2949341000003

Return of Organization Exempt From Income Tax

OMB No. 1545-0047 2018

Department of the Treasury

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

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

Open to Public

11(8)		ne Selvice		gov/romaso for misu uction	3 6110 1010 1010	st iiiiOiiiiatiOii.		IIIspec	don					
A_	For the		endar year, or tax year beginnin		, 2018, and end	ding Dece	mber 31	, 20 18						
В	Check if	applicable.	C Name of organization Florida Al	liance for Civic Engagement	t, Inc.		D Employ	er identification r	number					
₹	Address	change	Doing business as				1	46-4874864						
	Name ch	nange	Number and street (or P.O. box if	mail is not delivered to street addr	ess) Room/	/suite	E Telepho	ne number						
	Initial reti	um	542 NE 72nd St.		İ		1							
	Final retur	m/terminated	City or town, state or province, co											
J	Amended	d return	Miami, FL 33138				G Gross re	eceipts \$	2,760,349					
ī				cer Christopher Findlater		H(a) is this a		subordinates? Ye						
_	·		542 NE 72nd St, Miami, FL 331		~′	a 1		s Included? Ye						
	Tax-exer	mpt status	✓ 501(c)(3) □ 501(c)		(a)(1) or \(\bigcup_{528} \)			a list. (see instructi						
J Website: ►														
· ·			Corporation Trust Assoc	lation ☐ Other ▶	L Year of form			of legal domicile:	FL					
Р	art I	Summ				2014	110 01010	0,1032	<u> </u>					
			escribe the organization's mis	sion or most significant ac	tivities: Impr	ovina commu	nication s	trategic planni	ng and					
Ф														
Activities & Governance	1	sharing of tools among 501(c)(3) organizations working to further civic participation; improving the ability of 501(c)(3) organizations to communicate effectively about civic issues; increasing resources for charitable community organizations.												
Ĕ	2		is box ► if the organization											
ove.							1 -	115 1161 25615. 						
Ġ			of voting members of the gov					<u> </u>	3					
ş	1		of independent voting member			D)	4	<u> </u>	3					
ij	4		mber of individuals employed	· ·	t v, line 2a)		. 5		0					
ਰਿ	4		mber of volunteers (estimate i	•••			. 6		0					
⋖	•		elated business revenue from				. <u>7a</u>							
	b	Net unre	lated business taxable incom-				. 7b		 					
Revenue				I RECEIVED)	Prior Y	ear	Current Y	ear					
			tions and grants (Part VIII, line		154,000		2,760,349							
	9	Program	service revenue (Part VIII, line	P(0)										
ě	10	Investme	ent income (Part VIII, column (A) Lines 34 #, Manua 2001/U19										
_			venue (Part VIII, column (A), Iir											
	12	Total reve	enue-add lines 8 through 11	must equal Part VIII colum	m (A), lihe 12)		154,000		2,760,349					
	13	Grants a	nd similar amounts paid (Part	(X-columnication)					921,000					
	14	Benefits	paid to or for members (Part	IX, column (A), line 4) .	<i>.</i>									
Š	15	Salaries,	other compensation, employee	benefits (Part IX, column (A), lines 5–10)		81,533		31,500					
nge ng	16a	Profession	onal fundraising fees (Part IX,	column (A), line 11e) .										
Expenses	b	Total fun	draising expenses (Part IX, co	olumn (D), line 25) ▶										
Ŋ	17	Other ex	penses (Part IX, column (A), li	nes 11a-11d, 11f-24e)			633		1,283,390					
	18	Total exp	penses. Add lines 13-17 (mus	t equal Part IX, column (A)	, line 25) .		82,166		2,235,890					
			less expenses. Subtract line				71.834	î	524,459					
5 %		···········		·	-·····································	Beginning of C	urrent Year	End of Y						
Net Assets Fund Balanc	20	Total ass	sets (Part X, line 16)				83,694		608,153					
2 8 2 8	21	Total liab	pilities (Part X, line 26)					1						
<u> </u>	22		ts or fund balances. Subtract	line 21 from line 20 .			83,694		608,153					
	art II	Signat	ture Block			· * · · · · · · · · · · · · · · · · · ·		·						
			iry, I declare that I have examined this	return, including accompanying	schedules and sta	atements, and to	the best of	my knowledge an	d belief, it is					
			lete. Declaration of preparer (other tha											
			anh 219-											
Się	gn	Sign	nature of officer	7.	100	D	ate	/ /						
He	re		Larla E'Me-	yer Direc	_tv V		9	14/2	017					
		Туре	e or print name and title	 				1						
<u> </u>	. !!	Print/Ty	pe preparer's name	Preparer's signature		Date	Ob I	PTIN						
	aid	_			l		Check self-em							
	epare		name >		 	T E.,	m's EIN ▶	·						
US	se Onl	<i>y</i>	address >				one no.							
VI a	v the IR		s this return with the preparer	shown above? (see instru	ctions)	l Fin	one no.	ΠVa	s 🗆 No					
_			iction Act Notice, see the separ				• • • •		990 ,(2018)					
υľ	raperw	TOIR MOUU	iction Act Notice, see the Separ	are merructions.	Cat	t. No. 11282Y		rofm	(2018)					

021

Form 99	0 (2018) Page 2
Part	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Improving communication, strategic planning and sharing of tools among 501(c)(3) organizations working to further civic
	participation; improving the ability of 501(c)(3) organizations to communicate effectively about civic issues; increasing resources for
	charitable community organizations to ensure every eligible American votes.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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?
4	If "Yes," describe these changes on Schedule O.
•	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 \$ 921,000 including grants of \$ 921,000) (Revenue \$)
	Florida Alliance for Civic Engagement made grants to other IRC section 501(c)(3) public charities organizations to perform
	nonpartisan voter registration and civic engagement efforts.
4b	(Code:) (Expenses \$ 938,619 including grants of \$) (Revenue \$)
40	(Code:) (Expenses \$ 938,619 including grants of \$) (Revenue \$) Florida Alliance for Civic Engagement conducted an extensive mail, paid phone, radio and online advertising program to
	educate the public on issues being debated in the state and increasing awareness of the actions of government officials at the
	state level.
4c	(Code:) (Expenses \$ 247,019 including grants of \$) (Revenue \$)
	Florida Alliance for Civic Engagement conducted an extensive nonpartisan paid phone & mail follow up program to remind Floridians
	to return their vote by mail ballots.

	90 (2018)	• • •		Page 3
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	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	_
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		1
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	1	
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			1
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			1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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			✓
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
8	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		1
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		1
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		1
d e	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		1
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			1
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
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		1
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a	<u> </u>	√
b b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,		 	<u> </u>
	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			1
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		1
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		1
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		1
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		1
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		1
20 a b	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a 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? If "Yes," complete Schedule I, Parts I and II		1	

Part	Checklist of Required Schedules (continued)			-30
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.	23		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		✓
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? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part II	26		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	201		
С	Schedule L, Part IV	28b		✓
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		\
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		✓
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line</i> 2	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? If "Yes," complete Schedule R, Part VI	37		1
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	1	
Part				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	 ;	
_			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 9	1 .		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	- 1c		√ -

Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
_	Fater the number of employees reported on Form W/2. Transmitted of West, and Tay		Yes	No
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 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?.	2b		
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20		
20	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		7
3a 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		 •
	·	3D		
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		✓
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		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
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			
b	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
_	gifts were not tax deductible?	6ь		ĺ
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		1
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		-
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	- 75		<u> </u>
C	required to file Form 8282?	7c		/
d	If "Yes," indicate the number of Forms 8282 filed during the year			r <u> </u>
8	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		7
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7 1		7
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		Ť
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		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			İ
а	Initiation fees and capital contributions included on Part VIII, line 12	}		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]			ŀ
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	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.			<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which			ľ
	the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		√
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		1
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		✓
	If "Yes," complete Form 4720, Schedule O.			

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response or note to any line in this Part VI	See ins	struct	ions.
Secti	on A. Governing Body and Management		::	· _ L
00011	on A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			1.1.0
	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			
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		✓
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		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1
6	Did the organization have members or stockholders?	6		1
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		1
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		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	✓	L
b	Each committee with authority to act on behalf of the governing body?	8b		
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		✓
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co	_	
			Yes	No
_10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
	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		ļ
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	ļ.,
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	100		
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	ļ	✓
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			ļ
42	describe in Schedule O how this was done	12c	ļ	
13 14	Did the organization have a written whistleblower policy?	13	<u> </u>	1
15	Did the process for determining compensation of the following persons include a review and approval by	17		•
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		1
b	Other officers or key employees of the organization	15b		1
	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	_	✓
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	L	L
	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed None	 	*ic=- 1	-04/ `
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-7 (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 int financial statements available to the public during the tax year.		_	, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords		
	Tessa Bay: 542 NE 72nd St.: Miami. FL 33138: 202-999-8482			

Form	aan	(8105)	
CULLER	ฮฮบ	1211781	

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

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

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

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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.										, or trustee.	
(A) Name and Title	(B) Average hours per week (list any	box, office	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			an t ee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other		
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) Carlos Odio	25			/				24 500	0		•
Executive Director	1			┡	\vdash	 -	╁	31,500			_0
(2) Carla E. Meyer Director	 	1						۱ ،	0		0
(3) Charatanhas Findleton	1	├ `	┢╌	 				ļ <u>.</u>			
Treasurer/Director	† <u>-</u>	1		1	1			۱ ،	0		0
(4) Francene Rodgers	1	<u> </u>		Ť			T	<u> </u>		······································	<u> </u>
Director	<u> </u>	1			ŀ		1	١٠	o		0
(5)											
(6)											
(7)											
(8)											
(9)											
(10)											_
(11)											
(12)											
(13)											
(14)											

	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	do x, do directo	ot ch	Pos neck ss pe	c) ition more	an other Highest compensated	one an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportab compensation related organizatic (W-2/1099-N	le n from	Esti ame comp fro orga and	(F) mated punt of ther ensatio m the nizatior related alization	7 }
(15)								-						
(16)								-				_ _		
(17)														<u></u> -
(18)														
			 							•				<u></u>
										·				
(21)														
(22)														
(23)														
(24)												·		
(25)					-									
1b c d	Sub-total	VII, Sectio	n A	•	•	 	•	► ► • W	31,500		0,00	0 of		0
	reportable compensation from the organi								0				Yes	l Ma
3	Did the organization list any former of employee on line 1a? If "Yes," complete 5	Schedule J	for su	ıch	indi	vid	Jaľ					3	Yes	No √
4	For any individual listed on line 1a, is the organization and related organizations individual		an \$1	50,	000	? /:	f "Ye	s, "						1
5	Did any person listed on line 1a receive of for services rendered to the organization											al		1
	on B. Independent Contractors		1 1								- 610			
1	Complete this table for your five highest compensation from the organization. Repyear.											ganizatio		ax
	(A) Name and business add	ress							(B) Description of s	ervices		(C) Compens	ation	
None														
	 						· · · · · ·	-		···				
2	Total number of independent contractor received more than \$100,000 of compens							th	nose listed abo	ove) who				

Par	VIII										
		Check if Schedule O contains a response or note to	o any line in this (A) Total revenue	Part VIII (B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514					
拉勒	1a	Federated campaigns 1a									
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership dues 1b									
, G	C	Fundraising events 1c			l						
ir A	d	Related organizations 1d	i								
n iia	e	Government grants (contributions) 1e									
ons Sir	f	All other contributions, gifts, grants,									
uti He	•	and similar amounts was instituted above.			ŀ						
문항	_	11 2,100,040			<u> </u>						
P P	9	Noncash contributions included in lines 1a–1f: \$									
	h	Total. Add lines 1a-1f ▶	2,760,349			 					
1	_	Business Code				<u> </u>					
eve	2a					<u></u>					
e R	b										
Ş	C					ļ					
Sei	d					<u> </u>					
Ē	8	,		······································							
Program Service Revenue	f	All other program service revenue .									
<u>-</u>	g	Total. Add lines 2a-2f									
	3	Investment income (including dividends, interest,									
		and other similar amounts) ▶									
	4	Income from investment of tax-exempt bond proceeds ▶			ļ						
	5	Royalties									
		(i) Real (ii) Personal									
	6a	Gross rents			1						
	b	Less: rental expenses			ļ						
	C	Rental income or (loss)									
	d	Net rental income or (loss)									
	7a	Gross amount from sales of (i) Securities (ii) Other									
		assets other than inventory									
	b	Less: cost or other basis									
		and sales expenses .	ľ								
	C	Gain or (loss)									
	d	Net gain or (loss)									
enne	8a	Gross income from fundraising events (not including \$									
Other Reven		of contributions reported on line 1c). See Part IV, line 18 a									
Ę I	b	Less: direct expenses b									
		Net income or (loss) from fundraising events .			· · · · · · · · · · · · · · · · · · ·						
		Gross income from gaming activities. See Part IV, line 19									
	ь	Less: direct expenses b	j								
		Net income or (loss) from gaming activities									
		Gross sales of inventory, less									
		returns and allowances a									
	b	Less: cost of goods sold b									
		Net income or (loss) from sales of inventory			 						
		Miscellaneous Revenue Business Code	· · · · · · · · · · · · · · · · · · ·		 						
	11a			 	 	 					
	b		 		 	<u> </u>					
	C				 	 					
	d	All other revenue		 	 	 					
		Total. Add lines 11a–11d									
	е 12		2 760 240		 	. <u>.</u>					

Part IX Statement of Functional Expenses

Sèction 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									
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to domestic organizations								
_	and domestic governments. See Part IV, line 21	921,000	921,000						
2	Grants and other assistance to domestic individuals. See Part IV, line 22	•							
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16								
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	24 500	17 500	14 000					
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	31,500	17,500	14,000					
7 8	Other salaries and wages								
9	Other employee benefits								
10	Payroll taxes			·					
11	Fees for services (non-employees):								
a	Management	93,575	45,000						
b	Accounting	2,224	1,112 4,524	1,112 4,524					
ď	Lobbying	9,048	4,324	4,524					
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.)	122,500	122,500						
12	Advertising and promotion	5,000		5,000					
13	Office expenses	1,041		1,041					
14	Information technology								
15	Royalties								
16	Occupancy								
17	Travel								
18	Payments of travel or entertainment expenses for any federal, state, or local public officials		•						
19	Conferences, conventions, and meetings .								
20	Interest								
21	Payments to affiliates								
22	Depreciation, depletion, and amortization .	•							
23	Insurance								
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)								
а	Posserch & Polling	38,072	38,072						
b	Online Advertising Program	189,735	189,735						
c	Phone and Mail Program	822,195	822,195						
ď		322,:30	322,.33						
е	All other expenses			•					
25	Total functional expenses. Add lines 1 through 24e	2,235,890	2,161,638	74,252					
26	Joint costs. Complete this line only if the								
	organization reported in column (B) joint costs from a combined educational campaign and		į						
	fundraising solicitation. Check here following SOP 98-2 (ASC 958-720) if following SOP 98-2 (ASC 9								

_	n 990 (2) art X				Page 11
<u>''</u>	art A	Check if Schedule O contains a response or note to any line in this Par	t X		
			(A) Beginning of year		(B) End of year
	1 2	Cash—non-interest-bearing	83,694	1 2	608,153
	3 4	Pledges and grants receivable, net		3 4	
S	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	
Assets	7	Notes and loans receivable, net		7	
Ä	8	Inventories for sale or use	,	8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation 10b	•	10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	····
	13	Investments—program-related. See Part IV, line 11		13	
•	14	Intangible assets	 	14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	83,694		608,153
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		20	
	20 21	Tax-exempt bond liabilities		21	
ch.		Escrow or custodial account liability. Complete Part IV of Schedule D. Loans and other payables to current and former officers, directors,		21	
Liabilities	22	trustees, key employees, highest compensated employees, and			
٩		disqualified persons. Complete Part II of Schedule L		22	· · · · · · · · · · · · · · · · · · ·
Ë	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		25	
	26	Total liabilities. Add lines 17 through 25		26	
ses		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
ă	27	Unrestricted net assets		27	
Bal	28	Temporarily restricted net assets		28	
ᅙ	29	Permanently restricted net assets		29	
Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and □			
Ξ	1	complete lines 30 through 34.			

30

31

32

33

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

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

Retained earnings, endowment, accumulated income, or other funds .

30

31

32

83,694 33

Page	1	2
	_	

					90 12
Part	XI Reconciliation of Net Assets		· - ··		
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	 	2,76	0,349
2	Total expenses (must equal Part IX, column (A), line 25)	2		2,23	5,890
3	Revenue less expenses. Subtract line 2 from line 1	3		52	4,459
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		8	3,694
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		60	8,153
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII	• • • •	· · ·		
	<u> </u>		<u></u>	Yes	No
1	Accounting method used to prepare the Form 990: 🗹 Cash 🔲 Accrual 🔲 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in			
	Schedule O.				لبِ
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	_	2a		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were com	oiled or			
	reviewed on a separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				لب_
b	Were the organization's financial statements audited by an independent accountant?		2b		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ed on a			1
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis		<u> </u>		
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or				
	of the audit, review, or compilation of its financial statements and selection of an independent accou		2c		;
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	plain in			
За	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?		3a		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	rgo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3ь		
			Fort	n 99 0	(2018)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Employer identification number

Florida Alliance for Civic Engagement, Inc. 46-4874864 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(I). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331½% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having b control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) đ that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV. Sections A and D. and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III е functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (Iv) is the organization (vi) Amount of listed in your governing (described on lines 1-10 support (see other support (see document? above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D) (E)

Total

Part	(Complete only if you checked the Part III. If the organization fails to	e box on line	5, 7, or 8 of	Part I or if the	e organizatio	n failed to qu	
Secti	on A. Public Support	quality unde	Tille tests lis	ited below, p	lease comple	ne Fait III.)	
	dar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	— (d) 2017	— (e) 2018—	(f) Total
1	Gifts, grants, contributions, and		(3) -3 -5		(4/2011	(4)	
	membership fees received. (Do not						
	include any "unusual grants.")	121,800	110,000	1,032,000	154,000	2,760,349	4,178,149
2	Tax revenues levied for the		,				
	organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						····
4.	Total. Add lines 1 through 3	121,800	110,000	1,032,000	154,000	2,760,349	4,178,149
5	The portion of total contributions by						
	each person (other than a		İ				
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						0
- 6	Public support. Subtract line 5 from line 4						U178 144
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	121,800	110,000	1,032,000	154,000	2,760,349	4,178,149
8	Gross income from interest, dividends,	1				İ	
	payments received on securities loans, rents, royalties, and income from						
	similar sources	1					
9	Net income from unrelated business						
٠.	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets		`				
	(Explain in Part VI.)						
11 12	Total support. Add lines 7 through 10	/aga instruction				40	4,178,149
13	Gross receipts from related activities, etc. First five years. If the Form 990 is for the	*	•	 d third fourth		12	n 501(a)(3)
	organization, check this box and stop her	_			·		1 1 1
Secti	on C. Computation of Public Support						<u> </u>
14	Public support percentage for 2018 (line 6			1, column (f))		14	%
15	Public support percentage from 2017 Sch					15	%
16a	331/3% support test-2018. If the organization						
	box and stop here. The organization qual			-			
b	331/a% support test—2017. If the organization this box and stop here. The organization						
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part VI how the organization meets the "forganization	ets the "facts- facts-and-circu	and-circumsta ımstances" te	ances" test, ch	ieck this box a zation qualifies	and stop here.	Explain ın
b	10%-facts-and-circumstances test-20	17. If the orga	nization did n	ot check a bo	x on line 13, 1	6a, 16b, or 17	a, and line
_	15 is 10% or more, and if the organization	tion meets the	e "facts-and-c	ircumstances'	' test, check t	this box and a	stop here.
	Explain in Part VI how the organization m				-	on qualifies as	a publicly
	supported organization						🕨 🗆
18	Private foundation. If the organization did	d not check a t	oox on line 13,	, 16a, 16b, 17a	, or 17b, checl	k this box and	see

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

OMB No. 1545-0047

2018

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

i un, lo	oo ooparato matractionali ti	iigii			
• Se	ction 501(c)(4), (5), or (6) orga	anizations: Complete Part III.			
Name o	of organization			Employer ider	tification number
Florida	Alliance for Civic Engagen				46-4874864
Part	I-A Complete if the	e organization is exempt und	er section 501(c) or is a section 527 of	organization.
1	Provide a description of definition of "political car	f the organization's direct and incompaign activities")	direct political ca	ampaign activities in Part	IV. (see instructions for
2		y expenditures (see instructions) .		▶ \$	
3	Volunteer hours for politic	cal campaign activities (see instruc	rtions)		
Part		e organization is exempt und			
1		excise tax incurred by the organiza			
2		excise tax incurred by organization			
3		ed a section 4955 tax, did it file For			
4a					Yes No
b	If "Yes," describe in Part				
Part		e organization is exempt und	er section 5016	c), except section 501	(c)(3).
1 2 3 4 5	activities	ly expended by the filing organize	outed to other orgonic to the control of the contro	spanizations for section	Yes No vations to which the filing zation's funds. Also enter olitical organization, such de information in Part IV. (e) Amount of political contributions received and promptly and directly
(1)					delivered to a separate political organization If none, enter -0
(2)					
(3)					
(4)					
(5)					
(6)					

Schedule	C	(Form	990	or	990-F	7)	201	۶

f Grassroots lobbying expenditures

Sche	dule C (Form 990 or 990-EZ) 2018					Page 2
Par	t II-A Complete if the organizati section 501(h)).	on is exempt u	nder section 50	01(c)(3) and filed	d Form 5768 (ele	ection under
A (Check if the filing organization belo				liated group memb	er's name,
	address, EIN, expenses, and	d share of excess	lobbying expendi	itures).		
B	Check 🕨 🔲 if the filing organization che			ovisions apply.		
		obying Expenditu			(a) Filing	(b) Affiliated
	(The term "expenditures" r				organization's totals	group totals
1a	 Total lobbying expenditures to influence 	e public opinion	(grass roots lobby	ing)	0	
t	 Total lobbying expenditures to influence 	e a legislative bo	dy (direct lobbying	g)	0	
c		•			0	
C	1 Other exempt purpose expenditures .				2,235,890	
e	 Total exempt purpose expenditures (ad 	dd lines 1c and 1	d)		2,235,890	
f	Lobbying nontaxable amount. Enter	the amount from	om the following	table in both		
	columns.				261,794	
	If the amount on line 1e, column (a) or (b)	is: The lobbying	nontaxable amount	is:		· ·
	Not over \$500,000	20% of the am	ount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess of	over \$500,000.		1
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess of	over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess or	ver \$1,500,000.		
	Over \$17,000,000	\$1,000,000.				
ç	Grassroots nontaxable amount (enter 2	25% of line 1f)			65,448	
r	Subtract line 1g from line 1a. If zero or	less, enter -0-			0	
i	Subtract line 1f from line 1c. If zero or	less, enter -0-			0	
j	If there is an amount other than zero	o on either line	1h or line 1, did	the organization	file Form 4720	
	reporting section 4911 tax for this yea	r?			<u></u> l	Yes No
	(Some organizations that made a s See th	ection 501(h) ele e separate instr	uctions for lines	e to complete all 2a through 2f.)	of the five colum	ns below.
	Lobbyir	ig Expenditures	During 4-Year Av	eraging Period	· · · · · · · · · · · · · · · · · · ·	
	Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
28	Lobbying nontaxable amount	23,200	180,665	16,433	261,794	482,092
	Lobbying ceiling amount (150% of line 2a, column (e))					723,138
C	Total lobbying expenditures	0	0	0	0	0
c	Grassroots nontaxable amount	5,800	45,166	4,108	65,448	120,522
e	Grassroots ceiling amount (150% of line 2d, column (e))					180,783

Schedule C (Form 990 or 990-EZ) 2018

 For a	(election under section 501(h)).	(B)	Ι	(b)	
	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed ption of the lobbying activity.	Yes	<u> </u>		Amoun	it
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:				1	
а	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?		L			
e	Publications, or published or broadcast statements?			↓		
	Grants to other organizations for lobbying purposes?			<u> </u>		
_	Direct contact with legislators, their staffs, government officials, or a legislative body?		<u> </u>	↓		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?		ļ			
	Total. Add lines 1c through 1i			<u> </u>		
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		<u> </u>	ļ		
	If "Yes," enter the amount of any tax incurred under section 4912					
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .			<u> </u>		
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	\(\frac{1}{2}\)				
Part	II-A Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6).)(S), (CHOI		
					Yes	No
	Were substantially all (90% or more) dues received nondeductible by members?			1 1		—
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		┼
3 Part l	Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)					<u> </u>
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes."	R (b)	Par			3, is
1	Dues, assessments and similar amounts from members		1	 		
	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).					
	Current year		2a	ļ		
	Carryover from last year		2b	 		
	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3	-		
	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby	ying				
	and political expenditure next year?		4			
	Taxable amount of lobbying and political expenditures (see instructions)	<u> </u>	5	<u> </u>		
Part						
	e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro	up lis	t); Pa	ırt II-A,	lines '	1 an
: (566	instructions); and Part II-B, line 1. Also, complete this part for any additional information.					
				•		
					,	

SCHEDULE (Form 990)

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.

Open to Public Inspection 2018

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service			► Go to w	Attacn to Form 990. Go to www.irs.gov/Form990 for the latest information.	Form 990. O for the latest info	ormation		ă =	Open to Public Inspection
Name of the organization							Em	Employer identification number	number
Alliar	Engagement, l	JC.						46-4874864	364
Part I General In	iformation o	General Information on Grants and Assistance	Assistance						
Does the organization maintain records to substantiate the an the selection criteria used to award the grants or assistance?	ation maintain	records to subs		nt of the grants or	assistance, the g	rantees' eligibility for	amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	tance, and	ON L
2 Describe in Part I	V the organiza	ation's procedur	es for monitoring t	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ids in the United	States.	•		
Part II Grants and Part IV, line	d Other Ass e 21, for any	istance to Do recipient that r	mestic Organiza	ations and Dom an \$5,000. Part I	estic Governm I can be duplica	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organizatior Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	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.	Inswered "Yes"	on Form 990,
1 (a) Name and address of organization or government	organization	(e) 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) Pun	(h) Purpose of grant or assistance
(1) Hopewell Fund 1201 Connecticut Ave NW #300 Wash	/#300 Wash	47-3681860	501c(3)	210,000				Civic Education	tion
(2) New Florida Majority Education 8330 Biscayne Blvd; Miami, FL 33138	/ Education ni, FL 33138	27-0167620	501c(3)	100,000				Civic Education	tion
(3) New Venture Fund 1201 Connecticut Ave NW #300; Wasi	#300; Wasi	20-5806345	501c(3)	100,000				Civic Education	tion
(4) Tides Foundation PO Box 29198, San Francisco, CA 94	sco, CA 94	51-0198509	501c(3)	100,000				Civic Education	tion
(5) MomsRising Education Fund 12011 N Bel Red Rd #100B Belleview	ion Fund 3 Belleview	45-2499952	501c(3)	100,000				Civic Education	tion
(6) State Voices 500 Griswold St # 2850, Detroit, MI 48	etroit, MI 48	20-1115618	501c(3)	80,000				Civic Education	tion
(7) Florida Institute for Reform & E 134 E. Colonial Drive, Orlando, FL 32	Reform & E ando, FL 32	27-4384675	501c(3)	25,000				Civic Education	tion
(8) Fair Elections Center 8125 K Street NW #450, Washington,	r ashington,	81-5447067	501c(3)	25,000				Civic Education	tion
(9) League of Women Voters Educa 1001 N Orange Ave; Orlando, FL 3280	oters Educa Ido, FL 3280	59-1385724	501c(3)	50,000				Civic Education	tion
(10) Faith in Public Life PO Box 33668, Washington, OC 2003	in, DC 2003	20-3798596	501c(3)	40,000				Civic Education	tion
(11) Mi Familia Vota Education Fund 1710 E Indian School Rd #100, Phoen	cation Fund 1100, Phoen	20-0182824	501c(3)	31,000				Civic Education	tion
(12)									
2 Enter total numbe	er of section 5	01(c)(3) and gov	emment organizat	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	ne 1 table			A .	11

Schedule I (Form 990) (2018)

Cat. No. 50055P

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

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

(Form 990) (2018)	Grants a
Schedule I	Part III

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.	mestic Individua space is needed	ls. Complete if the	organization answ	ered "Yes" on Form 990,	Part IV, line 22.	_
•	(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	
-							
2							
ო							
4							
5					•		
9							
7							
Part IV	Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. The organization required grantees to provide periodic summaries and financial reports and a final summary and financial report within 60 days of completion of the project	the information re	quired in Part I, lingial reports and a final	e 2; Part III, columnsummers and financia	(b); and any other additi	onal information.	
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				-	
			`				
			٠				
					•		
						•	
							_
	:					Schedule I (Form 990) (2018)	

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.

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

OMB No. 1545-0047
2018
Open to Public

Inspection

Name of the organization Employer identification number Florida Alliance for Civic Engagement, Inc 46-4874864 Part III, Line 2 Made grants to organizations to perform voter registration and civic engagement efforts; conducted an extensive mail, paid phone, radio and online advertising program to educate the public on issues being debated in the state and increasing awareness of the actions of government officials at the state level; conducted an extensive paid phone & mail follow up program to remind Floridians to return their vote by mail ballots. Part III, Line 4d Organized and provided information to a coalition of interested 501c3 organizations to educate their members and the public about the Constitutional Revision Commission process and about the issues being debated. Part VI, Line 11a The Form 990 was emailed to all officers and directors for review prior to filing. Part VI, Line 19 By request.