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. | ✓ |

Inter	nal Reven	ue Service	Go to www.irs.gov/Form990 for instructions and t	the latest	information.	010	Inspection					
AI	or the	2018 calend	dar year, or tax year beginning and e	nding								
В	Check if applicable	C Name o	of organization		D Employer id	dentifica	tion number					
_	Addres	<u>.</u>	E AMERICA INC									
X	Name change		ousiness as		82-1106814							
]Initial return		r and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone r	number						
]Final _return/	6000	E EVANS AVENUE, 1-121		720-650-7012							
_	termin- ated	City or	town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	<u> </u>	774,540.					
]Amendo	DENV	ZER, CO 80222		H(a) Is this a gi	roup retu						
L	Applica tion pending	F Name a	and address of principal officer NICK TROIANO		for suborc		Yes X No					
		SAME	AS C ABOVE	527	H(b) Are all subord							
		mpt status	501(c)(3) X 501(c) (4) ◀ (insert no.) 4947(a)(1) or PS://WWW.UNITEAMERICA.ORG/C4	1 25K	H(c) Group exe		t (see instructions)					
			X Corporation Trust Association Other	L Year	*		State of legal domicile: DE					
		Summary										
•	1 E		be the organization's mission or most significant activities UNITE		RICA, IN		ROMOTES					
Governance	<u> </u>	AND SUE	PORTS COMMON SENSE SOLUTIONS TO SOM	ME OF	OUR NATI	ON'S	MOST					
ř	2 (Check this bo	· —	d ₹ @	ttran 35% jes its i	net asset	s					
Š	3 1		ting members of the governing body (Part VI, line 1a)				<u>5</u> 5					
			dependent voting members of the governing body (Part VI, line	NOV :	10 2010	Š 4						
Activities &			of individuals employed in calendar year 2018 (Part V, line 2a)	.,,,,	1 9 2019	ا ۱ ا ام	50					
ţį	l		of volunteers (estimate if necessary) d business revenue from Part VIII, column (C), line 12	~~~		₹ <mark> 6</mark>	0.					
Ac	l		business taxable income from Form 990-T, line 38	OGD	EN, UT	7a 7b	0.					
		10t unionated	business taxable income from 1 offit 350-1, fine 55		Prior Year	-3'-5	Current Year					
_	8 (Contributions	and grants (Part VIII, line 1h)		806,4	51.	743,783.					
Revenue			ice revenue (Part VIII, line 2g)		47,4		2,942.					
e e		_	come (Part VIII, column (A), lines 3, 4, and 7d)			0.	0.					
ď			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0.	11,913.					
	12 T	otal revenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		853,8	62.	758,638.					
	13 (Grants and si	milar amounts paid (Part IX, column (A), lines 1-3)	<u> </u>		0.	33,125.					
	14 E	Benefits paid	to or for members (Part IX, column (A), line 4)	<u> </u>		0.	0.					
S	15 8		r compensation, employee benefits (Part IX, column (A), lines 5-10)	<u> </u>		0.	294,695.					
Expenses	16a F	Professional i	undraising fees (Part IX, column (A), line 11e)	<u>-</u> ├	3,7	91.	0.					
Ä	ьΤ		ing expenses (Part IX, column (D), line 25)	5.	601 3	73	401 000					
	'' \	-	es (Part IX, column (A), lines 11a-11d, 11f-24e)	<u> </u>	691,3 695,1		481,960. 809,780.					
	1	-	es Add lines 13-17 (must equal Part IX, column (A), line 25)	<u> </u>	158,6		-51,142.					
- 28		revenue less	expenses Subtract line 18 from line 12	Do.	ginning of Current		End of Year					
ets c	20 T	Total accete /	Part X, line 16)	Be	169,6		111,462.					
let Assets ind Baland	21 T		s (Part X, line 16)	<u> </u>	10,9		3,906.					
Net	22 1		fund balances Subtract line 21 from line 20	-	158,6		107,556.					
Pa		Signatur										
Und	er penalt	ties of perjury,	I declare that I have examined this return, including accompanying schodulos a	and statomo	nts, and to the bes	t of my kr	lowlodge and belief, it is					
true,	correct,	, and complete	. Declaration of preparer (other than officer) is based on all information of whic	h preparer	has any knowledge	3						
		_	gum John									
Sig	า	,	e of officer		Date	1-14	_/5					
Her	e		TROIANO, EXECUTIVE DIRECTOR			-17						
_			print name and title		Date C	hastr -	PTIN					
D-! !		Print/Type pre	112'. ' 11 11711	نا ہ	۱ ۱ ما ۱۰	heck	J					
Paid			Y A RYAN CIMBOUNT LLD	<u>ç∽ 11</u>	1. V V -1 - '	elf-emptoyed	P00829977					
	-	Firm's name	RUBINBROWN LLP 1900 16TH STREET, SUITE 300		Firm's E	IIN •	43-0765316					
USE	UIIIY	Firm's address	DENVER, CO 80202		Dhone n	3 1 2 .	-698-1883					
Mar	the IP	S discuse the	s return with the preparer shown above? (see instructions)			0.505	X Yes No					
· v · cı y	THE ILE	. aiscuss (i ii	S reterm with the preparer shown abover (see instructions)				140_					

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2018)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

832002 12-31-18

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82-1106814 Page 3 UNITE AMERICA INC Form 990 (2018) Part IV | Checklist of Required Schedules Yes No 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? X If "Yes," complete Schedule A X 2 2 Is the organization required to complete Schedule B, Schedule of Contributors? 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for X 3 public office? If "Yes," complete Schedule C, Part I 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 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or X 5 similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to Х 6 provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, Х the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Х 8 Schedule D, Part III 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? X If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent X 10 endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, X 11a Part VI b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total X 11c assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VIII d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Х 11d Part X, line 16? If "Yes," complete Schedule D, Part IX Х e Did the organization report an amount for other liabilities in Part X, line 257 If "Yes," complete Schedule D, Part X 11e f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X 12a Schedule D. Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? 12b If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a 14a Did the organization maintain an office, employees, or agents outside of the United States? 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 Х 14b or more? If "Yes," complete Schedule F, Parts I and IV 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 X 15 foreign organization? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to X 16 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, X column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 18 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 complete Schedule G, Part III

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

21

20a

20b

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?
 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	<u></u>	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	ĺ	ĺ	ĺ
	Schedule J	23	X	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No," go to line 25a	24a		X
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
Ī	any tax-exempt bonds?	24c		
н	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
U	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete		1	ĺ
	, , ,	25b		x
26	Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	230		
20				
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"	00		х
	complete Schedule L, Part II	26	\vdash	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			ĺ
	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	\vdash	X
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)			-
	, , , , , , , , , , , , , , , , , , , ,	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	$\vdash \vdash \vdash$	X
¢	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29_	igsqcut	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	igsquare	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31	igsquare	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			l
	Part V, line 1	34	Х	<u> </u>
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	<u> </u>
Ь	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	L	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?)]		İ
	If "Yes," complete Schedule R, Part V, line 2	36_		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	L
Par				
	Check if Schedule O contains a response or note to any line in this Part V			X
]	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0			
Ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	j		
¢	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
	40.04.40		agn /	0010

Enter the number of employees reported on Form W-S, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return. Mote, If the sum of lines 1a and 2a is greater than 250, you may be required found employment tax returns? Note, If the sum of lines 1a and 2a is greater than 250, you may be required found employment tax returns?	Pa	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
bit at least one is reported on the 2a, did the organization file all repaired federal employment tax returns? Note, if the sum of lines 1s and 2s is greater than 250, you may be required to a-side (lees instructions) 2				Yes	No
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Ab Did the organization have unrealed business gross income of \$1,000 or more dump the year? Ji 17'es; *has it filed a Form 990 Tro this year? *i *No* to line 3b, provide an explanation in Schedule O At any time dump the calendary year, did the organization have a marteret in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account or financial account in a foreign country. *See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Sa Was the organization for foreign country. *See Was the organization for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Sa Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization for filing filing the organization fil	2 a		-		
Note. If the sum of lines 1s and 2s is greater than 250, you may be required to -bile (see instructions) 3		and the state carefully was or any was a state of the sta	 -		
3a	ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	-	
b If "Yes," has it field a Form 990-T for this year? If No." to field a Republishment on Schedule O 4a At any time during the celendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? b If "Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial accounts (FBAR). 5a Was the organization a party to a prohibitor for the standard and the securities account or other financial Accounts (FBAR). 5a Was the organization a party to a prohibitor for the standard and financial Accounts (FBAR). 5b Ill of the securities of the organization for the securities of the securities of the organization securities of the organization for the organization set was or as a party to a prohibitor set where the organization select any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solication an express statement that such contributions or gifts were not tax deductible? 7 organizations that may receive deductible contributions under section 170(c). b If "Yes," did the organization network a pignetin in excess of \$15 made party as contribution and party for goods and services provided? 7 b If "Yes," did the organization network and privation property for which it was required to file Form 8282? 7 b If "Yes," did the organization network and supplied presonal property for which it was required to file Form 8282? filed during the year c Dot the organization developed and section of qualified triblectual property, did the organization file a form 8282 filed during the year c Dot the organization organization and section shall be property, did the organization file a form 1088-C? 8 ponsoring organization secured accombination of qualified triblectual property, did the organization file a form 1088-C? 8 ponsoring organization seminativing donor advised fu		• • • • • • • • • • • • • • • • • • • •	<u> </u>		 -
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accountly over, a financial account in a foreign country. ▶ b If "Yes," enter the name of the foreign country. ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization aperty to a prohibited tax shelter transaction at any time during the tax year? 5b Id any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes" to line Saor 5b, did the organization file Form 88867? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax eductible? 5c If "Yes," did the organization not tax deductible is a chariable contributions? 5c If "Yes," did the organization in excess of \$75 made party is a contribution and party for goods and services provided to the payor? 7c If "Yes," indicate the number of form \$822 filed during the year 7d If "Yes," indicate the number of Forms \$822 filed during the year 7d Dot the organization sell, exchange, or otherwise dispose of tangbile personal property for which it was required to file Form 88897? 6 If the organization received a contribution of qualified intellectual property, did the organization file Form \$822 filed during the year 7d Dot the organization received a contribution of qualified intellectual property, did the organization file Form \$899 as required? 7f If the organization received a contribution of cars, boats, arighnes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations make any taxable distributions under section 49867 9 Sponsoring organizations make any taxable distributions under section 49867 9 Sponsoring organizations make any taxable distributions under section 49867 10a the sponsoring organization make any taxable distributions under se			-	├	<u> X</u>
financial account in a foreign country (such as a bank account, securities account, or other financial account)? b If "Yes," enter the name of the foreign country. See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6b If "Yes" to line 6a or 5b, dot the organization file form 8886-f7? 6c If "Yes" to line 6a or 5b, dot the organization file form 8886-f7? 6a Does the organization she amount gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that may receive deductible as charable contributions? 6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8d Did the organization receive a payment in excess of \$75 made party as a contribution of prome 8200 and services provided? 7c Did the organization sell, exchange, or otherwise dispose of tangbite personal property for which it was required to file Form 8202? 8d If "Yes," indicate the number of Forms 8222 filed during the year 9d If the organization received accontribution of qualified intellectual property, did the organization file a Form 1098-C? 9d If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 9d Spensoring organization make any taxable distributions under section 4986? 9d Did the sponsoring organization make any taxable distributions under section 4986? 9d Did the sponsoring organization make any taxable distributions under section 4986? 9d Press, a financial proparation organization make any taxable distributions under sources gainst amounts due or received from them?			3b		_
b If "Yes," canter the name of the foreign country. See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shelter transaction of any time during the tax year? 5b D dary taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c D loss the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 5c D If "Yes," did the organization not tax deductible as charitable contributions? 5d A X 5d Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that may receive deductible contributions an express statement that such contributions or gifts were not tax deductible? 7d Organizations that may receive deductible contributions under section 170(c). 8 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7d Uffer organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8822? 8 If "Yes," indicate the number of Forms 8222 filed during the year 9 If "Yes," indicate the number of Forms 8222 filed during the year 1 If the organization received a contribution of qualified intellectual property, did the organization file Form 8999 as required? 9 If the organization received a contribution of qualified intellectual property, did the organization file Form 8999 as required? 9 If the organization received a contribution of qualified intellectual property, did the organization file Form 8999 as required? 9 Sponsoring organizations make any taxable distributions under section 4966? 9 Sponsoring organization make any taxable distributions under section 4966? 9 Sponsoring organizations make any taxable distributions under sec	4a				
See instructions for filing requirements for FinCCH Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5 Was the organization a party to a prohibited tax shelfer transaction at any time during the tax year? 5 If "Yes" to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelfer transaction? 5 If "Yes" to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelfer transaction? 5 If "Yes" to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelfer transaction? 5 If "Yes" to line 5a or 5b, did the organization child shelf or the sea	_		4a		Α.
5a Was the organization a party to a prohibited tax shefer transaction at any time during the tax year? b Dd any taxable party notify the organization that it was or a party to a prohibited tax shefter transaction? c Dese the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that terms on tax dedicatible as charitable contributions? c Dese the organization include with every solicitation an express statement that such contributions or gifts were not tax dedicatible? b if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax dedicatible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? b if "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d if "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? if if the organization received a contribution of cars, boats, anglenaes, or other vehicles, did the organization file Form 1098 C? Sponsoring organization make all statibution to a donor advised funds. a Did the sponsoring organization make all statibution to a donor, donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring forganizations maintaining donor advised funds. a Did the sponsoring organization make all statibution to a donor, donor advised fund maintained property file and p	þ				
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c if "Yes" to line 5 or 55, did the organization file Form 8885-T? d Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? b if "Yes," did the organization reclude with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 7 b if "Yes," did the organization notify the donor of the value of the goods or services provided? 10 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 c X 11 b if Yes," indicate the number of Forms 8282 filed during the year 12 b if the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 c X 7 if the organization receive any funds, directly or indirectly, on a personal benefit contract? 8 ponsoring organization may the year, pay premiums, directly or indirectly, on a personal benefit contract? 9 if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1088-C? 8 Sponsoring organizations maintaining donor advised funds. Did donor advised funds by the sponsoring organizations maintaining donor advised funds. 9 a Did the sponsoring organization make a distribution to a donor, donor advised fund maintained by the sponsoring organization make a distribution to a donor, donor advised fund maintained by the sponsoring organization make a distribution to a donor advised fund funding the year? 9 Sponsoring organizations included on Part VIII, line 12 10 d the organization to the except				_	 -
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16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.			15		
If "Yes," complete Form 4720, Schedule O.	16		46		<u>.</u>
	10	·	10		<u> </u>
		ii 199, Compiete i Vitti 4720, Conedule O.	Form	990	(2018)

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	990'(2018) UNITE AMERICA INC		82-1106			age 6
Pa	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 th	rough	7b below, and for a '	'No" re	spons	e
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O	See ın	structions			
	Check if Schedule O contains a response or note to any line in this Part VI					X
Sec	tion A. Governing Body and Management				V	Γ
4-	The sale and the town and the t	1a	ا 5		Yes	No
ıa	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing	la.		1 1		
	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	5			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship		<u> </u>			
	officer, director, trustee, or key employee?		•	2		X
3	Did the organization delegate control over management duties customarily performed by or under the	direct	t supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?			3	X	
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 wa:	s filed?	4	Х	L
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		5		<u>X</u>
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point o	one or			
	more members of the governing body?			7a		<u>X</u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	ockho	ders, or			77
_	persons other than the governing body?		<i>t</i> -0	7b		<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	r by the	tollowing:	~	$\overline{\mathbf{x}}$	
	The governing body? Each committee with authority to act on behalf of the governing body?			8a 8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	rhed a	t the	00_		
·	organization's mailing address? If "Yes," provide the names and addresses in Schedule O), 100 u		9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)			
	-		•		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a	_	_X
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters	, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body	befor	e filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990					
	Did the organization have a written conflict of interest policy? If "No," go to line 13		leate O	12a	Х	x
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es, a	escribe	12c	х	
13	in Schedule O how this was done Did the organization have a written whistleblower policy?			13	x	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approval	by inc	dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	•	•			
а	The organization's CEO, Executive Director, or top management official			15a	X	<u></u>
b	Other officers or key employees of the organization			15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)					i
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	ent w	th a			لــــا
	taxable entity during the year?			16a		<u> </u>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat					
·	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	ization	S	466		
Sec	exempt status with respect to such arrangements?			16b		—
17	List the states with which a copy of this Form 990 is required to be filed NONE					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and	d 990-	T (Section 501(c)(3)s	only) a	vailab	
	for public inspection. Indicate how you made these available. Check all that apply					
	Own website X Another's website Upon request Other (explain	ın Sch	nedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, con			financı	al	
	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 boo	ks and	records 🕨			
	NICK TROIANO - 720-650-7012					
	6000 E EVANS AVENUE, DENVER, CO 80222				000	(0045)
832006	12-31-18			Form	390 ((2018)

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

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

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

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

X Check this box if neither the organiza (A) Name and Title	(B) Average			(C Pos	C) ition			(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	offi	, unte	ss pei	rson is both an irector/trustee)		an r	compensation from	compensation from related	amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W·2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) KATHERINE GEHL	1.00							_	_	_
DIRECTOR		Х	<u> </u>				<u> </u>	0.	0.	0
(2) MARC MERRILL	1.00									_
DIRECTOR		X	-			_	<u> </u>	0.	0.	0
(3) LISA RICE	1.00					1			_	_
DIRECTOR (4) CHARLES WHEELAN	1.00	X	 			<u> </u>	⊢	0.	0.	0
(4) CHARLES WHEELAN CHAIRMAN	1.00	x		x				0.	0.	0
(5) BEN GOLDHIRSH	1.00	^	-	Δ		-	\vdash	<u> </u>		
DIRECTOR	1.00	x						0.	0.	0
(6) NICK TROIANO	13.00		\vdash			\vdash	\vdash			
EXECUTIVE DIRECTOR		1		x				0.	0.	0
			_							
									_	!

832007 12-31-18

Form **990** (2018)

	t VII	Section A. Offi	icers. Directors. Trus	tees. Kev Emi	olov	ees.	and	d His	ghes	st C	Compensated Employee	s (continued)			9	_
_		(A)		(B) (C)							(D)	(E)			(F)	_
		Name and	d title	Average hours per		not c	check more than one ess person is both an				Reportable compensation	Reportable compensatio	- 1		imated ount of	
				week	off				or/trus		from	from related	ı		other	
				(list any hours for	Individual trustee or director	ļ			, n		the organization	organization: (W-2/1099-MIS		compensation from the		n
				related	stee or	trustee			pensate		(W-2/1099-MISC)	,		_	nization	
				organizations below	fuat tru	Institutional 1		Кеу етріоуее	st com	<u> </u>					related nizations	
				line)	N P	Instit	Officer	Key er	Righest compensated employee	Former						
_																
	,									_		<u> </u>	\neg			
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	Sub-t		_								0.		0.			<u>) .</u>
		from continuat (add lin <u>es 1b</u> a	tion sheets to Part VII	, Section A							0.		0.) <u>.</u>
				ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable				_
	compe	ensation from th	he organization												Yes N	0 lo
3	Did th	e organization l	ist any former officer,	director, or tru	ıste	e, ke	y en	nplo	уөө,	or	highest compensated er	nployee on	ſ			
_			plete Schedule J for s					.		-41		L	ŀ	3		<u></u>
4		•	ed on line 1a, is the su lions greater than \$150			-					ner compensation from t	ne organization		4	-	_
5											ed organization or individ	dual for services	Ī			_
			nization? If "Yes." com	plete Schedule	Jf	or su	ıch j	oers	on					5	<u> </u>	_
1		Independent C		mpensated ind	lono	nder	at co	ntro	ector	re th	hat received more than \$	100 000 of comp	encat	on from		_
			-	•							the organization's tax y		onsat	1071 1101		
			(A) Name and business	addraca							(B) Description of s	onuces	0	(C) ompen		
POL	EST	AR INC.	, 6000 E EV		NII	E.				\dashv	Description of s	ei vices		ompen		
			CO 80222			_,					MANAGEMENT S	ERVICES		304	,694	
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	Total r	number of inder		ncludina but no	ot lin	nited	l to 1	thos	e lis	ted	above) who received mo	ore than				
			sation from the organiz		- •••			1								
						_							-	Form 9	90 (201	8)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under sections 512 - 514 (C) Unrelated (B) Related or Total revenue exempt function business revenue revenue 1a 1 a Federated campaigns 66,499 1b **b** Membership dues c Fundraising events d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and 677,284 similar amounts not included above Q Noncash contributions included in lines 1a-1f \$ 743,783. Total. Add lines 1a-1f Business Code 2,942. 2,942. 2 a OTHER PROGRAM REVENUE 541900 f All other program service revenue 2,942. Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6 a Gross rents b Less rental expenses Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Uther assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Revenue including \$ contributions reported on line 1c). See Part IV, line 18 **b** Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 **b** Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 27,815. and allowances 15,902. **b** Less cost of goods sold 11,913. 11,913. c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a d All other revenue e Total. Add lines 11a-11d 758,638. 14,855. Total revenue. See instructions Form 990 (2018)

	ion 501(c)(3) and 501(c)(4) organizations must comple Check if Schedule O contains a respons		his Part IX		X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations	22.425	22.405		
	and domestic governments. See Part IV, line 21	33,125.	33,125.		
2	Grants and other assistance to domestic				
	ındıvıduals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,		44 500		
	trustees, and key employees	44,533.	44,533.		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)			<u> </u>	
7	Other salaries and wages	224,432.	224,432.		
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	3,944.	3,944.		
10	Payroll taxes	21,786.	21,786.		
11	Fees for services (non-employees)	40.000	10 000		
а	Management	10,000.	10,000.	07 507	
b	Legal	27,587.		27,587.	
C	Accounting	16,281.		16,281.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees			-	
g	Other (If line 11g amount exceeds 10% of line 25,	450 505	450 640		
	column (A) amount, list line 11g expenses on Sch O.)	153,505.	150,612.	2,893.	
12	Advertising and promotion	90,197.	90,197.		0 100
13	Office expenses	62,852.	60,210.	449.	2,193
14	Information technology	18,135.	17,876.	259.	
15	Royalties	44.665	14 665		
16	Occupancy	14,665.	14,665.		E 310
17	Travel	56,609.	51,292.		5,317
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				·
20	Interest				···
21	Payments to affiliates				-
22	Depreciation, depletion, and amortization			- E 000	
23	Insurance	5,002.		5,002.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)			,	
а	DIRECT PROGRAM EXPENSES	15,245.	15,245.		
ь	BANK FEES	6,383.	-	150.	6,233
c	MISCELLANEOUS EXPENSES	5,499.	5,467.		32
d		•			
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	809,780.	743,384.	52,621.	13,775
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 rf following SOP 98-2 (ASC 958-720)				

ar	t X	Balance Sheet				
		Check if Schedule O contains a response or note	to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		53,140.	1	57,462
	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 for	mer officers, directors.			<u> </u>
-	•	trustees, key employees, and highest compensat				_
1		Part II of Schedule L			5	
1	6	Loans and other receivables from other disqualifi	ed persons (as defined under			
1		section 4958(f)(1)), persons described in section	' '			
1		employers and sponsoring organizations of secti	= 1			
П		employees' beneficiary organizations (see instr)			6	
	7	Notes and loans receivable, net			7	-
	8	Inventories for sale or use			8	
1	9	Prepaid expenses and deferred charges		62,108.	9	
1		Land, buildings, and equipment cost or other	ı			
1	.04	basis Complete Part VI of Schedule D	10a			
1	ь	Less accumulated depreciation	10b		10c	
1	11	Investments - publicly traded securities	100		11	
İ	12	Investments - other securities See Part IV, line 1	,		12	
1	13	Investments - program-related See Part IV, line 1		13		
	14	Intangible assets		14		
	15	Other assets See Part IV, line 11	Ì	54,404.	15	54,00
	16	Total assets. Add lines 1 through 15 (must equa	1 line 34)	169,652.	16	111,46
†	17	Accounts payable and accrued expenses	1 1110 0 47	10,954.	17	3,90
١	18	Grants payable	ļ	20/2021	18	
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities	ľ		20	
	21	Escrow or custodial account liability Complete F	art IV of Schedule D		21	
	22	Loans and other payables to current and former				
	~	key employees, highest compensated employees				
		Complete Part II of Schedule L	, and disquamou persons		22	· · · · · · · · · · · · · · · · · · ·
	23	Secured mortgages and notes payable to unrelate	ed third parties		23	
İ	23 24	Unsecured notes and loans payable to unrelated	· · · · · · · · · · · · · · · · · · ·		24	
	2 4 25	Other liabilities (including federal income tax, pay	· · · · · · · · · · · · · · · · · · ·	*		
1	23	parties, and other liabilities not included on lines				
		Schedule D	17 24). Complete Fart X of		25	
	26	Total liabilities. Add lines 17 through 25	•	10,954.	26	3,90
†	20	Organizations that follow SFAS 117 (ASC 958)	check here			
1		complete lines 27 through 29, and lines 33 and				
1	27	Unrestricted net assets		158,698.	27	107,55
	28	Temporarily restricted net assets			28	
	29 29	Permanently restricted net assets			29	
	7	Organizations that do not follow SFAS 117 (AS	C 958) check here		71	
	1	and complete lines 30 through 34.		-		
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equ	upment fund		31	
	32	Retained earnings, endowment, accumulated inc			32	
	32 33	Total net assets or fund balances	omo, or other failes	158,698.	33	107,55
	33 24	Total liabilities and net assets/fund balances	ŀ	169,652.	34	111,46
	<u>34</u>	i Otal liabilities and net assets/fund balances			77	Form 990 (20

	1 990 (2018) UNITE AMERICA_INC	82-11	06814	Page	₉ 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
		1 1			
1	Total revenue (must equal Part VIII, column (A), line 12)			,63	
2	Total expenses (must equal Part IX, column (A), line 25)	2		,78	
3	Revenue less expenses Subtract line 2 from line 1	3		,14	_
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	<u> 158</u>	,69	<u>8.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			<u>o.</u>
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	<u> </u>	<u>, 55</u>	<u>6.</u>
Pa	rt XII Financial Statements and Reporting			_	
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		_		1
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.		_	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>x</u> _
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a		ļ	- 1
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis		-	_	
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			- 1
	consolidated basis, or both			i	i
	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		_	
За					
	Act and OMB Circular A-133?		3a		<u>x</u> _
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	L	
			Earm (വവ ഗ	

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

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Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

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

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C.
- 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	t) (see sep	parate instructions), then				
		01(c)(4), (5), or (6) organiza	tions Complete Part III			
Nar	ne of orga	nization			En	nployer identification number
_		UNITE A	MERICA INC			82-1106814
P	art I-A	Complete if the org	janization is exempt unde	r section 501(c) o	r is a section 527	organization.
			,			
		, ,	zation's direct and indirect politica	il campaign activities in		
		campaign activity expendit			•	·\$
3	Voluntee	er hours for political campa	ign activities			
Pa	art I-B	Complete if the org	janization is exempt unde	r section 501(c)(3).	
1	Enter the	amount of any excise tax	incurred by the organization unde	er section 4955		· \$
2	Enter the	amount of any excise tax	incurred by organization manager	rs under section 4955	•	· \$
3	If the org	janization incurred a sectio	n 4955 tax, did it file Form 4720 f	or this year?		Yes No
48	a Was a c	orrection made?				Yes No
	o If "Yes,"	describe in Part IV.				
P	art I-C	Complete if the org	janization is exempt unde	r section 501(c), e	except section 501	(c)(3).
1	Enter the	amount directly expended	by the filing organization for sec	tion 527 exempt function	on activities	· \$
2	Enter the	amount of the filing organ	ization's funds contributed to oth	er organizations for sec	ction 527	
	exempt	function activities			•	·\$
3	Total exe	empt function expenditures	s. Add lines 1 and 2 Enter here an	d on Form 1120-POL,		
	line 17b				•	• \$
4	Did the f	iling organization file Form	1120-POL for this year?			Yes No
5	Enter the	e names, addresses and en	nployer identification number (EIN) of all section 527 poli	tical organizations to wh	ich the filing organization
	•		tion listed, enter the amount paid			
		·	omptly and directly delivered to a		•	rate segregated fund or a
_	political	action committee (PAC) If	additional space is needed, provide	de information in Part IV	<u>/</u>	
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from	
					filing organization's	
					funds. If none, enter -	delivered to a separate
						political organization
_						If none, enter -0-
—			<u>. </u>	 	<u> </u>	
					1	
—				 		
				1		
				<u> </u>	L	

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

Schedule C (Form 990 or 990-EZ) 2018

LHA

832041 11-08-18

Schedule C (Form 990 or 990 EZ) 2018 U Part II-A Complete if the orga	NITE nizatio	AMERI on is exen	CA INC npt under section	n 501(c)(3) and file	82-: d Form 5768 (el	L106814 Page 2 ection under
section 501(h)). A Check In the filing organization	on belon	gs to an affi	liated group (and list i	n Part IV each affiliated (group member's nan	ne, address, EIN,
expenses, and share	of exces	s lobbying e	expenditures)			
		ed box A ar bying Expe	nd "limited control" pr nditures	ovisions apply	(a) Filing organization's	(b) Affiliated group totals
(The term "expendi	tures" m	ieans amou	nts paid or incurred	.)	totals	1333.3
1a Total lobbying expenditures to influe	nce nuh	lic opinion (grass roots lobbying)			
b Total lobbying expenditures to influe						
c Total lobbying expenditures (add line			, (,,,,			
d Other exempt purpose expenditures		,				
e Total exempt purpose expenditures		s 1c and 1d)			
f Lobbying nontaxable amount. Enter	-			th columns		
If the amount on line 1e, column (a) or			bying nontaxable an	1.6		
Not over \$500,000	(2) 10.		the amount on line 1e			
Over \$500,000 but not over \$1,000,0	000		00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,500			00 plus 10% of the exc			'
Over \$1,500,000 but not over \$17,00			00 plus 5% of the exce			
Over \$17,000,000		\$1,000,				
9.5. \$ 0.00 0.00		- - -				
g Grassroots nontaxable amount (ente	er 25% of	f line 1f)				
h Subtract line 1g from line 1a If zero						
i Subtract line 1f from line 1c If zero						
j If there is an amount other than zero	on eithe	r line 1h or l	line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this ye						Yes No
(Some organizations that	ıt made	a section 5	eraging Period Unde 01(h) election do not ate instructions for li	have to complete all o	f the five columns b	elow.
	Lob	bying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year / (or fiscal year beginning in)	(a)	2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount (150% of line 2a, column(e))						
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount (150% of line 2d, column (e))						

832042 11-08-18

Schedule C (Form 990 or 990-EZ) 2018

Schedule C (Form 990 or 990 EZ) 2018 UNITE AMERICA INC 82-1106814 Page 3 Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(:	a)		(b)		
	e lobbying activity	Yes	N	0	Amo	unt	
1	During the year, did the filing organization attempt to influence foreign, national, state, or					1	
	local legislation, including any attempt to influence public opinion on a legislative matter					ì	
	or referendum, through the use of					:	
а	Volunteers?						
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?						
С	Media advertisements?						
d	Mailings to members, legislators, or the public?						
е	Publications, or published or broadcast statements?						
f	Grants to other organizations for lobbying purposes?						
g	Direct contact with legislators, their staffs, government officials, or a legislative body?						
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				•		
i	Other activities?						
i	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)?				-		
	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						
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				·		
	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)(5), or	sec	tion		
	501(c)(6).		,,				
	,		,		Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?		۲	1	х		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	X		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from t	he prior vear	,卜	3	/	x	
	t III-B Complete if the organization is exempt under section 501(c)(4), section	on 501(c)(5), or		tion		
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered					3, is	
	answered "Yes."	,	<u> </u>		,		
1	Dues, assessments and similar amounts from members		L	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	ical					
	expenses for which the section 527(f) tax was paid).						
а	Current year		L	2a			
ь	Carryover from last year		Ĺ	2b			
c	Total			2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues			3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess	Γ			<u>-</u> -	
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and						
	expenditure next year?		ľ	4			
5	Taxable amount of lobbying and political expenditures (see instructions)			5			
Par							
Provi	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou	n list) Part II-	A line	s 1 ar	nd 2 (see		
	actions), and Part II-B, line 1 Also, complete this part for any additional information	p, r u	,		(, , , ,		
	ictions), and Fart ind, line is Also, complete this part for any additional information						
						··	
					-		

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

Open to Public Inspection

OMB No 1545-0047

Name of the organization

Employer identification number

	UNITE AMERICA INC	J. E Oak Oissilan Evenda as		82-1106814
Pa	t I Organizations Maintaining Donor Advised	a Funds or Other Similar Funds of	ACCOU	nts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line			
		(a) Donor advised funds	(b) Fu	nds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advised	funds	
	are the organization's property, subject to the organization's	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ad	dvisors in writing that grant funds can be us	ed only	
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for any other purpose cor	nferring	
	impermissible private benefit?			Yes No
Pa	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, Pai	rt IV, line 7	'. <u>. </u>
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)		
	Preservation of land for public use (e.g., recreation or ed	ducation) Preservation of a histori	cally impo	rtant land area
	Protection of natural habitat	Preservation of a certific	ed historic	structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualific	ed conservation contribution in the form of	a co <u>nserv</u> a	ation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements		2a	
ь	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c	
d	Number of conservation easements included in (c) acquired a	fter 7/25/06, and not on a historic structure		
	listed in the National Register		2d	
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the or	ganization	during the tax
	year ▶			
4	Number of states where property subject to conservation eas	ement is located		
5	Does the organization have a written policy regarding the peri			
	violations, and enforcement of the conservation easements it			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, I	handling of violations, and enforcing conserv	vation eas	ements during the year
	>			
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservation	n easemer	nts during the year
	▶ \$			
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)(4	4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense sta	atement, a	nd balance sheet, and
	include, if applicable, the text of the footnote to the organization	ion's financial statements that describes the	organizat	ion's accounting for
	conservation easements			
Pa	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Other	er Simila	ır Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8		
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue statemen	it and bala	nce sheet works of art,
	historical treasures, or other similar assets held for public exh	ibition, education, or research in furtherance	of public	service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ	oes these items		
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement an	d balance	sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	lucation, or research in furtherance of public	service, p	provide the following amounts
	relating to these items	·		
	(i) Revenue included on Form 990, Part VIII, line 1		•	\$
	(ii) Assets included in Form 990, Part X		•	\$ \$
2	If the organization received or held works of art, historical trea	asures, or other similar assets for financial da		
	the following amounts required to be reported under SFAS 11			
а	Revenue included on Form 990, Part VIII, line 1	· •	•	\$
	Assets included in Form 990, Part X			\$

Schedule D (Form 990) 2018

· <u>Şche</u>		MERICA INC		.,					06814		ge 2
Pa	t III Organizations Maintaining C								_		
3	Using the organization's acquisition, accessi	on, and other record	s, check	any of the f	following that are a	signifi	cant u	ise of its c	ollection if	tems	
	(check all that apply)										
а	Public exhibition	d			hange programs						
b	Scholarly research	е	,	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co							se in Part	XIII		
5	During the year, did the organization solicit o					ar ass	ets	_	٦		
	to be sold to raise funds rather than to be ma								Yes		No
Pai	t IV Escrow and Custodial Arran	-	ete if the	organizatio	n answered "Yes" o	n For	m 990), Part IV,	line 9, or		
	reported an amount on Form 990, Pa	*****									
1a	Is the organization an agent, trustee, custodi	an or other intermed	lary for c	contributions	s or other assets no	t inclu	ided	_	٦.,	$\overline{}$	
	on Form 990, Part X?								」Yes	ш	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing ta	able		ſ			Amarint		
	S balance					ŀ	4-		Amount		
	Beginning balance					- 1	1c				
a	Additions during the year					ŀ	1d 1e				
e	Distributions during the year					ŀ	1f				
f 2a	Ending balance Did the organization include an amount on Fe	orm 000 Part Y line	21 for e	ecrow or cu	etodial account liah	ulity?			Yes	П	No
	If "Yes," explain the arrangement in Part XIII							<u> </u>	J 103	H	140
Par											
		(a) Current year		rior year	(c) Two years back	1	Three v	ears back	(e) Four	ears b	ack
1a	Beginning of year balance	(a) canoni you	(5).	110. 100.	(0) 1110) 0110 0110	 \			197		
b	Contributions										
c	Net investment earnings, gains, and losses			<u> </u>							
d	Grants or scholarships										
	Other expenditures for facilities					1					
	and programs					1					
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent year end balance	e (line 1g	ı, column (a)) held as						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment	%									
С	Temporarily restricted endowment	%									
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%									
3a	Are there endowment funds not in the posse	ssion of the organiza	ition that	t are held an	nd administered for	the or	ganıza	ation	_		
	by								4	res	<u>No</u>
	(i) unrelated organizations								3a(i)	_	
	(ii) related organizations								3a(ii)	-	
	If "Yes" on line 3a(ii), are the related organiza	•							3b		
	Describe in Part XIII the intended uses of the		wment fu	unds				-			
Par	t VI Land, Buildings, and Equipm				5 200 Dt \		40				
	Complete if the organization answered				1				(d) D=='	- د داهید	—
	Description of property	(a) Cost or o				Accur leprec			(d) Book	value	
	1 1	basis (investr	ileili)	basis	(Otrier)	epie0	iatiUil				
	Land				-						—
	Buildings									_	—
	Leasehold improvements							- -			
	Equipment					-		- -			—
	Other	avel Form 000 Port	<u> </u>	n /P) line 1/							0.

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018

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

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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

2018

OMB No 1545-0047

Employer identification number 82-1106814 Open to Public Inspection

> UNITE AMERICA INC Part I General Information on Grants and Assistance Name of the organization

X Yes 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States cntena used to award the grants or assistance?

ջ

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. But II can be displicated if additional or Part II

recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	65,000 Part II can	be duplicated if additing	onal space is neede	ğ			
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
CHOCK COLUMN							TO SUPPORT THE MISSION OF
UNITE COLORADO GRASS ROCTS							ELECTING INDEPENDENT
AVENUE, 1-121 - DENVER, CO 80222			12,250.	0.			STATE DEGISTATIVE CANDIDATES IN COLORADO.
COMMITTEE FOR RANKED CHOICE VOTING							TO SUPPORT THE MISSION OF
P.O. BOX 928							GETTING RANKED CHOICE
GORHAM, ME 04038	47-2195043	501(C)(4)	5,000.	0.			VOTING APPROVED IN MAINE.
FAIR MAPS COLORADO							TO SUPPOR THE MISSION OF
820 S. MONACO PARKWAY, #824							ENDING GERRYMANDERING IN
DENVER, CO 80224			5,000.	0.			COLORADO.
MAINE INDEPENDENTS ACTION FUND							
P.O. BOX 928							
GORHAM , МЕ 04038	82-1800072		5,000.	0.			GENERAL OPERATING SUPPORT
	nd government or	ganizations listed in th	e line 1 table				
3 Enter total number of other organizations listed in the line 1 table	s listed in the line	1 table					4.

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

832101 11-02-18

Schedule I (Form 990) (2018)

Page 2

82-1106814

Schedule I (Form 990) (2018) UNITE AMERICA INC

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

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	uired in Part I, line	2, Part III, column	(b), and any other ad	ditional information	
PART I, LINE 2:					
NITE AMERICA, INC. CHECKS IN REGUI	LARLY WIT	CARLY WITH OUR GRANTEES	TEES TO VE	TO VERIFY GRANTED	
TUNDS ARE SPENT APPROPRIATELY.					

Schedule I (Form 990) (2018)

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SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

	UNITE AMERICA INC	82-11068	14	
Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form	∍ 90,		
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.		1	
	First-class or charter travel Housing allowance or residence for person	nal use		
	Travel for companions Payments for business use of personal res	idence	1	
	Tax indemnification and gross-up payments Health or social club dues or initiation fees	;		
	Discretionary spending account Personal services (such as maid, chauffeu	r, chef)	-	
	<u> </u>		1	
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or		_	
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	<u>1b</u>		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,		_	
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	<u> </u>	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization	ion's		
	CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization			
	establish compensation of the CEO/Executive Director, but explain in Part III.		1	
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation or	ommittee		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization	. 	_	-
а	Receive a severance payment or change-of-control payment?	4a		X
Ь	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	_4b	+	X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	_ <u>4c</u>	-	X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			1
				-
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	1		
	contingent on the revenues of	-	_	X
	The organization?	5a	$\overline{}$	$\frac{1}{x}$
b	Any related organization?	36	' 	+*
_	if "Yes" on line 5a or 5b, describe in Part III	_		-
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	1		
	contingent on the net earnings of	6a	_	X
	The organization?	6b	\rightarrow	$\frac{n}{x}$
D	Any related organization?	00	' 	+*
~	If "Yes" on line 6a or 6b, describe in Part III			
′	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	7	- -	<u> </u>
o	not described on lines 5 and 6? If "Yes," describe in Part III		+	+*
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	8	- -	- x
	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	-	+	+*
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	9	-	-

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

Schedule J (Form 990) 2018

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

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

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

		(B) Breakdown of \	of W-2 and/or 1099-MISC compensation	3C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	"
					other deferred	benefits	(B)(i)-(D)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			o o
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Schedule J (Form 990) 2018

Schedule J (Form 990) 2018	Part III Supplemental Information	Provide the information, explanation, or
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information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a,

ORM 990, PART VII, SECTION A, LINE 5
NITE AMERICA, INC. HAS DELEGATED ALMOST ALL MANAGEMENT
ESPONSIBILITIES TO POLESTAR, INC., INCLUDING STAFFING OF THE
RGANIZATION. AS PART OF THIS ARRANGEMENT, NICK TROIANO, EXECUTIVE
OMPENSATION THAT WAS PAID BY UNITE AMERICA TO POLESTAR FOR MR.
ROIANO'S SERVICES WAS \$44,533, WHICH INCLUDED \$43,333 FOR SALARY AND
BENEFITS.
Schadula Herm 0001 9048

· SCHEDULE L

Transactions With Interested Persons

(Form 990 or 990-EZ)

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

OMB No 1545-0047

2018

▶ Attach to Form 990 or Form 990-EZ. **Open To Public** Department of the Treasury ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service **Employer identification number** Name of the organization 82-1106814 UNITE AMERICA INC Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only) Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (d) Corrected? (b) Relationship between disqualified (a) Name of disqualified person (c) Description of transaction person and organization Yes No 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Part II Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22. h) Approved (i) Written (d) Loan to or (e) Original (f) Balance due (g) In (b) Relationship (c) Purpose (a) Name of by board or committee? from the agreement? default? interested person with organization of loan principal amount organization? To From Yes No Yes No Yes No **\$** Total Grants or Assistance Benefiting Interested Persons. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 27 (e) Purpose of (d) Type of (a) Name of interested person (c) Amount of (b) Relationship between assistance assistance assistance interested person and the organization

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

Schedule L (Form 990 or 990-EZ) 2018

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.

Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047 Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number 82-1106814 UNITE AMERICA INC

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
PRESSING PUBLIC POLICY CHALLENGES, AND ACTIVATES GRASSROOTS SUPPORTERS
AROUND THE COUNTRY TO MAKE THEIR VOICES HEARD IN THE LEGISLATIVE
PROCESS.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
OTHER PROGRAMS:
PROMOTE AND SUPPORT COMMON-SENSE SOLUTIONS TO SOME OF OUR NATION'S MOST
PRESSING PUBLIC POLICY CHALLENGES, AND ACTIVATE GRASSROOTS SUPPORTERS
AROUND THE COUNTRY TO MAKE THEIR VOICES HEARD IN THE LEGISLATIVE
PROCESS.
EXPENSES \$ 59,488. INCLUDING GRANTS OF \$ 0. REVENUE \$ 2,942.
FORM 990, PART V, LINE 2A AND PART IX, LINE 5, 7, 9, & 10
UNITE AMERICA, INC. HAS DELEGATED ALMOST ALL MANAGEMENT
RESPONSIBILITIES TO POLESTAR, INC., INCLUDING STAFFING OF THE
ORGANIZATION. THEREFORE, UNITE AMERICA DOES NOT FILE FORM W-3 AND NO
EMPLOYEES ARE REPORTED DIRECTLY BY UNITE AMERICA. POLESTAR, INC. FILED
ON BEHALF OF THE EMPLOYEES WHO PROVIDED STAFFING SERVICES TO UNITE
AMERICA DURING THE YEAR.
FORM 990, PART VI, SECTION A, LINE 3:
ALMOST ALL MANAGEMENT RESPONSIBILITIES WERE DELEGATED TO POLESTAR, INC.
LEGAL AND ACCOUNTING SERVICES WERE CONTRACTED DIRECTLY BETWEEN THE
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization
UNITE AMERICA INC

Employer identification number 82-1106814

ORGANIZATION AND THE ENGAGED FIRMS. OTHER ACTIVITIES (MARKETING, POLITICAL

CONSULTING, ETC.) WERE OUTSOURCED BY POLESTAR TO SUB-VENDORS.

FORM 990, PART VI, SECTION A, LINE 4:

THE ORGANIZATION CHANGED ITS NAME FROM CENTRIST PROJECT, INC. TO UNITE

AMERICA, INC. IN 2018. THE ORGANIZATION IS CURRENTLY IN THE PROCESS OF

CHANGING ITS GOVERNING DOCUMENTS TO REFLECT THIS CHANGE.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS REVIEWED BY THE BOARD BEFORE IT IS FILED.

FORM 990, PART VI, SECTION B, LINE 12C:

EMPLOYEES SHALL NOT RECEIVE COMPENSATION, GRATUITIES, OR OTHER MONETARY

BENEFIT AS A RESULT OF HIS ASSOCIATION WITH THE ORGANIZATION EXCEPT AS

PROVIDED OR DISCLOSED IN THIS AGREEMENT. EMPLOYEES SHALL NOTIFY THE

ORGANIZATION OF ANY ENTITY IN OR WITH WHICH THE EMPLOYEE HAS AN ACTUAL OR

POTENTIAL OWNERSHIP, MANAGEMENT, OR FINANCIAL INTEREST OR BENEFIT, IN

WHATEVER FORM, IF SUCH ENTITY HAS, SEEKS, OR IS EXPECTED TO HAVE A

FINANCIAL OR CONTRACTUAL RELATIONSHIP WITH THE ORGANIZATION. A VIOLATION OF

THIS PROVISION SHALL ENTITLE THE ORGANIZATION TO RESCIND THE BENEFIT OR

FINANCIAL GAIN BY THE EMPLOYEE, AS WELL AS A REFUND OF ANY COMPENSATION

PAID TO THE EMPLOYEE BY THE ORGANIZATION.

FORM 990, PART VI, SECTION B, LINE 15:

THE EXECUTIVE DIRECTOR MAKES A RECOMMENDATION TO A COMPENSATION COMMITTEE AT THE END OF EACH YEAR.

FORM 990, PART VI, SECTION C, LINE 19:

832212 10-10-18

Schedule O (Form 990 or 990-EZ) (2018)

Schedule O (Form 990 or 990-EZ) (2018) Name of the organization UNITE AMERICA INC	Employer identification number 82-1106814
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT	OF INTEREST
POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC	UPON REQUEST.
FORM 990, PART IX, LINE 11G, OTHER FEES:	
CONSULTANTS:	
PROGRAM SERVICE EXPENSES	115,326.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	115,326.
CONSULTANTS - INTERNS:	
PROGRAM SERVICE EXPENSES	23,289.
MANAGEMENT AND GENERAL EXPENSES	2,893.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	26,182.
OTHER PROFESSIONAL SERVICES:	
PROGRAM SERVICE EXPENSES	11,997.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	11,997.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	153,505.

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

▶ Attach to Form 990.

OMB No 1545-0047

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

(g) Section 512(b)(13) controlled ٥ ۷ Employer identification number 82-1106814 entity? Direct controlling Yes entity Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. Direct controlling entity End-of-year assets Public charity status (if section 501(c)(3)) e Total income Exempt Code Ð section Legal domicile (state or Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33 Legal domicile (state or foreign country) foreign country) Primary activity Primary activity UNITE AMERICA INC Name, address, and EIN (if applicable) Name, address, and EIN of related organization of disregarded entity Name of the organization Part II Part

832161 10-02-18 LHA

Schedule R (Form 990) 2018

82-1106814

Page 2

Schedule R (Form 990) 2018 UNITE AMERICA INC

Part III

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

Code V-UBI General or Percentage amount in box partner? 20 of Schedule R-1 (Form 1065) Yes No ≆ 3 Yes No Osproportionate allocations? Ξ Share of end-of-year assets <u>6</u> Share of total income Ξ Predominant income (related, unrelated, excluded from tax under sections 512-514) <u>e</u> (d)

[Direct controlling]

entity (c)
Legal
domicile
(state or
foreign Primary activity Name, address, and EIN of related organization

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

•									
(a)	(q)	(၁)	(p)	(e)			(E)	3	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp,	Share of total income	of ear	Percentage ownership	Section 512(b)(13) controlled entity?	ا و ش_
		соппру)		Or inderly		assers		Yes	Ŷ
SWING VOTE - 82-3314726]
6000 B. EVANS AVENUE, 1-121	CONSULTING AND DATA								
DENVER, CO 80222	BERVICES	DE		c corp	0.	270,647.	89.29%	×	
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832162 10-02-18						Sche	Schedule R (Form 990) 2018	990) 20	18

Schedule R (Form 990) 2018 UNITE AMERICA INC

insactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36	if this schedule
Part V Transactions With Related Organizations. Comp	Note: Complete line 1 if any entity is listed in Parts II, III, or IV of th

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				_	Yes	N _o
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ins with one or more re	elated organizations listed i	n Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	A			19		×
b Gift, grant, or capital contribution to related organization(s)				1		×
c Gift, grant, or capital contribution from related organization(s)				10	_	×
d Loans or loan guarantees to or for related organization(s)				₽	_	×
e Loans or loan distantees by related organization(s)				ş	ŀ	 ×
						:
Dividende from related organization(e)				÷		×
				-	1	: :
g Sale of assets to related organization(s)				<u>5</u>	7	×
h Purchase of assets from related organization(s)				=		×
i Exchange of assets with related organization(s)				;=		×
j Lease of facilities, equipment, or other assets to related organization(s)				11		×
k Lease of facilities, equipment, or other assets from related organization(s)				¥		×
l Performance of services or membership or fundraising solicitations for related organization(s)	janization(s)			=		×
m Performance of services or membership or fundraising solicitations by related organization(s)	janization(s)			Ę		×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ation(s)			1n		×
 Sharing of paid employees with related organization(s) 				9		×
p Reimbursement paid to related organization(s) for expenses				9		×
a Reimbursement paid by related organization(s) for expenses				Ş		×
		•		2	Ħ	
(a) Contraction of contract or accordant to a contraction (c)				÷		
Collection is a second of cash of property to related organization(s)				= \$	+	: ×
is the control of cash of property morn related organization(s)	4-1			2	1	:
Z If the answer to any of the above is "Yes," see the instructions for information on	wno must complete tr	ille, including covered r	Information on who must complete this line, including covered relationships and transaction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	nvolved		
£						
(2)						
(6)						
(4)						
ies						
(9)						
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Schedule R (Form 990) 2018 UNITE AMERICA INC

Part VI] Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue)

that was not a related organization. See instructions regarding exclusion for certain investment partnerships.	tructions regarding exclus	sion for certain inve	stment partnerships.						
(a)	(2)	(၁)	(P)		(6)	Ξ	9	9	3
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	(related, unrelated, 501(c)(3)	sec. Share of	Share of end-of-vear	Dispropor- tionate	Dispropor- Librations amount in box 20 managing ownership	General or managing	Percentage ownership
		country)	sections 512-514) Yes No	_	assets	Yes No	of Schedule K-1 (Form 1065)	Yes No	
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						$\frac{1}{4}$		$\frac{1}{1}$	
						$\frac{1}{1}$		$\frac{1}{1}$	
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