDERATION
OF TELEVISION AND RADIO ARTISTS

Supplemental Information

Return Reference	Explanation
PART IV, LINE 2B	PRODUCERS' PRODUCTION AND RESIDUAL DEPOSITS ARE HELD IN TRUST TO ENSURE PAYMENT OF PERFORMERS SALARIES AND RESIDUALS PERFORMERS' RESIDUAL PAYMENTS, SETTLEMENTS AND FOREIGN ROYALTIES ARE HELD IN TRUST PENDING DISTRIBUTION TO PERFORMERS

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	THE UNION IS INTENDED TO QUALIFY PURSUANT TO SECTION 501(C)(5) OF THE INTERNAL REVENUE CODE, AND ACCORDINGLY, THE UNION'S NET CHANGE IN UNRESTRICTED ASSETS IS EXEMPT FROM INCOME TAXES. MANAGEMENT BELIEVES THAT UNION CONTINUES TO QUALIFY AND TO OPERATE IN ACCORDANCE WITH APPLICABLE PROVISIONS OF THE INTERNAL REVENUE CODE. ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA REQUIRE UNION MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN BY THE UNION AND RECOGNIZE A TAX LIABILITY (OR ASSET) IF THE UNION HAS TAKEN AN UNCERTAIN POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINATION BY THE INTERNAL REVENUE SERVICE. UNION MANAGEMENT HAS ANALYZED THE TAX POSITIONS BY THE UNION, AND HAS CONCLUDED THAT AS OF APRIL 30, 2018, THERE ARE NO UNCERTAIN POSITIONS TAKEN OR EXPECTED TO BE TAKEN THAT WOULD REQUIRE RECOGNITION OF A LIABILITY (OR ASSET) OR DISCLOSURE IN THE FINANCIAL STATEMENTS. THE TAX YEARS THAT REMAIN SUBJECT TO EXAMINATION BY THE IRS ARE THE YEARS ENDED APRIL 30, 2015 THROUGH APRIL 30, 2018 AND BY THE CALIFORNIA FRANCHISE TAX BOARD ARE THE YEARS ENDED APRIL 30, 2014 THROUGH APRIL 30, 2018. THE UNION IS SUBJECT TO ROUTINE AUDITS BY TAXING JURISDICTIONS, HOWEVER, THERE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS IN PROGRESS.

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	GRANTS NETTED IN AWARD SHOW -413,085

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	CONVENTION INCOME NETTED IN EXPENSES 6,759 ADVERTISING INCOME NETTED IN EXPENSES 445,750 SAG MAGAZINE INCOME NETTED IN EXPENSES 51,500

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	GRANT NETTED IN AWARD SHOW -413,085

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS	ADVERTISING INCOME NETTED IN EXPENSES 445,750 SAG MAGAZINE INCOME NETTED IN EXPENSES 51,500 CONVENTION INCOME NETTED IN EXPENSES 6,759

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990.

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

OMB No 1545-0047

2017

**Open to Public
Inspection**

Name of the organization

SCREEN ACTORS GUILD-AMERICAN FEDERATION
OF TELEVISION AND RADIO ARTISTS

Employer identification number

45-4931719

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☒ No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,	0	0	INVESTMENTS	N/A	4,909,212
(2)					
(3)					
(4)					
(5)					
3a Sub-total	0	0			4,909,212
b Total from continuation sheets to Part I					0
c Totals (add lines 3a and 3b)	0	0			4,909,212

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			NORTH AMERICA	GENERAL ASSISTANCE	25,000				
(2)			NORTH AMERICA	GENERAL ASSISTANCE	8,500				
(3)			NORTH AMERICA	GENERAL ASSISTANCE	8,000				
(4)									

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 3
- 3 Enter total number of other organizations or entities 3

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☐ Yes ☒ No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)* ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)* ☐ Yes ☒ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☐ Yes ☒ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)* ☐ Yes ☒ No

Part V **Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

ReturnReference	Explanation

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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.

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

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
SCREEN ACTORS GUILD-AMERICAN FEDERATION
OF TELEVISION AND RADIO ARTISTS

Employer identification number
45-4931719

Part I

General Information 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?

☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

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

(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) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 20

3 Enter total number of other organizations listed in the line 1 table 3

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2	THE FINANCIAL SUPPORT LISTED ON SCHEDULE I PART II WERE PAID IN THE FORM OF SPONSORSHIPS TO THE NAMED ORGANIZATIONS

Additional Data

Software ID:
Software Version:
EIN: 45-4931719
Name: SCREEN ACTORS GUILD-AMERICAN FEDERATION
OF TELEVISION AND RADIO ARTISTS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(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 non-cash assistance	(h) Purpose of grant or assistance
SAG-AFTRA FOUNDATION 5757 WILSHIRE BLVD PH1 LOS ANGELES, CA 90036	95-3967876	501(C)(3)	468,085				GENERAL ASSISTANCE
KAPOR CENTER FOR SOCIAL IMPACT 2148 BROADWAY OAKLAND, CA 90036	94-3330604	501(C)(3)	100,000				GENERAL ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
MUSICARES FOUNDATION 3030 OLYMPIC BLVD SANTA MONICA, CA 90404	95-4470909	501(C)(3)	25,000				GENERAL ASSISTANCE
THE ACTORS FUND 5757 WILSHIRE BLVD STE 400 LOS ANGELES, CA 90036	13-1635251	501(C)(3)	15,800				GENERAL ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
ENTERTAINMENT INDUSTRY COLLEGE OUTREACH PROGRAM 2321 W OLIVE AVE SUITE F BURBANK, CA 91506	47-5470616	501(C)(3)	15,000				GENERAL ASSISTANCE
THE RECORDING ACADEMY 3030 OLYMPIC BLVD SANTA MONICA, CA 90404	95-6052058	501(C)(6)	12,600				GENERAL ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
ASIAN AMERICAN JOURNALISTS ASSOCIATION 5 THIRD ST STE 1108 SANTA MONICA, CA 90404	95-3755203	501(C)(3)	12,500				GENERAL ASSISTANCE
THE BLACKHOUSE FOUNDATION 1875 CENTURY PARK EAST SUITE 600 LOS ANGELES, CA 90067	26-3530135	501(C)(3)	10,000				GENERAL ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
NEWFILMMAKERS LOS ANGELES 438 N GOWER ST BOX 83 BLDG 42 STE 103 HOLLYWOOD, CA 90028	26-4286940	501(C)(3)	10,000				GENERAL ASSISTANCE
THE INNER CIRCLE INC ROOM-9 CITY HALL NEW YORK, NY 10007	13-3360989	501(C)(3)	9,000				GENERAL ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
WOMEN IN FILM 701 WILSHIRE BLVD SUITE 1000 BEVERLY HILLS, CA 90212	23-7322834	501(C)(3)	8,500				GENERAL ASSISTANCE
LAANE 464 LUCAS AVE SUITE 202 LOS ANGELES, CA 90017	95-4459427	501(C)(3)	8,350				GENERAL ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
DIAMOND IN THE RAW FOUNDATION 10736 JEFFERSON BLVD 464 CULVER CITY, CA 90230	26-1477741	501(C)(3)	7,500				GENERAL ASSISTANCE
NATIONAL HISPANIC MEDIA COALITION 55 S GRAND AVE PASADENA, CA 91105	95-4111353	501(C)(3)	7,000				GENERAL ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
MUSEUM OF THE MOVING IMAGE 162 W 56TH ST STE 405 NEW YORK, NY 10019	11-2730714	501(C)(3)	6,000				GENERAL ASSISTANCE
NATIONAL LESBIAN & GAY JOURNALISTS ASSOC 2120 L STREET NW NO 850 WASHINGTON, DC 20037	94-3177380	501(C)(3)	5,000				GENERAL ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
SOCIETY OF PROFESSIONAL JOURNALISTS GREATER LOS ANGELES 3909 N MERIDIAN ST INDIANAPOLIS, IN 46208	95-6119058	501(C)(6)	5,000				GENERAL ASSISTANCE
AUTISM SOCIETY OF AMERICA INC 4340 EAST-WEST HWY SUITE 350 BETHESDA, MD 20814	52-1020149	501(C)(3)	5,000				GENERAL ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
TELEVISION ACADEMY 5220 LANKERSHIM BLVD NORTH HOLLYWOOD, CA 91601	95-3130853	501(C)(6)	5,000				GENERAL ASSISTANCE
TRIBECA FILM FESTIVAL NYC LLC 375 GREENWICH STREET NEW YORK, NY 10013	80-0006057	501(C)(3)	5,000				GENERAL ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
EASTER SEALS SOUTHERN CALIFORNIA INC 1570 E 17TH STREET SANTA ANA, CA 92705	94-3068149	501(C)(3)	5,000				GENERAL ASSISTANCE
NATIONAL HISPANIC FOUNDATION FOR THE ARTS 1050 CONNECTICUT AVE NW/5TH FLR WASHINGTON, DC 20036	52-2055110	501(C)(3)	5,000				GENERAL ASSISTANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(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 non-cash assistance	(h) Purpose of grant or assistance
NALIP 3415 SEPULVEDA BLVD 1100 LOS ANGELES, CA 90034	13-4198479	501(C)(3)	5,000				GENERAL ASSISTANCE

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**
- ▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
▶ **Attach to Form 990.**
- ▶ **Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.**

Name of the organization
SCREEN ACTORS GUILD-AMERICAN FEDERATION
OF TELEVISION AND RADIO ARTISTS

Employer identification number
45-4931719

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| ☒ First-class or charter travel | ☐ Housing allowance or residence for personal use |
| ☐ Travel for companions | ☐ Payments for business use of personal residence |
| ☐ Tax indemnification and gross-up payments | ☐ Health or social club dues or initiation fees |
| ☐ Discretionary spending account | ☐ Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| ☐ Compensation committee | ☒ Written employment contract |
| ☐ Independent compensation consultant | ☐ Compensation survey or study |
| ☐ Form 990 of other organizations | ☒ Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

a Receive a severance payment or change-of-control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a The organization?

b Any related organization?

If "Yes," on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a The organization?

b Any related organization?

If "Yes," on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b Yes

2 Yes

4a No

4b No

4c No

5a

5b

6a

6b

7

8

9

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

See Additional Data Table**Schedule J (Form 990) 2017**

Part III **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 3	OTHER REPORTABLE COMPENSATION MAY ALSO INCLUDE PAYOUT OF UNUSED VACATION PAY, WHICH WOULD BE INCLUDED IN TAXABLE COMPENSATION

Additional Data

Software ID:
Software Version:
EIN: 45-4931719
Name: SCREEN ACTORS GUILD-AMERICAN FEDERATION
OF TELEVISION AND RADIO ARTISTS

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1DAVID WHITE NATIONAL EXECUTIVE DIRECTO	(i)	614,133	25,291	37,870	80,869	118,933	877,096	0
	(ii)	0	0	0	0	0	0	0
1ARIANNA OZZANTO CHIEF FINANCIAL OFFICER	(i)	282,864	12,673	57,542	42,158	62,001	457,238	0
	(ii)	0	0	0	0	0	0	0
2DUNCAN CRABTREE-IRELAND CHIEF OPERATING OFFICER / GENERAL CO	(i)	319,151	14,638	26,236	42,987	63,220	466,232	0
	(ii)	0	0	0	0	0	0	0
3RAY RODRIGUEZ CHIEF CONTRACTS OFFICER	(i)	324,379	14,540	5,854	41,166	60,542	446,481	0
	(ii)	0	0	0	0	0	0	0
4MATHIS DUNN JR ASSOCIATE NATIONAL EXECUTIVE DIRECTO	(i)	321,440	9,613	0	26,451	71,210	428,714	0
	(ii)	0	0	0	0	0	0	0
5PAMELA GREENWALT CHIEF COMMUNICATIONS & MARKETING OFF	(i)	266,864	12,035	7,912	34,245	50,364	371,420	0
	(ii)	0	0	0	0	0	0	0
6DAVID VIVIANO CHIEF ECONOMIST	(i)	238,414	10,705	8,987	30,818	45,323	334,247	0
	(ii)	0	0	0	0	0	0	0
7MARTHA HOLDRIDGE CHIEF HUMAN RESOURCES OFFICER	(i)	253,435	0	0	30,260	44,503	328,198	0
	(ii)	0	0	0	0	0	0	0
8DANIEL INUKAI CHIEF INFORMATION OFFICER	(i)	238,660	11,052	7,974	30,768	45,250	333,704	0
	(ii)	0	0	0	0	0	0	0
9MARY CAVALLARO CHIEF BROADCAST OFFICER	(i)	246,179	11,051	0	20,553	55,330	333,113	0
	(ii)	0	0	0	0	0	0	0
10KATHY CONNELL SAG AWARDS & NATIONAL PROGRAMMING	(i)	230,894	10,445	12,294	30,284	44,538	328,455	0
	(ii)	0	0	0	0	0	0	0
11JOHN MCGUIRE SENIOR ADVISOR	(i)	190,959	3,810	6,519	24,034	35,346	260,668	0
	(ii)	0	0	0	0	0	0	0
12JEFF BENNETT EXEC DIRECTOR, NY LOCAL & CHIEF DEP	(i)	240,545	4,803	11,908	30,716	45,174	333,146	0
	(ii)	0	0	0	0	0	0	0
13RICHARD LARKIN ASSOC EXECUTIVE DIRECTOR/LABOR COUN	(i)	242,214	16,801	7,989	21,334	57,433	345,771	0
	(ii)	0	0	0	0	0	0	0
14BRAD KEENAN EXEC DIRECTOR, CONTRACT ADMINISTRAT	(i)	252,209	10,880	0	31,413	46,198	340,700	0
	(ii)	0	0	0	0	0	0	0
15MICHELLE BENNETT EXECUTIVE DIRECTOR, GOVERNANCE	(i)	195,553	5,902	18,486	26,261	38,622	284,824	0
	(ii)	0	0	0	0	0	0	0
16DEBORAH SKELLY SENIOR DEPUTY GENERAL COUNSEL	(i)	204,853	6,117	0	25,190	37,046	273,206	0
	(ii)	0	0	0	0	0	0	0

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93493073016569	
SCHEDULE O (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service		Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. ► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.			OMB No 1545-0047 2017 Open to Public Inspection
Name of the organization SCREEN ACTORS GUILD-AMERICAN FEDERATION OF TELEVISION AND RADIO ARTISTS				Employer identification number 45-4931719	

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION	(A) INCREASING THE POWER AND LEVERAGE OF OUR MEMBERS IN THEIR BARGAINING RELATIONSHIPS WITH THE EMPLOYERS IN OUR INDUSTRIES, (B) ORGANIZING WORKERS IN THE ENTERTAINMENT AND MEDIA INDUSTRIES IN ORDER TO MAXIMIZE OUR BARGAINING STRENGTH, (C) INCREASING OUR POWER IN DEALING WITH THE VARIOUS GOVERNMENTAL BODIES THAT ADDRESS THE SIGNIFICANT PUBLIC POLICY ISSUES CONFRONTING OUR MEMBERS, (D) PROTECTING AND SECURING THE RIGHTS OF OUR MEMBERS IN THEIR PROFESSIONAL ACTIVITIES, INCLUDING SECURING MEANINGFUL LEGISLATION AND REGULATIONS ON MATTERS AFFECTING THEIR WORK AND TAKING APPROPRIATE PROTECTIVE ACTION IN RESPONSE TO THE UNAUTHORIZED USE OF THEIR WORK, (E) COOPERATING, COORDINATING AND COMBINING WITH OTHER ORGANIZATIONS WHOSE OBJECTIVES INCLUDE THE ADVANCEMENT AND IMPROVEMENT OF MEMBERS' COMPENSATION AND WORKING CONDITIONS WHENEVER SUCH ACTION IS IN THE BEST INTEREST OF OUR MEMBERS, (F) ESTABLISHING, CONDUCTING, SPONSORING AND MAINTAINING SUCH EDUCATIONAL, RECREATIONAL, SOCIAL AND CHARITABLE ENTERPRISES AS MAY ASSIST OUR MEMBERS AND AID IN THEIR GENERAL WELFARE, (G) RECEIVING, ADMINISTERING AND EXPENDING THE UNION'S FUND IN THE INTERESTS OF OUR MEMBERS, (H) COLLECTING AND DISTRIBUTING GOVERNMENT MANDATED OR OTHER COMPULSORY ROYALTIES, FEES OF REMUNERATION SUBJECT TO WORLDWIDE COLLECTIVE ADMINISTRATION, (I) WITHOUT LIMITATION, PROTECTING THE RIGHTS OF ENTERTAINMENT AND MEDIA ARTISTS IN ALL OTHER ASPECTS CONSISTENT WITH THE OVERALL OBJECTIVES OF THE UNION AND DOING ALL THINGS NECESSARY AND PROPER TO ADVANCE AND PROMOTE THEIR WELFARE AND INTERESTS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE ORGANIZATION HAS MEMBERS DIVIDED INTO THE FOLLOWING CATEGORIES OF MEMBERSHIP STATUS A CTIVE, HONORABLE WITHDRAWAL, PAYMENTS PENDING AND SUSPENDED PAYMENT

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	THE NATIONAL BOARD OF DIRECTORS IS THE HIGHEST POLICY BODY OF THE ORGANIZATION IT IS ELECTED BY THE MEMBERSHIP

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	APPROVAL OF CERTAIN ISSUES MAY BE REFERRED TO EITHER THE MEMBERSHIP FOR A REFERENDUM VOTE OR TO A BIENNIAL NATIONAL CONVENTION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE CFO AND CONTROLLER REVIEW THE 990 FOR MISSTATEMENTS OR ERRORS AND THE AMOUNTS REPORTED ARE COMPARED TO THE AUDITED FINANCIALS THE 990 IS DISTRIBUTED TO THE FINANCE COMMITTEE FOR DISCUSSION AND REVIEW THE FORM IS ALSO AVAILABLE UPON REQUEST TO ANY BOARD MEMBER

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	SAG-AFTRA ENFORCES ITS CONFLICT OF INTEREST POLICIES IN CONNECTION WITH THE FILING OF LABO R-MANAGEMENT REPORTS OF CONFLICTS OF INTEREST REQUIRED ANNUALLY OF OFFICERS, DIRECTORS, AN D EMPLOYEES BY FEDERAL LAW, AS WELL AS THROUGH REGULAR MONITORING OF REPORTS OF POTENTIAL CONFLICTS OF INTEREST THROUGH THE PEOPLE AND CULTURE (I E HUMAN RESOURCES) DEPARTMENT

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	A COMMITTEE COMPOSED OF NATIONAL BOARD MEMBERS REVIEWS AND COMPARES THE NATIONAL EXECUTIVE DIRECTOR'S COMPENSATION WITH COMPENSATION FOR COMPARABLE POSITIONS, AND MAKES A RECOMMENDATION TO THE FULL BOARD FOR APPROVAL THE ULTIMATE AUTHORITY RESIDES WITH THE NATIONAL BOARD

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 18	THE ORGANIZATION'S FORM 990 MAY ALSO BE INSPECTED ON WWW GUIDESTAR ORG

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	UPON REQUEST, THESE DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VII, SECTION A	ALTERNATE BOARD MEMBERS HAVE VOTING RIGHTS UPON BEING ASKED TO ATTEND A NATIONAL BOARD MEETING ON BEHALF OF A NATIONAL BOARD MEMBER ACCORDINGLY, THE ORGANIZATION IS REPORTING THE NAMES OF ALTERNATE BOARD MEMBERS WHO WERE CALLED TO SERVE IN PLACE OF NATIONAL BOARD MEMBERS AT ANY TIME DURING THE TAX YEAR

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
► Attach to Form 990.
► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
SCREEN ACTORS GUILD-AMERICAN FEDERATION
OF TELEVISION AND RADIO ARTISTS

Employer identification number
45-4931719

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) SCREEN ACTORS GUILD AWARDS LLC 5757 WILSHIRE BOULEVARD 7TH FLOOR LOS ANGELES, CA 90036 26-1703514	AWARDS SHOW PRESENTATION	CA	3,717,768	26,871,709	SAG-AFTRA
(2) GUILD INTELLECTUAL PROPERTY REALIZATION LLC 5757 WILSHIRE BOULEVARD 7TH FLOOR LOS ANGELES, CA 90036 27-0902453	RECOVER ASSIGNED DEBTS AND DISBURSE SUMS OWED TO MEMBERS	CA	-1,109	273,538	SAG-AFTRA
(3) SAG-AFTRA REAL PROPERTY HOLDINGS LLC 5757 WILSHIRE BOULEVARD 7TH FLOOR LOS ANGELES, CA 90036 36-4797722	HOLD AND OPERATE REAL ESTATE ON BEHALF OF SAG-AFTRA	DE	-12,216	121,534	SAG-AFTRA

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)AFTRA INDIVIDUAL ACCOUNT PLAN 260 MADISON AVE NEW YORK, NY 10016 13-4048801	DEFINED CONTRIBUTION PROFIT SHARING PLAN	NY	401				No
(2)SAG-AFTRA 401(K) RETIREMENT PLAN 5757 WILSHIRE BOULEVARD 7TH FLOOR LOS ANGELES, CA 90036 95-1202270	PROVIDES RETIREMENT BENEFITS	CA	401				No

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	No
b Gift, grant, or capital contribution to related organization(s)	1b Yes	
c Gift, grant, or capital contribution from related organization(s)	1c	No
d Loans or loan guarantees to or for related organization(s)	1d	No
e Loans or loan guarantees by related organization(s)	1e	No
f Dividends from related organization(s)	1f	No
g Sale of assets to related organization(s)	1g	No
h Purchase of assets from related organization(s)	1h	No
i Exchange of assets with related organization(s)	1i	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k Lease of facilities, equipment, or other assets from related organization(s)	1k	No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n Yes	
o Sharing of paid employees with related organization(s)	1o	No
p Reimbursement paid to related organization(s) for expenses	1p	No
q Reimbursement paid by related organization(s) for expenses	1q	No
r Other transfer of cash or property to related organization(s)	1r Yes	
s Other transfer of cash or property from related organization(s)	1s	No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)SAG-AFTRA 401(K) RETIREMENT PLAN	R	300,087	EMPLOYEE CONTRIBUTIONS TO 401(K)
(2)SAG-AFTRA 401(K) RETIREMENT PLAN	R	35,000	RETIREMENT PLAN ADMIN FEES

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)