Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

OMB No. 1545 0047

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

626

2018 Open to Public Inspection

<u> </u>			c Name of organization and ending		D Employ	er identification number
B	-	Check if applicab	· 		D Employ	er idenmeation namber
2	<u>^</u> A	Address change	NEW HAMPSHIRE PROGRESS ALLIANCE		02	1281685
	_; N	Name change	Doing business as Number and street (or P O box if mail is not delivered to street address)	Room/suile	E Telephor	
2	K. Ir	nıtıal return	PO BOX 3866			-429-8853
ï		inal return/	City or town state or province country and ZIP or foreign postal code	-		
L	<u> </u>	erminaled	CONCORD NH 03302-3866		G Gross re	ceipts \$ 1,060,905
2	K A	Amended return	F Name and address of principal officer			
	_] A	Application pend	SARAH HENRY	H(a) is this a gro	up return for :	subordinates? Yes X No
			14 HORSESHOE POND LANE	H(b) Are all subs	ordinates incl	luded? Yes No
			CONCORD NH 03301, ()	If "No	attach a lisi	(see instructions)
	1	Tax-exempt sta	us 501(c)(3) X 501(c) (4) ◄ (Insert no) 4947(e)(1) or 527			
J	١	Websile >	N/A	H(c) Group exer	nplion numbe	er >
<u> </u>	. F	Form of organiza	ion X Corporation Trust Association Other ▶ 1 L Y	ear of formation 2	018	M State of legal domicile NH
	Pa	art !	Summary			
_		1 Briefly	describe the organization's mission or most significant activities			
	ا به	SE	E SCHEDULE O			
	ğ					
	Ĕ					
	Activities & Governance	2 Chec	this box ▶ ☐ I if the organization discontinued its operations or disposed of more than 25%	of its net assets	;	
	9		er of voting members of the governing body (Part VI, line 1a)		3	8
	ŝ	4 Numb	er of independent voting members of the governing body (Part VI, line 1b)		4	8
	ξl		number of individuals employed in calendar year 2018 (Part V, line 2a)		5	5
	ਹੈ		number of volunteers (estimate if necessary)		6	20
•	⋖		inrelated business revenue from Part VIII, column (C), line 12		7a	0
	ľ	'	related business taxable income from Form 990-T line 38		7b	0
_				Prior Yea		Current Year
		8 Contr	outions and grants (Part VIII line 1h)			1,060,905
	Revenue	9 Progr	ım service revenue (Part VIII, line 2g)			0
	Š	10 Inves	ment income (Part VIII, column (A), lines 3, 4, and 7d)	·		0
1	~	11 Other	revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0
_		12 Total	evenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	_		1,060,905
		13 Grant	and similar amounts paid (Part IX, column (A), lines 1–3)			319,956
		14 Bene	ts paid to or for members (Part IX, column (A), line 4)	-		0
	ç,	15 Salar	es, other compensation, employee benefits (Part IX, column (A), lines 5–10)			248,098
	E	16a Profe	sional fundraising fees (Part IX column (A), line 11e)			0
	Expenses	b Total	undraising expenses (Part IX, column (D), line 25) ▶ 26,963			
1	மி	17 Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			153,539
7		18 Total	expenses Add lines 13–17 (must equal Part IX, column (A) line 25)	· · · · · · · · · · · · · · · · · · ·		721,593
2021		19 Reve	ue less expenses Subtract line 18 from line 12, , (0)	•		339,312
FEB C 8	ces		JAN 1 5 2020 Q	Beginning of Cur		End of Year
> 3	alan	20 Total	issets (Part X line 16)		0	
$\mathfrak{L}^{\frac{1}{2}}$	Z Z	21 Total	abilities (Part X line 26)		0	
FEB I			sets or fund balances Subtract line 21 from line 20 OGDEN, UT		0	339,312
	Pa	art II	Signature Block			
IJ			of perjury I declare that I have examined this return including accompanying schedules and statements,		my knowle	edge and belief it is
	(7 110	e correct an	I complete Declaration of preparer (other than officer) is based on all information of which preparer has a	ny knowledge		7-3/- 4
ζ.			Munchella .		<u> { 7</u>	123/2019
•	Sig		Sugnature of officer		Ďale	
7	ler	e	JABE BLUMENTHAL TREASU	JREK	,	
-			Type or print name and title	1500	,	DTIN
ь	aıd	. 1	Type preparer's name Preparer's signature	Date	Check	·
		22505	ROZZI, CPA LINA L. Rom, CAA		/19 selfer	
			name MASON & RICH P.A.		ım s EIN 🕨	02-0365196
Ų	/se	Only	6 BICENTENNIAL SQ			602 004 0000
-			address CONCORD, NH 03301-4058	Р	hone no	603-224-2000
_	_		uss this return with the preparer shown above? (see instructions)			X Yes No
F	or F	~aperwork R	eduction Act Notice, see the separate instructions			Form 990 (2018)

(Expenses \$

DAA

4e Total program service expenses ▶

	NEW HAMPSHIRE PRO		281685	Page 2				
-	Statement of Program Servi	ce Accomplishments a response or note to any line in this P.	art III	X				
	ribe the organization's mission	e organization's mission						
_	anization undertake any significant pr	ogram services during the year which were not lis		es X No				
3 Did the orga	scribe these new services on Schedu anization cease conducting, or make	le O significant changes in how it conducts, any progra		(v)				
	scribe these changes on Schedule O	omplishments for each of its three largest progran		es X No				
expenses S	_	nizations are required to report the amount of gran						
THE VOT AROUND OF NEW	ANIZATION'S ACTIVI ERS OF NEW HAMPSHI IMPORTANT ISSUES. HAMPSHIRE RESIDENI	43,847 including grants of \$3 TIES INCLUDE EDUCATING, IRE TO HELP BUILD POLITION THE ORGANIZATION ASSESSIONS AND COMMUNITIES AND STAND STA	CAL POWER AND KNOWLEDGE ES THE INTERESTS AND N FRENGTHENS EFFORTS TO	E				
4b (Code N/A) (Expenses \$	including grants of \$) (Revenue \$)				
≸c (Code) (Expenses \$	including grants of \$) (Revenue \$	<u>,</u>				
N/A								

) (Revenue \$

including grants of \$ 643,847

BC OTO Page 3

Рa	nt iv Checklist of Required Schedules			
	1		Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	ا ا	ĺ	x
	complete Schedule A	2	х	
	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?			
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	3	x	
4	candidates for 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	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		X
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		ŀ	
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		<u> </u>
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 negoliation services? If "Yes," complete Schedule D, Part IV	9		<u>x</u>
0	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		<u> </u>
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D Part VI	11a		<u> </u>
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X. line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			77
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	.	<u>X</u>
	Did the organization report an amount for other liabilities in Part X. line 25? If "Yes," complete Schedule D, Part X.	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	448		x
7-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
24	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	12a		X
b	Schedule D, Parts XI and XII Was the organization included in consolidated independent audited financial statements for the tax year? If	ıza	\dashv	<u> </u>
U	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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		X
5	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		X
6	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		X
7	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		X
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	ļ		
	Part VIII, lines 1c and 8a? If 'Yes," complete Schedule G, Part II	18		X
9	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		X
	Did the organization operate one or more hospital facilities? If 'Yes' complete Schedule H	20a	-	X
	If 'Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
1	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	ا ہے ا	x	
	domestic government on Part IX column (A) line 12 If Yes complete Schedule I, Parts I and II	21_		

Part 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		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 Schedule J	23		X
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			v
L	through 24d and complete Schedule K. If "No," go to line 25a	24a		<u>X</u> _
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	240		
d	to defease any tax-exempt bonds? Did the organization act as an *an hebalf of security for bonds outstanding at any time during the year?	24c 24d		
25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit.	24u		
234	transaction with a disqualified person during the year? If Yes "complete Schedule L. Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	258		- 12
~	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		х
26	Did the organization report any amount on Part X. line 5, 6, or 22 for receivables from or payables to any	238		
	current or former officers, directors trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer director, trustee, key employee,	20		
	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		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)	1		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		x
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? 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		X
30	Did the organization receive contributions of art, historical treasures or other similar assets, or qualified		i	
	conservation contributions? If "Yes,' complete Schedule M	30		_X_
31	Did the organization liquidate terminate, or dissolve and cease operations? If 'Yes "complete Schedule N, Part I	31		_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		<u> </u>
34	Was the organization related to any tax exempt or taxable entity? If 'Yes," complete Schedule R, Part II, III,			
00-	or IV, and Part V, line 1	34		<u> </u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u>X</u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	251-		
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable	35b		——
30	related organization? If "Yes,' complete Schedule R, Part V, line 2	2.0		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		
٠.	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	131		
	19? Note All Form 990 filers are required to complete Schedule O	38	x	
Pa	art V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 10			
b	Enter the number of Forms W-2G included in line 1a. Enter 0- if not applicable.			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	X	
		For	" 990	(2018)

Pa	rt V <u>Ştatements Regarding Other IRS Filings and Tax Compliance (continue</u>	ed)				_	
						Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		_	_			
	Statements, filed for the calendar year ending with or within the year covered by this return	2a		5	_		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?				2b	Х	ļ
	Note If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)						
	Did the organization have unrelated business gross income of \$1,000 or more during the year?				3a		Х
b	If "Yes " has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O				3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other auth-	ority o	ver	r ,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account,	ount)?	?		4a		Х
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 Acco	unts (l	FB	AR)		1	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	7			5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?				5c_		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000 and did the				- [
	organization solicit any contributions that were not tax deductible as chantable contributions?				6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions of	r					
	gifts were not tax deductible?				6b		
7	Organizations that may receive deductible contributions under section 170(c)				1		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for good	s					
	and services provided to the payor?				7a	1	
b	If "Yes " did the organization notify the donor of the value of the goods or services provided?				7b	-	<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					ł	
	required to file Form 8282?	1	1		7с		
d	If "Yes " indicate the number of Forms 8282 filed during the year	7d	<u> </u>		⊢_	1	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit confra				7e		-
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			10	7f		
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8				_7g_		
h	If the organization received a contribution of cars boats airplanes, or other vehicles, did the organization		HOI	rm 1098-C7	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained b	y tne					
_	sponsoring organization have excess business holdings at any time during the year?				8	-	├─-
9	Sponsoring organizations maintaining donor advised funds				0-		1
a	Did the sponsoring organization make any taxable distributions under section 4966?				9a 9b		
b 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations Enter				30		
10	Initiation fees and capital contributions included on Part VIII, line 12	10a	I				
a h	Gross receipts, included on Form 990, Part VIII line 12, for public use of club facilities	10b			_		
11	Section 501(c)(12) organizations Enter	.00	<u> </u>		_		
 а	Gross income from members or shareholders	11a	1				
b	Gross income from other sources (Do not net amounts due or paid to other sources		İ				
~	against amounts due or received from them)	11b				1	
12a	Section 4947(a)(1) non-exempt charitable trusts is the organization filing Form 990 in lieu of Form 10)41?			12a		1
	If "Yes " enter the amount of tax-exempt interest received or accrued during the year	12b	1			1	
13	Section 501(c)(29) qualified nonprofit health insurance issuers		•				
а	Is the organization licensed to issue qualified health plans in more than one state?				13a		
	Note See the instructions for additional information the organization must report on Schedule O						-
þ	Enter the amount of reserves the organization is required to maintain by the states in which						
	the organization is licensed to issue qualified health plans	13b	Ļ			ŀ	
C	Enter the amount of reserves on hand	13c	<u>_</u>			<u> </u>	<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?				14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O				14b	<u> </u>	
15	is the organization subject to the section 4960 tax on payment(s) of more than \$1,000 000 in remuneration	n or					
	excess parachule payment(s) during the year?				15		X
4.5	If "Yes," see instructions and file Form 4720, Schedule N				1,,		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment including the local particles from 4730. School to O	ome?			16	1	X
	If "Yes," complete Form 4720, Schedule O					99	<u> </u>

Part VI

Form 990 (2018) NEW HAMPSHIRE PROGRESS ALLIANCE

2	,		1100100			-0100	
	Govern	nance, Managen	nent, and Disc	losure For each	"Yes" response t	o lines 2 through 7b below	and for a "No"
	respons	e to line 8a, 8b, or	10b below, desc	ri <mark>be</mark> the cir <mark>cu</mark> msta	ances, processes,	or <mark>ch</mark> anges in Schedule O	See instruction
	Chack if	Schedule O conta	une a response o	r note to any line	in this Part VI		

	Check if Schedule O contains a response of note to any line in this Part VI				
Sec	tion A. Governing Body and Management				
4 -		1a 8		Yes	No
1a	· · · · · · · · · · · · · · · · · · ·	1a 8	-		
	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		1		
	committee explain in Schedule O	1ь 8	1		
b		16 8	-		
2	Did any officer, director trustee, or key employee have a family relationship or a business relationship with				v
	any other officer, director trustee, or key employee?		2		<u>x</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct				7.7
	supervision of officers, directors, or trustees, or key employees to a management company or other person?		3		$\frac{\mathbf{x}}{\mathbf{x}}$
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		X
6	Did the organization have members or stockholders?		6		<u></u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint				7.7
	one or more members of the governing body?		_7a		<u> </u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members		l		72
_	stockholders, or persons other than the governing body?		7b		<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by t	he following		. .	
а	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	Х	
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		<u> </u>
Sec	tion B Policies (This Section B requests information about policies not required by the Interna-	i Revenue Co	pae)		
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		_ <u>X</u> _
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?	_	10Ь		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the fo	em?	11a		<u> </u>
ь	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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to co	inflicts?	12b		_ <u>X</u> _
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,"		1		
	describe in Schedule O how this was done		12c		<u> </u>
13	Did the organization have a written whistleblower policy?		13	X	
14	Did the organization have a written document retention and destruction policy?		14		<u> </u>
15	Did the process for determining compensation of the following persons include a review and approval by				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
a	The organization's CEO Executive Director, or top management official		15a	X	
Ь	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)				
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		<u> </u>
Ь	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		
	tion C Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed NONE	-04/->			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 2004) and the second section of the second section (2004) and the sec	ou1(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply				
40	Own website Another's website X 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 police and all the public to the public during the tay year.	icy, and			
20	financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records.				
	ARAH CHAISSON-WARNER 14 HORSESHOE POND LANE				

518-429-8853

NH 03301

Section A

Form 990 (2018) NEW HAMPSHIRE PROGRESS ALLIANCE

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

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

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

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

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

(F) Average Position Reportable Reportable Estimated Name and Title compensation from (do not check more than one compensation amount of hours per box unless person is both an related other week officer and a director/trustee) organizations compensation (list any (W 2/1099 MISC) from the organization hours for (W 2/1099 MISC) nstitutional organization related dividual trustee <u>189</u> and related employee organizations below datied organizations compensated line) Instee (1) PJ BLANKENHORN 5.00 0.00 X 0 0 0 DIRECTOR (2) JABE BLUMENTHAL 5.00 0.00 X X 0 0 0 TREASURER (3) GEOFFREY CLARK 5.00 0.00 X 0 0 DIRECTOR 0 (4) RICHARD FURBER 5.00 0.00 X O 0 0 DIRECTOR (5) SARAH HENRY 5.00 0.00 X X 0 0 0 CHAIR (6) MELANY KAHN 5.00 X X 0 0 0 0.00 SECRETARY (7) KRISTEN LAINE 5.00 0 0.00 X 0 0 DIRECTOR (8) JANET PRINCE 5.00 0.00 X 0 0 X 0 VICE CHAIR (9) SARAH CHAISSON-WARNER 40.00 0.00 X 0 0 31,535 EXEC DIRECTOR-CURRNT (10) PAULA HODGES 40.00 0.00 X 63,000 0 EXEC DIRECTOR-PRIOR (11)

(A) Name and title	(B) Average hours per week (list any	bo	x unle	Pos check ess pe	rson :	than o s both r/truste	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	portable Est nsation from am- elated connications comp				
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W 2/1099 MISC)	(W-2/1099 MISC)	o 2	from Li rganizz ind rela ganiza	ation ated		
				_										
													_	
													_	
1b Sub-total								94,535						
c Total from continuation sheed d Total (add lines 1b and 1c) 2 Total number of individuals (inc					4		▶	94,535	20.000./					
reportable compensation from t	the organization	<u> </u>	<u>o</u>			-	_		·			Yes	No	
 Did the organization list any for employee on line 1a? If "Yes," of For any individual listed on line organization and related organi. 	complete Schedu 1a, is the sum of	<i>le J f</i> repo	fo <i>r st</i> ortab	<i>ich il</i> le co	ndıvi mpe	<i>dual</i> ensati	on a	and other compensation from			3	-	x	
individual Did any person listed on line 1a for services rendered to the org	ı receive or accru	e co	mpei	nsatı	on fr	om a	ıny t	inrelated organization or ind	lwidual		4 5		X	
Section B Independent Contractor Complete this table for your five compensation from the organiz	highest compen	sate	d ind	leper	nden	ıl сол	trac	tors that received more than	\$100,000 of					
Name and	(A) business address	ipen	30110	11 101	uic	Calci			(B) ion of services	-	Car	(C) npensat	tion	
2 Total number of independent or received more than \$100,000 or								listed above) who	0		For	990	0 (2018)	

Form 990 (2018) NEW HAMPSHIRE PROGRESS ALLIANCE

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (D) Revenue excluded from tax (A) (B) Related or exempt business under sections 512-514 function revenue revenue 1a Federated campaigns 1a b Membership dues 1b 1<u>c</u> Fundraising events d Related organizations 1d e Government grants (contributions) 1e f All other contributions gifts grants and similar amounts not included above 1,060,905 g Noncash contributions included in lines 1a 1f h Total Add lines 1a-1f 1,060,905 Program Service Revenue Busn Code 2a d f All other program service revenue g Total Add lines 2a-2f 3 Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6a Gross rents **b** Less rental exps c Rental inc or (loss) d Net rental income or (loss) Gross amount from (ii) Other (i) Securities sales of assets other than inventory b Less cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9a Gross income from garning activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn Code 11a b All other revenue Total Add lines 11a-11d 1,060,905 0 0 0 Total revenue See instructions

Form 990 (2018)

Part IX Statement of Functional Expenses

NEW HAMPSHIRE PROGRESS ALLIANCE

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (B) Program service Do not include amounts reported on lines 6b, (D) Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII expenses general expenses expenses Grants and other assistance to domestic organizations 319,956 319,956 and domestic governments. See Part IV. line 21 2 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 94,535 70,901 trustees, and key employees 11,344 12,290 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 123.194 114,342 4.249 Other salaries and wages 4,603 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 12,672 11,795 421 456 Other employee benefits 14,876 17,697 Payroll taxes 1,354 10 1,467 Fees for services (non-employees) Management 10,953 10,953 Legal h 7,767 7,767 c Accounting d Lobbying e Professional fundraising services See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25 column 46,345 36,174 7,673 2,498 (A) amount list line 11g expenses on Schedule () } 12 Advertising and promotion 2,996 2,247 360 389 13 Office expenses 26,331 22,582 14 Information technology 2,507 1.242 15 Royalties 5,468 4,101 656 711 16 Occupancy 8,049 6,037 966 17 Travel 1,046 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 3,343 4,457 535 19 Conferences, conventions, and meetings 579 20 Interest 21 Payments to affiliates Depreciation, depletion, and amortization 4,285 2,511 852 23 Insurance 922 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 ()) SOCIAL MEDIA 25,471 25,471 3,990 MISCELLANEOUS 3,726 127 137 2,673 EDUCATION AND TRAINING 3,131 220 238 1,725 LICENSES AND FEES 1,506 105 114 2,571 1,606 694 271 e All other expenses 721,593 643,847 50,783 26,963 25 Total functional expenses Add lines 1 through 24e 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 ▶ following SOP 98 2 (ASC 958 720)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 353,142 1 Cash-non-interest bearing 1 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 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 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 Notes and loans receivable, net 7 Inventories for sale or use 8 2,811 Prepaid expenses and deferred charges 9 10a Land, buildings and equipment cost or other basis. Complete Part VI of Schedule D. 10a 10b b Less accumulated depreciation 10c 11 investments—publicly traded securities 11 Investments-other securities See Part IV, line 11 12 12 13 Investments-program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 0 356,903 16 Total assets Add lines 1 through 15 (must equal line 34) 16 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 Loans and other payables to current and former officers, directors, trustees, key employees highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 17,591 25 Total liabilities Add lines 17 through 25 Ol 17,591 26 Organizations that follow SFAS 117 (ASC 958), check here X and Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34 239,312 27 Unrestricted net assets 27 100,000 28 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building or equipment fund 31 É 32 Retained earnings, endowment, accumulated income, or other funds 32

> 356,903 Form 990 (2018)

339,312

0 33

0 34

Total net assets or fund balances

Total liabilities and net assets/fund balances

Schedule O

the Single Audit Act and OMB Circular A-133?

If the organization changed either its oversight process or selection process during the tax year, explain in

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

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 3a

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

Name of organization

Complete if the organization is described below

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Employer identification number

▶ 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

• Section 501(c)(4), (5), or (6) organizations Complete Part III

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

	NEW HAMPSHIRE PROGRI	ESS ALLIANCE		82-42816	85
Pa	t I-A Complete if the organization is exem	pt under section 501(c)	or is a section	527 organizatio	n
1	Provide a description of the organization's direct and indirect	l political campaign activities in	Part IV (see instruction	ons for	
	definition of "political campaign activities")				
2	Political campaign activity expenditures (see instructions)			▶ \$	78,471
3	Volunteer hours for political campaign activities (see instruc	tions)		0	<u> </u>
Pa	t I-B Complete if the organization is exem	pt under section 501(c)	(3)		
1	Enter the amount of any excise tax incurred by the organization	tion under section 4955		▶ \$	
2	Enter the amount of any excise tax incurred by organization	managers under section 4955		▶ \$	
3	If the organization incurred a section 4955 tax, did it file Form	n 4720 for this year?			Yes Sho
4a	Was a correction made?				Yes No
<u> </u>	If "Yes," describe in Part IV				
Pa	t I-C Complete if the organization is exem	ipt under section 501(c)	<u>, except section</u>	501(c)(3).	
1	Enter the amount directly expended by the filing organization	n for section 527 exempt function	า		
	activities			▶ \$	25,471
2	Enter the amount of the filing organization's funds contribute	d to other organizations for sect	ion		
	527 exempt function activities			▶ \$	53,000
3	Total exempt function expenditures Add lines 1 and 2 Ente	r here and on Form 1120-POL,			
	line 17b			▶ \$	78 <u>,4</u> 71
4	Did the filing organization file Form 1120-POL for this year?				X Yes No
5	Enter the names, addresses and employer identification num				
	organization made payments. For each organization listed, e	•			
	the amount of political contributions received that were prom			•	
	as a separate segregated fund or a political action committee			ation in Part IV	
	(a) Name	(b) Address	(c) EIN	(d) Amount pard from	(e) Amount of political
				filing organization s funds if none enter -0	contributions received and promptly and directly
					delivered to a separate
					political organization If none_enter_0-
(1)			-		in none enter o-
(1)					
(2)			 -	<u> </u>	· <u>-</u>
(2)					
(3)					
(0)					
(4)	······································	<u> </u>			
,					
(5)					
 (6)					
			I		

733 12/16/2019 4 05 PM					
		PROGRESS ALI		82-4281685	
Part II-A ·Complete if the organize	atıon is exemp	t under secti <mark>on 5</mark>	01(c)(3) and file	ed Form 5768 (elec	ction under
section 501(h)).					
Check ► If the filing organization b	pelongs to an affil	ated group (and list	in Part IV each at	filiated group membe	r's name,
address, EIN, expenses,			•		
Check ► If the filing organization of	checked box A an	d "limited control" pr	rovisions apply		
Limits on Lob (The term "expenditures" n	bying Expendit neans amounts j			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence publ	ic opinion (grass ro	ots lobbying)			
b Total lobbying expenditures to influence a leg	gislative body (direct	l lobbyin g)			
c Total lobbying expenditures (add lines 1a and	ď 1b)				
d Other exempt purpose expenditures					
e Total exempt purpose expenditures (add line	s 1c and 1d)				
f Lobbying nontaxable amount. Enter the amount	unt from the following	ig table in both			
columns					
If the amount on line 1e, column (a) or (b) is	The lobbying nor	itaxable amount is			
Not over \$500,000	20% of the amoun	t on line 1e			
Over \$500 000 but not over \$1 000 000	\$100 000 plus 159	6 of the excess over \$500	000		
Over \$1 000,000 but not over \$1 500 000	\$175 000 plus 109	6 of the excess over \$1 0	00 000		
Over \$1 500 000 but not over \$17 000 000	\$225 000 plus 5%	of the excess over \$1,500	0 000		
Over \$17 000,000	\$1,000,000				
g Grassroots nontaxable amount (enter 25% o	f line 1f)				
h Subtract line 1g from line 1a If zero or less, e	enter -0-				
I Subtract line 1f from line 1c If zero or less, e	nter -0-				
If there is an amount other than zero on either	er line 1h or line 1i, c	lid the organization file	Form 4720		~-
reporting section 4911 tax for this year?					Yes No
	4-Year Averag	ing Period Under S	Section 501(h)		
(Some organizations that made	e a section 501(h	i) election do not h	ave to complete	all of the five colum	ns below
Se	ee the separate i	nstructions for line	es 2a through 2f)	
Loi	bbying Expendit	ures During 4-Year	Averaging Perio	od	
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount	·				

Schedule C (Form 990 or 990-EZ) 2018

b Lobbying ceiling amount (150% of line 2a column (e))

c Total lobbying expenditures

d Grassroots nontaxable amount e Grassroots ceiling amount (150% of line 2d column (e)) f Grassroots lobbying expenditures Schedule C (Form 990 or 990-EZ) 2018 Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 Part II-B (election under section 501(h))

or each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(a)	(b)	
escription of the lobbying activity	Yes	No	Amount	
During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum through the use of				
a Volunteers?				
 b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? 		\blacksquare		
d Mailings to members legislators, or the public?	Γ	$\neg \neg$		
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches lectures or any similar means?i Other activities?		_		
J Total Add lines 1c through 1i	-	L		
Za Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	<u> </u>	[
b if 'Yes," enter the amount of any tax incurred under section 4912		l		
c If 'Yes," enter the amount of any tax incurred by organization managers under section 4912		L		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				

501(c)(6)

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	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 campaign activity expenditures from the prior year?	3		<u> </u>

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

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of		_
	political expenses for which the section 527(f) tax was paid)		
а	Current year	_2a	
þ	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying		
	and political expenditure next year?	4	
5_	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

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

Schedule C (Form 990 or 990 EZ) 2018 NEW HAMPSHIRE PROGRESS ALLIANCE

82-4281685

Page 4

Part IV Supplemental Information (continued)

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

OMB No 1545 0047

Open to Public

Name of the organization

► Go to www irs gov/Form990 for instructions and the latest information Employer identification number

Inspection

NI	W HAMPSHIRE PROGRESS ALLIANCE	}	82-42	281685
	rt I Organizations Maintaining Donor Advised Fund	ds or Other Similar Funds or Ac		
	Complete if the organization answered "Yes" on Fe			
		(a) Donor advised funds	(b	Funds 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 writing that the	e assets held in donor advised		
,	funds are the organization's property, subject to the organization's exclusive			Yes No
6	Did the organization inform all grantees, donors, and donor advisors in wri	· ·		
٠	only for charitable purposes and not for the benefit of the donor or donor a	* •		
	conferming impermissible private benefit?	deligor, or for only office purpose		Yes No
Þa	rt II Conservation Easements			
	Complete if the organization answered "Yes" on Fi	orm 990, Part IV, line 7		
1	Purpose(s) of conservation easements held by the organization (check all			
•	Preservation of land for public use (e.g. recreation or education)	Preservation of a historically impor	tant land a	rea
	Protection of natural habitat	Preservation of a certified historic s		ncu
	Preservation of open space	_ Trees value of a section find the	30.0000	
2	Complete lines 2a through 2d if the organization held a qualified conserval	ion contribution in the form of a conservati	OF	
-	easement on the last day of the tax year	and borner pour at the form of a condervati		Held at the End of the Tax Year
а	Total number of conservation easements		2a	TION OF THE PERSON OF THE PERSON
	Total agreage restricted by conservation easements		2b	-
b	Number of conservation easements on a certified historic structure include	ed in (a)	2c	
C	Number of conservation easements included in (c) acquired after 7/25/06,	• •	20	
u	historic structure listed in the National Register	and not on a	2d	
•	Number of conservation easements modified transferred, released, exting	nuched, or terminated by the erganization		
3	tax year	guistied, of terminated by the organization	during the	
4	Number of states where property subject to conservation easement is local	ated •		
5	Does the organization have a written policy regarding the periodic monitor			
J	violations, and enforcement of the conservation easements it holds?	ing, inspection, nationing of		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of views	olations, and enforcing conservation easen	nante dura	., .
U	Start and volunteer flours devoted to monitoring, inspecting, nationing of vie	olations, and emoraling conservation easen	nenta dun	ig trie year
7	Amount of expenses incurred in monitoring, inspecting handling of violation	one and enforcing consequation easements	e duana th	e vear
'	> \$	ons, and emorang conservation easements	s ourning in	e year
8	Does each conservation easement reported on line 2(d) above satisfy the	requirements of section 170(b)(4)(B)(i)		
0	and section 170(h)(4)(B)(ii)?	requirements of section from (17,47,12)(i)		[
۵	In Part XIII, describe how the organization reports conservation easement	e in its revenue and everese statement, ar	ad	[103] 110
3	balance sheet, and include if applicable, the text of the footnote to the org			
	organization's accounting for conservation easements	anazaron y monosa orazonemo mar accen-	200 (110	
Pa	rt III Organizations Maintaining Collections of Art, F	listorical Treasures, or Other Si	mılar A	ssets.
	Complete if the organization answered "Yes" on Fe			
1a	If the organization elected as permitted under SFAS 116 (ASC 958) not to	o report in its revenue statement and balar	nce sheet	
	works of art, historical treasures, or other similar assets held for public exh	nibition, education, or research in furtheran	ce of	
	public service provide, in Part XIII the text of the footnote to its financial s	tatements that describes these items		
b	If the organization elected, as permitted under SFAS 116 (ASC 958) to re	port in its revenue statement and balance :	sheet	
	works of art historical treasures, or other similar assets held for public ext	nibition, education, or research in furtheran	ce of	
	public service provide the following amounts relating to these items			
	(i) Revenue included on Form 990, Part VIII, line 1		•	\$
	(ii) Assets included in Form 990, Part X		•	\$
2	If the organization received or held works of art, historical treasures, or other	ner sımılar assets for financial gain, provide	the	
	following amounts required to be reported under SFAS 116 (ASC 958) rela	= :		
а	Revenue included on Form 990, Part VIII, line 1		•	\$
	Assets included in Form 990, Part X			\$
	Panerwork Reduction Act Notice, see the Instructions for Form 990			Schedule D (Form 990) 2018

d Equipmente Other

Total Add lines 1a through 1e (Column (d) must equal Form 990 Part X column (B), line 10c)

Schedule D (E	orm 990) 2018 NEW HAMPSHIRE PROGRE	SS ALLIANCE	82 -42 81685	Page :
Part VII	Investments—Other Securities			
1 41, 711	Complete if the organization answered "Yes" or	n Form 990 Part IV line	11h See Form 990 Part X line	12
	(a) Description of security or category	(b) Book value	(c) Method of valuation	12.
	(including name of security)	(b) Book value	Cost or end-of-year market value	
	<u>-</u>		OSS OF CHAPTER FOR THE INC. FOR THE	_
(1) Financial o				
(2) Closely-he	eld equity interests			.
(3) Other				
(A)				
(B)				•
(C)				
(D)				
(E)				
(F)		<u></u>		
(G)				
(H)				
Total (Column	n (b) must equal Form 990, Part X, col (B) line 12) ▶			
Part VIII	Investments—Program Related			
	Complete if the organization answered "Yes" o	n Form 990, Part IV, line	11c See Form 990, Part X, line	13
-	(a) Description of investment	(b) Book value	(c) Method of valuation	· -
	(Cost or end of year market value	
(4)			•	
(1)	. ————			
(2)				
(3)				- · · · · · · · · · · · · · · · · · · ·
(4)				
(5)				
(6)				
(7)				
(8)				
(9)		· 1		
	n (b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX	Other Assets.			
Faitix	Complete if the organization answered "Yes" o	n Form 000 Port IV Iron	11d Soc Form 000 Part V line	15
		ITTOTTI 990, Fatt IV, IIIIe		
	(a) Description		(b) B	ook value
(1)				
(2)				
(3)				
(4)			_	
(5)				
(6)				
(7)	-			
(8)				
(9)				
	n (b) must equal Form 990, Part X, col (B) line 15)		P	
Part X	Other Liabilities			
	Complete if the organization answered "Yes" o	n Form 990, Part IV, line	11e or 11f See Form 990, Part	Χ,
	line 25	·		
1	(a) Description of liability	(b) Book value		
(1) Federal	income taxes			
	UED VACATION	9,974		
	UED PAYROLL	7,617		
	<u></u>			
(4)				
(5)				
(6)				
_(7)				
(8)				
(9)				
Total (Colum	n (b) must equal Form 990, Part X, col (B) line 25) ▶	17,591		

² Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

4b

4c

5

Part XIII Supplemental Information

b Other (Describe in Part XIII)

c Add lines 4a and 4b

Provide the descriptions required for Part II, lines 3 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2 Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

5 Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)

Schedule D (Form 990) 2018 NEW HAMPSHIRE PROGRESS ALLIANCE

82-4281685

Page 5

Part XIII Supplemental Information (continued)

Σ
ā
8
_
5
22
9
2
÷
33
2

SCHEDULEI

(Form 990)

Department of the Tressury Internal Revenue Service

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

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

Open to Public Inspection 2018

OMB No 1545 0047

Employer identification number 82-4281685 ► Go to www irs gov/Form990 for the latest information ► Attach to Form 990 NEW HAMPSHIRE PROGRESS ALLIANCE General Information on Grants and Assistance Name of the organization

ŝ Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, 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 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States the selection criteria used to award the grants or assistance? Part Part

Part II Grants and Other Assistance to Domestic Organizations and Domestic Overmitten Space is despited and an accordance of the 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	at received more t	than \$5,0	rations and political configurations. Complete it the organization as \$5,000. Part II can be duplicated if additional space is needed	duplicated if addi	ional space is n	needed	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book FMV appraisal other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
CA VOTES							
1155 CONNECTICUT AVE NW STE 600							
WASHINGTON DC 20036	26-4568349	501C4	128,000				
(2) RIGHTS & DEMOCRACY PROJECT							
70 S WINOOSKI AVE #205							
BURLINGTON VT 05401	47-3746922	501C4	101,281				
(3) GRANITE STATE ORGANIZING PROJECT	<u> </u>						
383 BEECH ST							
MANCHESTER NH 03104	47-0873896	501C3	51,144				
(4) PICO ACTION FUND							
383 BEECH ST							
MANCHESTER NH 03104	47-0873896	501C4	25,000				
(5) COMMUNITY ACTION INITIATIVE							
4005 WISCONSIN AVE #39123							
WASHINGTON DC 20016	47-2756535	501C3	10,000				
(9)							
(2)							
					,		
(8)							
(6)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	int organizations listed	d in the line	1 table				b 2

For Paperwork Reduction Act Notice, see the Instructions for Form 990 DAA Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2018)

A

Schedule (Form 990) (2018) NEW HAMPSHIRE PROGRESS ALLIANCE	RE PROGRESS ALI		82-4281685		Page 2
Part III Grants and Other Assistance to Domestic Individuals Complete if the organization answered "Yes" on Form 990, Part IV, Inne 22 Part III can be duplicated if additional space is needed	to Domestic Individual Itional space is needed	s Complete if the c	organization answere	d "Yes" on Form 990, Part	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal other)	(f) Description of noncash assistance
•					
7					
3					
4					
ıs					
9					

PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

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

Part IV

GRANTEES RECEIVE A WRITTEN CONTRACT OUTLINING THEIR DUTIES AND

RESPONSIBILITIES. GRANTEES ARE IN REGULAR CONTACT WITH THE ORGANIZATION'S

EXECUTIVE DIRECTOR AND ARE REQUIRED TO SUBMIT A MID-TERM AND FINAL REPORT.

SCHEDULE O (Form 990 pr 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ

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

ZUIO

OMB No 1545-0047

Open to Public Inspection

Name of the organization

NEW HAMPSHIRE PROGRESS ALLIANCE

Employer identification number 82-4281685

AMENDED RETURN EXPLANATION

NEW INFORMATION PROVIDED BY TAXPAYER TO REPORT POLITICAL CAMPAIGN ACTIVITY ON SCHEDULE C.

FORM 990 - ORGANIZATION'S MISSION

THE PURPOSE OF THE NEW HAMPSHIRE PROGRESS ALLIANCE IS THE PROMOTION OF A HEALTHY DEMOCRACY THROUGH RESEARCH, ENGAGEMENT, AND EDUCATION OF THE CITIZENS OF NEW HAMPSHIRE ABOUT THE POSITIONS OF PUBLIC OFFICIALS, LEGISLATIVE BILLS, AND PROPOSED LEGISLATIVE ACTION ON ISSUES RELATED TO A HEALTHY DEMOCRACY, EDUCATION, THE ENVIRONMENT, ECONOMIC JUSTICE, AND HUMAN RIGHTS. THE ORGANIZATION'S EXEMPT PURPOSE INCLUDES ENCOURAGING INCREASED CIVIC PARTICIPATION BY THE CITIZENS OF NEW HAMPSHIRE THROUGH EDUCATION AND TRAINING ON LEGISLATIVE SKILLS, ELECTORAL SKILLS, AND CITIZEN INVOLVEMENT.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 EXECUTIVE DIRECTOR AND TREASURER REVIEWS FORM 990 AND PRESENTS IT TO THE BOARD OF DIRECTORS FOR REVIEW AND APPROVAL PRIOR TO FILING.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL SALARY AND WAGES ARE CONSIDERED ANNUALLY WHEN PREPARING THE ANNUAL BUDGET. IF A POSITION IS VACANT, THE SALARY AND WAGES ARE CONSIDERED PRIOR TO POSTING THE POSITION.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS
SALARY AND WAGES ARE CONSIDERED ANNUALLY WHEN PREPARING THE ANNUAL BUDGET.

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

Name of the organization

Employer identification number

82-4281685

NEW HAMPSHIRE PROGRESS ALLIANCE

IF A POSITION IS VACANT, THE SALARY AND WAGES ARE CONSIDERED PRIOR TO POSTING THE POSITION.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
THE DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST