DLN: 93493319174379 OMB No. 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 D Employer identification number B Check if applicable Democracy Fund Voice Inc ☐ Address change 46-5051755 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated Number and street (or P O box if mail is not delivered to street address) Room/suite 1200 17th St NW No 300 E Telephone number ☐ Amended return ☐ Application pending (202) 420-7943 City or town, state or province, country, and ZIP or foreign postal code Washington, DC $\,\,$ 20036 G Gross receipts \$ 5,650,017 Name and address of principal officer H(a) Is this a group return for Joseph Goldman ☐Yes **☑**No subordinates? 1200 17th St NW No 300 H(b) Are all subordinates Washington, DC 20036 ☐Yes ☐No ıncluded? ☐ 501(c)(3) **☑** 501(c) (4) ◀ (insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► democracyfundvoice org L Year of formation 2014 M State of legal domicile DE Summary 1 Briefly describe the organization's mission or most significant activities A nonpartisan organization that conducts and supports advocacy to produce a stronger U.S. democracy Activities & Governance 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 3 4 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 0 **6** Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12 17 **b** Net unrelated business taxable income from Form 990-T, line 34 Prior Year **Current Year** 8 Contributions and grants (Part VIII, line 1h) . 2,500,000 5,650,000 Ravenua 9 Program service revenue (Part VIII, line 2g) . 0 17 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 21 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 2,500,021 5,650,017 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 2,175,000 4,825,000 0 0 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0 0 Expenses **16a** Professional fundraising fees (Part IX, column (A), line 11e) . . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 1,146,856 1,434,897 3,321,856 6,259,897 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . -821,835 -609,880 Net Assets or Fund Balances Beginning of Current Year **End of Year** 376,707 508,815 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 334,419 1,076,407 22 Net assets or fund balances Subtract line 21 from line 20 . 42,288 -567,592 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2019-11-15 Signature of officer Sign Here loseph Goldman President Type or print name and title Print/Type preparer's name Preparer's signature Check 🔲 ıf P00294980 Paid self-employed ► COMPREHENSIVE FINANCIAL MANAGEMENT Firm's EIN ► 77-0534410 Preparer Use Only Firm's address ▶ 720 University Ave 200 Phone no (408) 358-3316 Los Gatos, CA 95032 ✓ Yes 🗆 No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2018)

Form	990 (2018)					Page 2
Pa	till Statement	of Program Serv	vice Accomplis	hments		
	Check if Sche	dule O contains a re	sponse or note to a	any line in this Part III		🗹
1	Briefly describe the o	rganization's missio	n	•		
	ocracy Fund Voice is a ocracy in the United St		atıon establıshed ıı	n 2014 to conduct and s	upport advocacy that will produce	a stronger, healthier
2	Did the organization	undertake any signit	cant program ser	vices during the year wh	ıch were not listed on	
	the prior Form 990 o	r 990-EZ?				🗌 Yes 🗹 No
	If "Yes," describe the	se new services on :	Schedule O			
3	Did the organization	cease conducting, o	make significant	changes in how it condu	cts, any program	
	services?	🗆 Yes 🗹 No				
	If "Yes," describe the	se changes on Sche	dule O			
4		d 501(c)(4) organiza	ations are required	to report the amount of	argest program services, as meas grants and allocations to others,	
4a	(Code) (Expenses \$	3,946,773	including grants of \$	3,525,000) (Revenue \$)
	See Additional Data					
4b	(Code) (Expenses \$	1,522,611	ıncludıng grants of \$	910,000) (Revenue \$)
	See Additional Data					
4c	(Code) (Expenses \$	495,350	ıncludıng grants of \$	290,000) (Revenue \$)
	See Additional Data					
	See Additional Data	Table				
4d	Other program service					
	(Expenses \$	159,785 ı	ncluding grants of	\$ 100,00	00) (Revenue \$)
4e	Total program serv	/ice expenses ▶	6,124,5	19		

Pai	t 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	Yes	
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	Yes	
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		No
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		7		No
8		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		No
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, VIII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		No
	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
	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 2	11c		No
	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 2	11d		No
е	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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 2	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		No
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		No
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		No
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
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?			

21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

government on Part IX, column (A), line 1º If "Yes," complete Schedule I, Parts I and II

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

No

Yes

20b

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Part V

Pa	tIV Checklist of Required Schedules (continued)			
			Yes	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? If "Yes," complete Schedule J	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? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
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		No
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		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? If "Yes," complete Schedule L, Part III	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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,			
	Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an			NI -

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . .

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

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

Statements Regarding Other IRS Filings and Tax Compliance

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Page 4

Nο

Nο

Nο

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Nο

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35b

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Yes

Yes

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Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess 15 parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N Nο Is the organization an educational institution subject to the section 4968 excise tax on net investment income? Form **990** (2018)

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Pa	Governance, Management, and Disclosure For each "Yes" response to lines 2 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sched Check if Schedule O contains a response or note to any line in this Part VI	lule O	See instructions	·	onse to	lines
Se	ection 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	3			
	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	3			
2	Did any officer, director, trustee, or key employee have a family relationship or a busine officer, director, trustee, or key employee?			2	Yes	
3	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?					
4	Did the organization make any significant changes to its governing documents since the	prior F	orm 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the orga	nızatıo	n's assets? .	5		No

b	Enter the number of voting members included in line 1a, above, who are independent	1 b	3	:		
2	Did any officer, director, trustee, or key employee have a family relationship or a busines officer, director, trustee, or key employee?			2	Yes	
3	Did the organization delegate control over management duties customarily performed by of officers, directors or trustees, or key employees to a management company or other p			3		No
4	Did the organization make any significant changes to its governing documents since the p	prior F	orm 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organ	nizatio	n's assets? .	5		No
6	Did the organization have members or stockholders?			6		No
7a	Did the organization have members, stockholders, or other persons who had the power to members of the governing body?			7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) persons other than the governing body?			7b		No
8	Did the organization contemporaneously document the meetings held or written actions to the following	undert	taken during the year by			

	similar committee, explain in Schedule O							
b	Enter the number of voting members included in line 1a, above, who are independent	1b			3	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business officer, director, trustee, or key employee?				any other	2	Yes	
3	Did the organization delegate control over management duties customarily performed by of officers, directors or trustees, or key employees to a management company or other p			he dırect	supervisio	3		No
4	Did the organization make any significant changes to its governing documents since the	prior F	orm	990 was	filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organ	nizatio	n's as	ssets? .		5		No
6	Did the organization have members or stockholders?					6		No
7a	Did the organization have members, stockholders, or other persons who had the power t members of the governing body?				ne or more •	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) persons other than the governing body?	ders, or	7b		No			
8	Did the organization contemporaneously document the meetings held or written actions the following	undert	taken	during th	ne year by			
а	The governing body?					8a	Yes	
b	Each committee with authority to act on behalf of the governing body?					8 b		No
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who conganization's mailing address? If "Yes," provide the names and addresses in Schedule O					9		No
Se	ction B. Policies (This Section B requests information about policies not requi	ired b	y the	e Intern	al Revenu	e Cod	e.)	
							Yes	No
10a	Did the organization have local chapters, branches, or affiliates?					10a	Yes	No No
	Did the organization have local chapters, branches, or affiliates?	s of s		hapters,	• affiliates,	10a 10b	Yes	
Ь	If "Yes," did the organization have written policies and procedures governing the activitie	es of surpose	es?		·		Yes	
b 11a	If "Yes," did the organization have written policies and procedures governing the activities and branches to ensure their operations are consistent with the organization's exempt put has the organization provided a complete copy of this Form 990 to all members of its government.	es of surpose	s? ig boo	ly before	filing the	10b		
b 11a b	If "Yes," did the organization have written policies and procedures governing the activities and branches to ensure their operations are consistent with the organization's exempt put has the organization provided a complete copy of this Form 990 to all members of its gor form?	es of surpose vernin 990	es? ig boo	dy before	filing the	10b		
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the activities and branches to ensure their operations are consistent with the organization's exempt put has the organization provided a complete copy of this Form 990 to all members of its government of the process, if any, used by the organization to review this Form	es of si urpose vernin 990	es? ig boo	dy before	filing the	10b	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities and branches to ensure their operations are consistent with the organization's exempt put has the organization provided a complete copy of this Form 990 to all members of its government of the complete in Schedule O the process, if any, used by the organization to review this Form Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually into the conflict of interest policy?	es of surpose vernin 990 erests	es? ig boo	dy before	filing the	10b 11a 12a	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities and branches to ensure their operations are consistent with the organization's exempt put Has the organization provided a complete copy of this Form 990 to all members of its government of the organization provided a complete copy of this Form 990 to all members of its government of the organization have a written conflict of interest policy? If "No," go to line 13	es of surpose vernin 990 erests	es? og boo	dy before could giv Yes," des	filing the	10b 11a 12a 12b	Yes Yes Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities and branches to ensure their operations are consistent with the organization's exempt put has the organization provided a complete copy of this Form 990 to all members of its government. Describe in Schedule O the process, if any, used by the organization to review this Form Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually intendicts? Did the organization regularly and consistently monitor and enforce compliance with the Schedule O how this was done.	es of surpose vernin 990 erests	es? ig boo	dy before could giv	filing the	10b 11a 12a 12b	Yes Yes Yes	No
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the activities and branches to ensure their operations are consistent with the organization's exempt to the theorem of the organization provided a complete copy of this Form 990 to all members of its government of the organization provided a complete copy of this Form 990 to all members of its government of the organization to review this Form Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually intendicts? Did the organization regularly and consistently monitor and enforce compliance with the Schedule O how this was done. Did the organization have a written whistleblower policy?	es of si urpose vernin 990 erests policy	es? ig book that ? If ""	ly before could giv Yes," des	filing the re rise to cribe in	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the activities and branches to ensure their operations are consistent with the organization's exempt put that the organization provided a complete copy of this Form 990 to all members of its government of the organization provided a complete copy of this Form 990 to all members of its government of the organization to review this Form Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually intendicts? Did the organization regularly and consistently monitor and enforce compliance with the Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review of the support of the process.	es of si urpose vernin 990 erests policy	es? ig book that ? If ""	ly before could giv Yes," des	filing the re rise to cribe in	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities and branches to ensure their operations are consistent with the organization's exempt put that the organization provided a complete copy of this Form 990 to all members of its government of the organization provided a complete copy of this Form 990 to all members of its government of the organization to review this Form Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually intendicts?	es of si urpose vernin 990 erests policy	es? ig book that ? If ""	ly before could giv Yes," des	filing the re rise to cribe in	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities and branches to ensure their operations are consistent with the organization's exempt put Has the organization provided a complete copy of this Form 990 to all members of its gor form? Describe in Schedule O the process, if any, used by the organization to review this Form Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually inticonflicts? Did the organization regularly and consistently monitor and enforce compliance with the Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review apersons, comparability data, and contemporaneous substantiation of the deliberation and The organization's CEO, Executive Director, or top management official	es of si urpose vernin 990 erests policy	es? ig book that ? If ""	ly before could giv Yes," des	filing the re rise to cribe in	10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No

6	Did the organization have members or stockholders?	6		No
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		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		No
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
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
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		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	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?			
а	The organization's CEO, Executive Director, or top management official	15a		No
b	Other officers or key employees of the organization	15b		No
	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		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A 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			

	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
.1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
.2a	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? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
.3	Did the organization have a written whistleblower policy?	13		No
.4	Did the organization have a written document retention and destruction policy?	14	Yes	
.5	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?			
а	The organization's CEO, Executive Director, or top management official	15a		No
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
.6a	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		
Se	ction C. Disclosure			
.7	List the States with which a copy of this Form 990 is required to be filed▶			
.8	Section 6104 requires an organization to make its Form 1023 (or 1024-A 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)			
.9	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 ►Robin Thompson 1200 17th St NW Ste 300 Washington, DC 20036 (202) 420-7943			
		F	orm 99	0 (2018)

	conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	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?			
а	The organization's CEO, Executive Director, or top management official	15a		No
b	Other officers or key employees of the organization	15b		No
	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		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A 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 ►Robin Thompson 1200 17th St NW Ste 300 Washington, DC 20036 (202) 420-7943			
		F	orm 99 0	0 (2018)

Part VII

(F)

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

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount
- of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid • List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the
- organization and any related organizations • List all of the organization's former officers, key employees, or 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 (C) (D) (A) (B) (E)

Name and Title	Average hours per week (list any hours for related	1	ne bo	ox, ι n of or/t	t che unle: ficer rust	ss pers and a ee)	son	Reportable compensation from the organization (W- 2/1099-	Reportable compensation from related organizations (W- 2/1099-	Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations
(1) Pierre Omidyar	0 25	V								
Chairman	0 75	X						0	0	0
(2) Jeff Alvord	0 25									
Director, Secretary	0 00	Х		Х				0	0	0
(3) Stacy Donohue	0 25	.,		,						
Director, Treasurer	0 00	Х		X				0	0	0
(4) Joseph Goldman	7 00									
President & CEO	33 00			X				0	349,576	35,557
(5) Thomas Glaisyer	1 00									
Managing Program Director	39 00					×		0	213,625	17,815
(6) Adam Ambrogı	1 00									
Program Director	39 00					×		0	198,921	28,809
(7) Elisabeth Wright Hawkings	5 00									
Managing Program Director	35 00					Х		0	236,641	16,237
(8) Margaret Yao	2 00									
Chief People Officer	38 00					X		0	201,825	22,758
(9) Srıkanth Gopal	1 00					x		0	255 026	24 220
VP Strategy & Programs	39 00					_ ^		0	255,836	31,228
					<u> </u>			l		Form 990 (2018)

Form 990 (2018) Page 8 Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) Part VII (B) (C) (D) (A) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation any hours director/trustee) organization (Worganizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and Highest compensatemptovee Individual trustee or director organizations related Institutional Trustee below dotted organizations employee line)

i .											

- 1b Sub-Total c Total from continuation sheets to Part VII, Section A 152,404
 - d Total (add lines 1b and 1c) . 1,456,424

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for

from the organization Report compensation for the calendar year ending with or within the organization's tax year

services rendered to the organization? If "Yes," complete Schedule J for such person . . .

Name and business address

Section B. Independent Contractors

compensation from the organization ▶ 2

Steptoe & Johnson LLP

1223 Sequoia Place Davis, CA 95616

Psephos Inc

1330 Connecticut Avenue NW Washington, DC 20036

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 ▶ 0			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			

individual . Yes

5

(B)

Description of services

Consulting

Consulting

Yes

(C)

Compensation

Form 990 (2018)

173,000

105,000

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation

Part						
	Check if Schedule O contains a response or r	note to any line		(B)	(C)	<u> </u>
		Тс	(A) otal revenue	Related or	Unrelated	(D) Revenue
				exempt function	business revenue	excluded from tax under sections
	1a Federated campaigns 1a			revenue		512 - 514
nts nts	b Membership dues 1b					
irai 10u	c Fundraising events 1c					
S, G An	d Related organizations					
Contributions, Gifts, Grants and Other Similar Amounts	e Government grants (contributions)					
JS,	f All other contributions, gifts, grants,					
tion er S	and similar amounts not included above	5,650,000				
혈	g Noncash contributions included					
	ın lınes 1a - 1f \$					
<u>ة ن</u>	h Total. Add lines 1a-1f	· •	5,650,000			
된	2-	Business Cod	de			
144	2a 					
Service Revenue	b ———					
<u>₹</u>	c ————————————————————————————————————					
፠	d ————————————————————————————————————					
Jr an	f All other program service revenue					
Program	gTotal. Add lines 2a-2f ▶					
	3 Investment income (including dividends, interest,	and other				
	sımılar amounts)	▶]_	17		17	
	4 Income from investment of tax-exempt bond proc					
	5 Royalties	Personal				
	6a Gross rents	ersonal				
	b Less rental expenses					
	c Rental income or (loss)					
		Other				
	7a Gross amount					
	from sales of assets other					
	than inventory					
	b Less cost or other basis and					
	sales expenses C Gain or (loss)					
	d Net gain or (loss)	•				
	8a Gross income from fundraising events					
ıne	(not including \$ of contributions reported on line 1c)					
₹.	See Part IV, line 18 a					
Other Revenue	b Less direct expenses b					
her	c Net income or (loss) from fundraising events . 9a Gross income from gaming activities	· •				
ō	See Part IV, line 19					
	a					
	b Less direct expenses b c Net income or (loss) from gaming activities .					
	10aGross sales of inventory, less	· •				
	returns and allowances					
	b Less cost of goods sold b					
	b Less cost of goods sold b c Net income or (loss) from sales of inventory .					
		ess Code				
	11a					
	ь					
	С	T				
	d All other revenue					
	e Total. Add lines 11a-11d	•				
	12 Total revenue. See Instructions	· • [5,650,017	C	17	О0
						Form 990 (2018)

Form 990 (2018)				Page 1 (
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	lumns All other orga	nizations must comp	lete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX .	<u> </u>		🗹
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) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	4,825,000	4,825,000		
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, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
b Legal	10,880	8,285	2,595	
-		5,222	_,	
c Accounting				
d Lobbying				
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)	1,267,518	1,166,100	101,418	
12 Advertising and promotion				
13 Office expenses	5,649	4,301	1,348	
14 Information technology	20,637	15,715	4,922	
15 Royalties				
16 Occupancy	51,307	39,069	12,238	
17 Travel	25,509	19,425	6,084	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	23/303	13,123	0,001	
19 Conferences, conventions, and meetings	5,414	4,123	1,291	
· · · · · · · · · · · · · · · · · · ·	3,414	7,123	1,231	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	5,244	3,993	1,251	
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)				
a Conference Sponsorships	25,000	25,000		
b Organizational Develop	7,772	5,918	1,854	
c Dues & Subscriptions	2,344	1,785	559	
d Internal Staff Events	2,001	1,524	477	
e All other expenses	5,622	4,281	1,341	
25 Total functional expenses. Add lines 1 through 24e	6,259,897	6,124,519	135,378	(
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)				

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18

20

21

23

24

26

27

28

29

31

32

33

34

Liabilities 22

Fund Balances

Assets or 30

Net

Grants payable .

Deferred revenue .

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Unrestricted net assets

and other liabilities not included on lines 17 - 24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 30 through 34.

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

Retained earnings, endowment, accumulated income, or other funds

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total liabilities. Add lines 17 through 25 .

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ightharpoonup and

			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	484,881	1	483,815
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	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	
S	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	
et	7	Notes and loans receivable, net	-110,674	7	
S		Inventories for calc or use		•	

		section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organiza voluntary employees' beneficiary organizations Part II of Schedule L	n 4958(c)(3)(B), and itions of section 501(c)(9) (see instructions) Complete		6	
ets	7	Notes and loans receivable, net		-110,674	7	
Assets	8	Inventories for sale or use			8	
۹	9	Prepaid expenses and deferred charges		2,500	9	25,000
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a			
	ь	Less accumulated depreciation	10b		10 c	
	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	

d	9	Prepaid expenses and deferred charges		2,500	9	25,000
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a			
	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 equ	al line 34)	376,707	16	508,815
	17	Accounts payable and accrued expenses		134,419	17	166,789

200,000

334.419

18

19 20

21

22 23

24

25

26

27 28

29

31

32

33

34

0 30 0

42,288

42,288

376,707

650,000

259.618

1.076.407

0

-567,592

-567,592

508,815

Form **990** (2018)

Form	990 (2018)				Page 12
Pai	Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			<u> </u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5	,650,017
2	Total expenses (must equal Part IX, column (A), line 25)	2			259,897
3	Revenue less expenses Subtract line 2 from line 1	3			609,880
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			42,288
5	Net unrealized gains (losses) on investments	5			42,200
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			
_	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			567,592
	tXII Financial Statements and Reporting	10			307,332
ı a					
	Check if Schedule O contains a response or note to any line in this Part XII	•	· · ·	Yes	No No
				163	140
1	Accounting method used to prepare the Form 990				
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both	basıs,			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	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?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle	3a		No

3b

Form **990** (2018)

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: 46-5051755

Name: Democracy Fund Voice Inc

Form 990 (2018)

ability to function and respond to the needs of the American people

Form 990, Part III, Line 4a:

Governance and Accountability Democracy Fund Voice believes that checks and balances, the rule of law, and healthy governing institutions are essential features of our constitutional system. We support organizations that defend against abuses of power, empower Congress to embrace its Article One powers, and help strengthen Congress.

Form 990, Part III, Line 4b:

Participation and Elections Democracy Fund Voice believes our country is stronger when more Americans are civically engaged and when more eligible voters participate and

are fully informed in elections. We support organizations that advance new tools and policies that amplify public will, protect civil rights, and ensure the election system.

works for a diverse electorate. We also support organizations who educate, register, and activate voters

Form 990, Part III, Line 4c:

Inclusive Politics Democracy Fund Voice believes that America must to do more to live up to the promise of our diversity and our foundational ideal of pluralism. We also believe that hate speech, fear mongering, and violent rhetoric are deeply threatening to our democracy. We support organizations that work to combat bigotry in public

debate, defend the rights of communities targeted by government policies, and engage faith, conservative, and other leaders in creating a more inclusive society

		•			,		
Barrier March				/			
Describe the exem	ipt purpose acni	evements for each of th	ne organizati	on's three larg	est program se	rvices by exper	ises.
Section E01(c)(2)	and (4) organiz	ations and 4947(a)(1)	tructs are re-	quired to repor	rt the amount o	farante and all	locations to
Section Soft (1/2)	allu (4) Olyalliz	auviis anu 434/(a)(1)	tiusts are re-	quii eu to i epoi	i tille allibulit b	ı yıanıs anu an	ocations to

Form 990. Part III - 4 Program Service Accomplishments (See the Instructions)

others, the total expenses, and revenue, if any, for each program service reported.

(Code) (Expenses \$	149,716	including grants of \$	100,000) (Revenue \$)
Journalism and Med	dia Democracy Fund Voice believes t	hat vibrant	media organizations from	m local news outlets to public media to th	e social media
nlatforms are ess	sential to engaging voters, combatti	na mis- and	I dis-information, and ho	lding power to account. We support organ	nizations

advocating for new policies and practices that ensure voters have the public square they deserve

(Code) (Expenses \$ 10,069 including grants of \$) (Revenue \$

Other Program Support - Other program service accomplishments

SCHEDULE C

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

DLN: 93493319174379

☐ Yes

☐ Yes

☐ No

19,231

✓ No

Open to Public

EZ)

3

2

3

Was a correction made?

If "Yes," describe in Part IV

(Form 990 or 990-

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. Department of the Treasury ▶Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service 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 **Employer identification number** Democracy Fund Voice Inc 46-5051755 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") Political campaign activity expenditures (see instructions) 2 3 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955

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

Enter the amount directly expended by the filing organization for section 527 exempt function activities

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b

Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt

5	organization made payments For of political contributions received	employer identification number (EIN) of each organization listed, enter the amo that were promptly and directly delivere ee (PAC) If additional space is needed, p	unt paid from the d to a separate po	filing organization's funds blitical organization, such a	Also enter the amount
	(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					
1					
5					

If the organization incurred a section 4955 tax, did it file Form 4720 for this year?

Did the filing organization file Form 1120-POL for this year?

Grassroots ceiling amount

Return Reference

function activities

Part I-B, Line 4a

activity

(b)

Amount

(a)

No

Yes

During the year, did the filing organization attempt to influence foreign, national, state or local legislation, 1 including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? 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 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-A 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B 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). 2a Current year b Carryover from last year 2b 2c С Total 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 the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 5 5 Taxable amount of lobbying and political expenditures (see instructions) 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

Explanation

Democracy Fund Voice provided advisory support to civic engagement organizations involved in 527 exempt

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

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

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

(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.

 DLN: 93493319174379 OMB No 1545-0047

2018

Inspection

Employer identification number

	me of the organization		Employer identification number	
Der	nocracy Fund Voice Inc		46-5051755	
Pa	rt I Organizations Maintaining Donor Advis	sed Funds or Other Similar Fund	ls or Accounts.	
	Complete if the organization answered "Ye	s" on Form 990, Part IV, line 6. (a) Donor advised funds	(L) Finds and able to account	
1	Total number at end of year	(a) Donor advised lunds	(b)Funds and other accounts	
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisor	es in writing that the assets held in donor	r advised funds are the	
,	organization's property, subject to the organization's ex		Yes	No
6	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?			No
Pa	rt III Conservation Easements. Complete if th	e organization answered "Yes" on F		
1	Purpose(s) of conservation easements held by the organ	nization (check all that apply)		
	\square Preservation of land for public use (e g , recreation	or education) \square Preservation of	f an historically important land area	
	Protection of natural habitat	☐ Preservation of	f a certified historic structure	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservation contribution in the	e form of a <u>conservation</u> Held at the End of the Yea	_
а	Total number of conservation easements		2a	_
b	Total acreage restricted by conservation easements		2b	—
c	Number of conservation easements on a certified historic	structure included in (a)	2c	
d	Number of conservation easements included in (c) acqui	red after 7/25/06, and not on a historic	2d	_
	structure listed in the National Register			
3	Number of conservation easements modified, transferre tax year ▶	d, released, extinguished, or terminated	by the organization during the	
4	Number of states where property subject to conservatio	n easement is located 🕨		
5	Does the organization have a written policy regarding the and enforcement of the conservation easements it holds	e periodic monitoring, inspection, handli	ing of violations,	
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing		
7	Amount of expenses incurred in monitoring, inspecting, \$ \begin{align*}	handling of violations, and enforcing con	nservation easements during the year	
В	Does each conservation easement reported on line 2(d) and section 170(h)(4)(B)(ii)?	above satisfy the requirements of sectio	. , , , , , ,	
9	In Part XIII, describe how the organization reports cons- balance sheet, and include, if applicable, the text of the			
	the organization's accounting for conservation easement	is -		
Par	t III Organizations Maintaining Collections Complete if the organization answered "Ye		Other Similar Assets.	
1a	If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finan	public exhibition, education, or research	in furtherance of public service,	
b	If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for publ following amounts relating to these items			
(i) Revenue included on Form 990, Part VIII, line 1		> \$	_
(1	i)Assets included in Form 990, Part X		▶ \$	
2	If the organization received or held works of art, historic following amounts required to be reported under SFAS 1		financial gain, provide the	
а	Revenue included on Form 990, Part VIII, line 1	, , , , , , , , , , , , , , , , , , , ,	> \$	
	Assets included in Form 990, Part X		► \$	-

Cat No 52283D

Schedule D (Form 990) 2018

Par	1111	Organizations Maintaining Col	lections of Art, I	listor	ical T	reas	ures, o	r Other	Similar A	\ssets (continued)	
3		the organization's acquisition, accession (check all that apply)	n, and other records,	check	any of	the f	ollowing t	hat are a	significant	use of it	s collection	
а		Public exhibition		d		Loa	n or excha	ange pro	grams			
b		Scholarly research		е		Oth	er					
С		Preservation for future generations										
4	Provid Part X	de a description of the organization's col KIII	lections and explain	how th	ey furtl	her tl	ne organiz	zation's e	xempt purp	ose in		
5		g the year, did the organization solicit o s to be sold to raise funds rather than to							nılar	□ Y (es 🗆 I	No
Pai	rt IV	Escrow and Custodial Arrange Complete if the organization answ X, line 21.		m 990), Part	IV,	line 9, oi	r report	ed an amo	unt on	Form 990	, Part
1a	Is the	e organization an agent, trustee, custodi ded on Form 990, Part X?	an or other intermed	liary for	r contri	butio	ns or othe	er assets	not	□ Y	es 🗆	No
b	If "Ye	es," explain the arrangement in Part XIII	and complete the fo	llowing	table :					Amount		_
С	Begin	ining balance						1c				
d	Addıtı	ions during the year						1d				
е	Distri	butions during the year						1e				
f	Endın	g balance						1f				
2 a	Did th	ne organization include an amount on Fo	rm 990, Part X, line	21, for	escrov	v or c	ustodial a	ccount li	ability?	. 🗆 Y	es 🗆 i	No
b		es," explain the arrangement in Part XIII								_		
Pa	rt V	Endowment Funds. Complete if										
			(a)Current year	(b)F	Prior yea	ır	(c)Two y	ears back	(d)Three ye	ears back	(e)Four ye	ars back
1 a	Beginn	ing of year balance										
b	Contrib	outions										
C	Net inv	estment earnings, gains, and losses										
d	Grants	or scholarships										
е		expenditures for facilities ograms										
f	Admını	strative expenses										
g	End of	year balance										
2	Provid	de the estimated percentage of the curre	ent year end balance	(line 1	g, colu	mn (a)) held a	s				
а	Board	d designated or quasi-endowment 🕨										
b	Perma	anent endowment 🟲										
С	Temp	orarily restricted endowment >										
		ercentages on lines 2a, 2b, and 2c shou	•									
3a		nere endowment funds not in the posses lization by	sion of the organizat	ion tha	it are h	eld a	nd admini	istered fo	or the		Yes	No
	_	rrelated organizations								3	a(i)	110
		elated organizations									a(ii)	
b		s" on 3a(II), are the related organization	s listed as required	on Sche	edule R	?.					3b	
4	Descr	ribe in Part XIII the intended uses of the	organization's endo	wment	funds						•	
Pa	rt VI	Land, Buildings, and Equipmen										
	D	Complete if the organization answ							<u>rm 990, P</u> depreciation		ne 10. (d) Book val	
	Descri	ption of property (a) Cost or oth (investme		or other	i Dasis (otrier,	(C) Acc	umulated	иергестацоп		(d) BOOK Val	ue
1 a	Land											
b	Buildin	gs										
c	Leaseh	old improvements										
d	Equipm	nent										
Tota	ıl. Add	lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, colu	mn (B)	, line	10(c))		>			0

Part VII Investments—Other Securities. Complete if the org	ganization	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)	(t Bo	ok Cost	(c) Method of valuation or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(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 I	V. line 11c. See Fo	erm 990. Part X. line 13.
(a) Description of investment	(b) Book v	alue	(c) Method of valuation
(1)		Cost	or end-or-year market value
(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 99	0, Part IV, line 11d S	
(a) Description			(b) Book value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			-
(9)			-
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)			•
Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25.	ered 'Yes' o	n Form 990, Part I'	V, line 11e or 11f.
1. (a) Description of liability	(b) Book value	
(1) Federal income taxes Payable to Democracy Fund Inc		259,618	
(2)		233,010	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. Liability for uncertain tax positions In Part XIII, provide the text of the f	► footnote to t	259,618 he organization's final	ncial statements that reports the
organization's liability for uncertain tax positions under FIN 48 (ASC 740)			_

Schedule D (Form 990) 2018

Pa		e venue per Audited Financial State lization answered 'Yes' on Form 990, Pi		-	Return	
1		support per audited financial statements .			1	
2	Amounts included on line 1 but n	ot on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses) on i	investments	2a			
b	Donated services and use of facili	lities	2b			
С	Recoveries of prior year grants		2c			
d	Other (Describe in Part XIII) .		2d			
e	Add lines 2a through 2d				2e	
3	Subtract line 2e from line 1 .				3	
4	Amounts included on Form 990, F	Part VIII, line 12, but not on line 1				
а	Investment expenses not include	ed on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII) .		4b			
С	Add lines 4a and 4b				4c	
5	Total revenue Add lines 3 and 4	c. (This must equal Form 990, Part I, line 12	2).		5	
Par	t XII Reconciliation of Ex	penses per Audited Financial State	ments	With Expenses pe	r Return.	
1		uzation answered 'Yes' on Form 990, Paldited financial statements			1	
2	Amounts included on line 1 but n					
		, ,	ء ا	I		
a	Donated services and use of facili		2a 2b		_	
b	Prior year adjustments		F			
С.	Other losses		2c		_	
d	Other (Describe in Part XIII)		2d		\dashv \square	
e	Add lines 2a through 2d				2e	
3					3	
4	· ·	Part IX, line 25, but not on line 1:	1.	I		
a	•	ed on Form 990, Part VIII, line 7b	4a		_	
b	Other (Describe in Part XIII)		4b			
С					4c	
5		4c. (This must equal Form 990, Part I, line :	18) .		5	
	t XIII Supplemental Info					
		Part II, lines 3, 5, and 9, Part III, lines 1a ar s 2d and 4b Also complete this part to prov			art V, line 4, Pa	rt X, line 2, Part
	Return Reference		Ex	planation		
See A	Addıtıonal Data Table					
				<u> </u>		
		 				

Page **4**

Schedule D (Form 990) 2018	Page 5
Part XIII Supplemental Info	mation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

Additional Data

Software ID: Software Version:

> **EIN:** 46-5051755 Name: Democracy Fund Voice Inc

Supplemental Information	
Return Reference	Exp

planation Form 990, Part X, Line 2 Payable to Democracy Fund Inc for allocation of shared services

DLN: 93493319174379 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number Democracy Fund Voice Inc 46-5051755 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 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 (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization cash (book, FMV, appraisal, noncash assistance or assistance grant or government assistance other) (1) See Additional Data (2) (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 2 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

Schedule I (Form 990) 2018						Page 2
		Domestic Individuo onal space is needed		anization answered "Yes"	s" on Form 990, Part IV, line 22	
(a) Type of grant or assi		(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)			1			
(4)						
(5)			1			
(6)			1			
(7)			1			
Part IV Supplementa	ıl Informatic	on. Provide the in	formation required in	Part I, line 2; Part III	I, column (b); and any other a	additional information.
Return Reference	Explanatio	on				
Part I, Line 2	grantees, De Grant report	Democracy Fund Voice rting under the grant	ce established detailed gra	rant agreements that gove by program and grants m	vern the use of grant funds and inc	s, and key organizational information. With each of its iclude narrative and financial report requirements reporting is often supplemented by meetings, phone

Schedule I (Form 990) 2018

Additional Data

Tempe, AZ 85281

Bipartisan Policy Center Action

1225 I Street NW Suite 1000 Washington, DC 20005

	Software ID:	l .					
		Software Version:	}				
	EIN:	46-5051755					
Name:			Democracy Fund Vo	oice Inc			
Form 990,Schedule I, Part	II Grants and	Other Assistance to	Domestic Organiza	tions and Domest	ic 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

60,000

165,000

501(c)(4)

Language Access for

Congressional Reform

Voters Convening

Advocacy

Arizona State University 86-6051042 501(c)(3) Foundation for a New American University 300 E University Drive

26-1299114

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance Defending Democracy 82-3877328 501(c)(4) 1,500,000 General Operating Together Support 700 S Washington Street Suite 310

Research and advocacy

to restore faith in U.S.

democracy

100,000

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

501(c)(4)

Alexandria, VA 22314

Defending Democracy

Alexandria, VA 22314

700 S Washington Street Suite

Together

310

82-3877328

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Faith in Texas Action 82-4237423 501(c)(4) 100.000 Pilot a new model for

learning and constituent

relationships

Suite 595 Dallas, TX 75247				
Suite 595				
1111 W Mockingbird Lane	1			inclusive local civics

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

409 7th Street NW Suite 400

Washington, DC 20004

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 04-3771598 501(c)(4) 50.000 Advocacy for the NJ Free Press Action Fund Civic Information Bill

40 Main Street Room 301
Florence, MA 01062

National States Geographic 03-0339575 501(c)(6) 150,000

Expanding GIS for Elections Data

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

3436 Magazine Street 443 New Orleans, LA 70115

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance National Vote at Home 82-2944257 501(c)(4) 75.000 Advocacy to advance Coalition vote at home

Fund

c/o URS Agents Inc 1100 H Street NW					opportunities
Suite 840 Washington, DC 20005					
NEO Philanthropy Action Fund	80-0444461	501(c)(4)	100,000		Four Freedoms Action

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

NEO Philanthropy Action Fund 45 West 36th Street 6th Floor

New York, NY 10018

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Niskanen Center for Public 47-4946572 501(c)(4) 175.000 Open Society Project

Protest Fund

Proteus Action League	22-3888268	501(c)(4)	100,000		Protecting the Right to
Policy 820 1st Street NE Suite 675 Washington, DC 20002		,,,,	·		

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

15 Research Drive

Amherst, MA 01002

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance R Street Institute 26-3477125 501(c)(3) 160.000 American Institutions

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

Floor

New York, NY 10019

1212 New York Avenue NW Suite 900 Washington, DC 20005			·		Network
Ross Initiative in Sports for Equality 423 West 55th Street 12th	47-4225769	501(c)(3)	250,000		RISE to Vote

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance

Demand Progress Action

Sixteen Thirty Fund	26-4486735	501(c)(4)	650,000		Law Works Action
1201 Connecticut Ave NW					
Suite 300					
Washington, DC 20036					

100.000

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

501(c)(4)

Sixteen Thirty Fund 1201 Connecticut Ave NW Ste

Washington, DC 20036

300

26-4486735

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance eral Operating

Research and advocacy

on online political

advertising

Stand Up Republic Inc 1940 Duke Street 2nd Floor Alexandria, VA 22314	81-5016758	501(c)(4)	475,000		General O Support
7.10.10.10.10, 171 ====1					

50,000

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

501(c)(3)

The Campaign Legal Center Inc

1411 K Street NW Suite 1400

Washington, DC 20005

04-3608387

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

Online voter registration

ladvocacy campaign

Tides Foundation 1012 Torney Avenue San Francisco, CA 94127	51-0198509	501(c)(3)	200,000		Florida Rights Restoration Coalition Education Fund
Sair Francisco, CA 54127					Ludcacion i una

75,000

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

501(c)(4)

74-2065160

TXBIZ Votes

1209 Nueces Street

Austin, TX 78701

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance United to Protect Democracy 81-4827260 501(c)(4) 100.000 General Operating 2020 Pennsylvania Avenue NW Support Suite 163 Washington, DC 20006 501(c)(3) 90,000 Welcoming America Inc 27-1049805 Connecting local and

national immigrant

welcoming activities

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

315 West Ponce de Leon

Avenue Suite

Decatur, GA 30030

500

efil	e GRAPHIC pr	rint - DO NOT PROCESS As Filed Data -	DLN	9349331	9174	379
Schedule J (Form 990)		Compensation Information		OMB No	1545-0	0047
		For certain Officers, Directors, Trustees, Key Employees,				
		Compensated Employees ► Complete if the organization answered "Yes" on Form 990,	20	2018		
	► Attach to Form 990.					
	tment of the Treasurval Revenue Service	► Go to <u>www.irs.qov/Form990</u> for instructions and the lates	st information.	Open i Insp	ectio	
Nar	ne of the organiza		Employer ident			
Den	nocracy Fund Voice I	inc	46-5051755			
Pa	rt I Questi	ons Regarding Compensation	•			
					Yes	No
1a		opiate box(es) if the organization provided any of the following to or for a per ection A, line 1a Complete Part III to provide any relevant information regar				
	First-class	s or charter travel Housing allowance or reside	ence for personal use			
	_	companions \square Payments for business use	'			
		nification and gross-up payments \square Health or social club dues o				
	☐ Discretion	nary spending account L Personal services (e g , ma	id, chauffeur, chef)			
b		xes in line 1a are checked, did the organization follow a written policy regardi all of the expenses described above? If "No," complete Part III to explain	ng payment or reimburse	ment 1b		
2	Did the organiza	ation require substantiation prior to reimbursing or allowing expenses incurre ees, officers, including the CEO/Executive Director, regarding the items check	d by all	2		
	directors, truste	ses, officers, including the CEO/Executive Director, regarding the items check	ed in line 1a?			
3		If any, of the following the filing organization used to establish the compensa				
		EO/Executive Director Check all that apply Do not check any boxes for metled organization to establish compensation of the CEO/Executive Director, but				
			·			
		ation committee				
		of other organizations Compensation consultant Approval by the board or co	•			
			·			
4	During the year, related organiza	r, did any person listed on Form 990, Part VII, Section A, line 1a, with respect ation	to the filing organization	or a		
а	_	ance payment or change-of-control payment?		4a		No
b		r receive payment from, a supplemental nonqualified retirement plan?		4b		No
c			4c		No	
	If "Yes" to any o	of lines 4a-c, list the persons and provide the applicable amounts for each item	m ın Part III			
	- 1/ \/-					
5		 i), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. ed on Form 990, Part VII, Section A, line 1a, did the organization pay or accri 	10. 3PV			
,		ontingent on the revenues of	ie ally			
а	The organization	n [?]		5a		No
b	Any related orga	anization?		5b		No
	If "Yes," on line	5a or 5b, describe in Part III				
6		ed on Form 990, Part VII, Section A, line 1a, did the organization pay or accru ontingent on the net earnings of	ue any			
а	The organization	n?		6a		No
b	Any related orga			6b		No
	•	6a or 6b, describe in Part III				
7		ed on Form 990, Part VII, Section A, line 1a, did the organization provide any escribed in lines 5 and 6? If "Yes," describe in Part III	nonfixed	7		No
8		nts reported on Form 990, Part VII, paid or accured pursuant to a contract th nitial contract exception described in Regulations section 53 4958-4(a)(3)? If				
	III FAIL III			8		No
9	If "Yes" on line 8 53 4958-6(c)?	8, did the organization also follow the rebuttable presumption procedure desc	ribed in Regulations sections	on 9		
For F		uction Act Notice, see the Instructions for Form 990.	at No 50053T Sched		990	2018

(A) Name and Title	,	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
(A) Name and Tide		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
1 Joseph Goldman President & CEO	(i)	0	0	0	0	0	0	0
	(ii)	285,451	64,125	0	21,600	13,957	385,133	0
2 Thomas Glaisyer Managing Program Director	(i)	0	0	0	0	0	0	0
Tanaging Frogram Bireccor	(ii)	197,990	15,635	0	14,794	3,021	231,440	0
Adam Ambrogi Program Director	(i)	0	0	0	0	0	0	0
Togram Director	(ii)	183,071	15,850	0	14,367	14,442	227,730	0
4 Elisabeth Wright Hawkings	(i)	0	0	0	0	0	0	0
Managing Program Director	(ii)	190,101	46,540	0	14,807	1,430	252,878	0
5 Margaret Yao Chief People Officer	(i)	0	0	0	0	0	0	0
cilier reopie Officer	(ii)	185,263	16,562	0	14,967	7,791	224,583	0
6 Srikanth Gopal VP Strategy & Programs	(i)	0	0	0	0	0	0	0
vr Strategy & Flograms	(ii)	213,134	42,702	0	17,152	14,076	287,064	0

Schedule J (Form 990) 2018 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

Schedule J (Form 990) 2018

efile GRAPHIC print - DO NOT PROCESS					DLN:	DLN: 93493319174379		
SCHEDULE O (Form 990 or 990- EZ)		Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.			000 E7	2018		
					ions on			
Department of the T	Freasury	Attach to Form 990 or 990-EZ.Go to www.irs.gov/Form990 for the latest information.				Open to Public Inspection		
Namel Bf the তিছি Democracy Fund V					Employer ident	fication number		
990 Schedul	e O, Suppl	emental Informatio	n					
Return Reference	Explanation							
Form 990, Part VI, Section A, line 2	1	, Secretary, is employed l is services for Pierre Om	•	nancial Management LLC, a con	npany t			

Return Explanation
Reference

line 8b

Form 990,
Part VI,
Section A.

Currently there are no separate committees with authority to act on behalf of the governing body

Return Explanation
Reference

Form 990,
Part VI,
Section B,
Inne 11b

The process followed for review of the Form 990 is to distribute it to the Board of Truste
es for independent review by the Board Members for review, discussion, and comment. Any qu
estions that arise are discussed and addressed by the Members of the Board of Directors

Return Explanation
Reference

line 12c

Form 990,
Part VI,
Section B.
Democracy Fund Voice, Inc. monitored and enforced its conflict of interest policy by gathe
ring from its directors and officers disclosure of conflicts of interest. The policy outli
nes a process to be undertaken if there is a potential violation of the policy.

Return Explanation
Reference

Form 990,
Part VI,
Section C,
Inne 19

Democracy Fund Voice, Inc. places a high value on ethics and transparency. Our Forms 990,
other governing documents and conflict of interest policy are available upon request

Return Reference	Explanation
Form 990, Part IX, line 11g	Consultants Program service expenses 884,734 Management and general expenses 2,013 Fund raising expenses 0 Total expenses 886,747 Consultants Out of Pocket Expenses Program se rvice expenses 7,195 Management and general expenses 219 Fundraising expenses 0 Total e xpenses 7,414 Contracted Services Program service expenses 0 Management and general expenses 12,327 Fundraising expenses 0 Total expenses 12,327 Website Support Program service

ice expenses 1,281 Management and general expenses 401 Fundraising expenses 0 Total exp enses 1,682 General & Administrative Services Program service expenses 272,890 Manageme

nt and general expenses 86.458 Fundraising expenses 0 Total expenses 359.348

Return Explanation
Reference

	Form 990	Cost Sharing Agreement As explained in Democracy Fund Voices Form 1024, Democracy Fund Voi
ı		ce and Democracy Fund are parties to a cost-sharing agreement, under which Democracy Fund
ı		charges Democracy Fund Voice for its proportionate share of office space, employee service
ı		s and administrative expenses