DLN: 93493310012599 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 C Name of organization ADVANCEMENT PROJECT D Employer identification number B Check if applicable □ Address change 95-4835230 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite ☐ Amended return 1910 WEST SUNSET BLVD NO 500 ☐ Application pending (213) 989-1300 City or town, state or province, country, and ZIP or foreign postal code LOS ANGELES, CA 90026 G Gross receipts \$ 14,733,651 Name and address of principal officer $\mathbf{H}(\mathbf{a})$ Is this a group return for STEPHEN ENGLISH □Yes ☑No subordinates? 1910 WEST SUNSET BLVD NO 500 H(b) Are all subordinates LOS ANGELES, CA 90026 ☐ Yes ☐No included? Tax-exempt status □ 527 **☑** 501(c)(3) **☐** 501(c)() **◄** (Insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW ADVANCEMENTPROJECT ORG L Year of formation 2001 M State of legal domicile CA K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities ADVANCEMENT PROJECT IS A NEXT GENERATION, MULTI-RACIAL CIVIL RIGHTS ORGANIZATION ROOTED IN THE GREAT HUMAN RIGHTS STRUGGLES FOR EQUALITY AND JUSTICE, WE EXIST TO FULFILL AMERICA'S PROMISE OF A CARING, INCLUSIVE AND JUST DEMOCRACY WE USE INNOVATIVE TOOLS AND STRATEGIES TO STRENGTHEN SOCIAL MOVEMENTS AND ACHIEVE HIGH IMPACT POLICY CHANGE Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 15 Number of voting members of the governing body (Part VI, line 1a) . . . 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 14 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 90 16 **6** Total number of volunteers (estimate if necessary) . . . 6 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, line 34 46,829 Current Year **Prior Year** 8 Contributions and grants (Part VIII, line 1h) . 13,659,455 13,755,935 Program service revenue (Part VIII, line 2g) . 270,952 306,497 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 21,701 30,217 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 34,261 160,166 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13,986,369 14,252,815 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 79,560 1,054,903 14 Benefits paid to or for members (Part IX, column (A), line 4) . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 7,532,974 8,200,508 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . 28,875 **b** Total fundraising expenses (Part IX, column (D), line 25) ▶986,160 3,331,524 3,414,685 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 10,944,058 12,698,971 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12 . 3,042,311 1,553,844 Assets or displaying End of Year **Beginning of Current Year** 18,497,730 20 Total assets (Part X, line 16) . 16,006,197 **21** Total liabilities (Part X, line 26) 1,029,434 1,925,592 Net assets or fund balances Subtract line 21 from line 20 14,976,763 16,572,138 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2019-10-30 Signature of officer Date Sign Here GIOVANNI COZZARELLI CFO Type or print name and title Print/Type preparer's name Date 2019-10-30 Preparer's signature Check \square if P00650274 Paid self-employed Firm's name ► ARMANINO LLP Firm's EIN > 94-6214841 Preparer Use Only Firm's address ▶ 12657 ALCOSTA BLVD 500 Phone no (925) 790-2600 SAN RAMON, CA 94583 ☑ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2018) Cat No 11282Y

Form	990 (2	018)					Page 2
Pa	rt III	Statement of	of Program Servi	ce Accomplis	hments		
	_	Check If Sched	ule O contains a resp	onse or note to a	any line in this Part III .		🗹
1	Briefly	describe the or	ganızatıon's mıssıon		·		
STRU	JGGLES	FOR EQUALITY	AND JUSTICE, WE EX	IST TO FULFILL	AMERICA'S PROMISE OF	ZATION ROOTED IN THE GREA FA CARING, INCLUSIVE AND JU VE HIGH IMPACT POLICY CHAN	JST DEMOCRACY WE USE
2		-	, -		vices during the year whi		
							🗌 Yes 🗹 No
		•	se new services on Sc				
3		-	ease conducting, or n	nake significant i	changes in how it conduc	cts, any program	
		es?					🗌 Yes 🗹 No
	If "Yes	s," describe thes	e changes on Schedu	le O			
4	Sectio	n 501(c)(3) and		ons are required	to report the amount of	argest program services, as me grants and allocations to other	
	(Code) (Expenses \$	1,517,505	including grants of \$) (Revenue \$	118,458)
	See Ad	ditional Data					
4b	(Code) (Expenses \$	1,918,180	including grants of \$) (Revenue \$)
	See Ad	ditional Data					·
4c	(Code See Ad	ditional Data) (Expenses \$	2,000,047	including grants of \$) (Revenue \$)
	(Code) (Expenses \$	5,374,870	ıncludıng grants of \$	1,054,903) (Revenue \$	188,039)
4d	Other	program service	es (Describe in Sched	,			
4d		program service	es (Describe in Sched 5,374,870 inc	,	\$ 1,054,90	03) (Revenue \$	188,039)

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Form	990 (2018)			Page 3
Pai	Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 2	1	Yes Yes	No
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	2	Yes	
	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 2	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		No No
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🕏	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 2	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 2	12a	Yes	
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section $170(b)(1)(A)(II)$? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
Ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20Ь		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	·

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

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

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

Nο

22

Form	990 (2018)			Page 4
Pa	tiV Checklist of Required Schedules (continued)			
			Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No

a	A current of former officer, director, trustee, or key employee. If test, complete schedule L,		l
	Part IV	28a	
ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	
20	Did the annual term of the control o		

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

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

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

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

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

Statements Regarding Other IRS Filings and Tax Compliance

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

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

No

No

37

38

74

0

1a

Yes

Yes

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37

38

Part V

Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .

If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as

If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form

Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during

9a Did the sponsoring organization make any taxable distributions under section 4966? . . .

Sponsoring organizations maintaining donor advised funds.

a Initiation fees and capital contributions included on Part VIII, line 12 . . .

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

a Is the organization licensed to issue qualified health plans in more than one state?

Enter the amount of reserves the organization is required to maintain by the states in

Section 501(c)(29) qualified nonprofit health insurance issuers.

Section 501(c)(7) organizations. Enter

Section 501(c)(12) organizations. Entera Gross income from members or shareholders .

b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

7f

7g

7h

8

9a

9h

12a

13a

14a

14b

15

No

No

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10a

10b

11a

11b

12b

13b

13c

No

19

20

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Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI	" respo	onse to	lines V
ction A. Governing Body and Management			
		Yes	No
Enter the number of voting members of the governing body at the end of the tax year 13			
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
Enter the number of voting members included in line 1a, above, who are independent 1b 14			
Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •	3		No
Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
Did the organization have members or stockholders?	6		No
Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
The governing body?	8a	Yes	
Each committee with authority to act on behalf of the governing body?	8b	Yes	
Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)	
		Yes	No
Did the organization have local chapters, branches, or affiliates?	10a		No
If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
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	12a	Yes	
Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?			
connects.	12b	Yes	
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12b 12c	Yes Yes	
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in			
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes Yes	
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes Yes	
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c 13 14	Yes Yes Yes	
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c 13 14	Yes Yes Yes	
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c 13 14	Yes Yes Yes	No
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c 13 14 15a 15b	Yes Yes Yes	No
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c 13 14 15a 15b	Yes Yes Yes	No
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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?	12c 13 14 15a 15b	Yes Yes Yes	No
	Check if Schedule O contains a response or note to any line in this Part VI ction A. Governing Body and Management 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 body delegated broad authority to an executive committee or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization have members or stockholders? Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? Each committee with authority to act on behalf of the governing body? 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 Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their o	Check if Schedule O contains a response or note to any line in this Part VI. cttion A. Governing Body and Management 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 body delegated broad authority to an executive committee or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent Ib 14 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization have members or stockholders? Did the organization have members or stockholders? Did the organization have members or stockholders? To but the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? To governing body? Based committee with authority to act on behalf of the governing body? Based committee with authority to act on behalf of the governing body? Based committee with authority to act on behalf of the governing body? Based committee with authority to act on behalf of the governing body? Did the organization smaling address? If "res," provide the names and addresses in Schedule O To granization smaling address? If "res," provide the names and addresses in Schedule O Did the organization have written policies and procedures governing the activities of such	Check if Schedule O contains a response or note to any line in this Part VI. Cition A. Governing Body and Management 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 body delegated broad authority to an executive committee or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4

Own website Another's website Upon request Other (explain in Schedule O)

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

Part VII

В

(8) BONIFACIO GARCIA ESQ

(10) DANIEL ALEJANDRO LEON-DAVIS

BOARD MEMBER

(9) HELEN KIM

BOARD MEMBER

BOARD MEMBER

(11) BARRY S LITT

BOARD MEMBER

BOARD MEMBER

(13) RINKU SEN BOARD MEMBER

BOARD MEMBER

(17) JOHN KIM

(12) KATHERINE PECK

(14) TOM UNTERMAN

(15) JESSE WILLIAMS BOARD MEMBER

(16) GIOVANNI COZZARELLI

EXECUTIVE DIRECTOR CA

......

0

0

0

0

0

20,444

21.598

Form 990 (2018)

0

173,378

231.241

0

0

0

0

0

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

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

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

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

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

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 F) mated

Check this box if neither the organization no	r any related or	ganızat	ion c	omp	ens	ated a	ny c	turrent officer, dire	ctor, or trustee	
(A) Name and Title	(B) Average hours per week (list any hours	pers	an on on is	e bo both	t che x, u n an	eck mo inless officei ustee)	r	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	Estim amount of compen from
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organizat relat organiz

	hours per week (list any hours	pers	on is	both	n an	inless office ustee	er	compensation from the organization	compensation from related organizations	amount of other compensation from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	10	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
(1) MOLLY MUNGER ESQ PRESIDENT	1 00	×		x				0	0	0	
(2) STEPHEN R ENGLISH ESQ SECRETARY/TREASURER	1 00	×		x				0	0	0	
(3) BILL LANN LEE ESQ	2 00	V		Ų				0	0		

		į.	1Stee			nsat⊖d				
1) MOLLY MUNGER ESQ RESIDENT	1 00	×		x				0	0	0
2) STEPHEN R ENGLISH ESQ ECRETARY/TREASURER	1 00	×		x				0	0	0
3) BILL LANN LEE ESQ OARD CHAIR	2 00	х		х				0	0	0
4) CONNIE L RICE O-DIRECTOR	40 00	×		x				132,278	0	11,173
· · · · · · · · · · · · · · · · · · ·	1 00	I		I —	I		I			

(3) BILL LANN LEE ESQ BOARD CHAIR		x	х		0	0	0
(4) CONNIE L RICE CO-DIRECTOR	40 00	х	х		132,278	0	11,173
(5) JOE ALVAREZ BOARD MEMBER	1 00	×			0	0	0
(6) ARLENE HOLT BAKER	1 00	х			0	0	0

CO-DIRECTOR	••••••	×	×		132,278	0	11,173
(5) JOE ALVAREZ	1 00	,					
BOARD MEMBER		×			0	U	
(6) ARLENE HOLT BAKER	1 00	V			0	0	0
BOARD MEMBER		^			١	0	1
(7) HARRY BELAFONTE	1 00	V			0	0	
BOARD MEMBER		^			١	U	l

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OAKLAND, CA 94611

compensation from the organization \blacktriangleright 1

Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) **(F)** Estimated

Page 8

Fait VIII Section A. Officers, Directors	, musices, it	Cy Liii	picy		, ui	iu ing	JIICS	st compensated	Linployees (con	i i i i i i i i i i i i i i i i i i i			
(A) Name and Title	(B) Average hours per week (list any hours	than o	ne b	ox, ι n of or/t	t ch unle ficer rust	eck moss pers r and a ee)	son	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations	Estim Estim amount comper from	ated of other esation the		
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organıza rela organız	ted		
(18) JUDITH BROWNE DIANIS EXECUTIVE DIRECTOR DC	40 00			х				277,437	0		27,848		
(19) EDWARD A HAILES GENERAL COUNSEL DC	40 00	l			х			193,281	0		6,730		
(20) WENDELYN KILLIAN DIRECTOR OF LEADERSHIP DEVELOP CA	40 00	1				×		142,363	0		11,768		
(21) ZERLINE HUGHES SPRUILL DIRECTOR OF COMMUNICATIONS DC	40 00	1				×		141,756	0		19,783		
(22) KARLA HOWELL DIRECTOR OF POLICY & PROGRAMS CA	40 00					×		135,088	0	0 23,6			
(23) JORGE JIMENEZ DIRECTOR OF HUMAN RESOURCES CA	40 00					x		134,741	0	0 18,4			
(24) KATHERINE SMITH DIRECTOR OF COMMUNICATIONS CA	40 00					x		132,840	0		9,179		
1b Sub-Total	/II , Section A				1			1,694,403	0		170,663		
d Total (add lines 1b and 1c) Total number of individuals (including but of reportable compensation from the organization)	t not limited to					▶ who re	ceive	. ,	-		170,003		
3 Did the organization list any former office	er director or t	rustee	kev 4	emn	love	e orb	nahe	est compansated er	mployee on	Yes	No		
line 1a? If "Yes," complete Schedule J for	such individuai	' .		•	•				3		No		
4 For any individual listed on line 1a, is the organization and related organizations grundividual	eater than \$150	ble com 0,000? . •	npens If "Ye	atio s," c	n ar comp	nd othe plete S	er co Schei	mpensation from t dule J for such	ne · · · 4	Yes			
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for										No			
Section P. Indopendent Contractors													
Section B. Independent Contractors Complete this table for your five highest from the organization Report compensat	compensated in									nsation			
	(A) ousiness address				<u>'</u>				(B) tion of services	(C Compe			
INPARTNERSHIP								CONSULTING			149,720		
6114 LA SALLE AVE 413	14 LA SALLE AVE 413												

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

Part	VIII Statement of	Revenue							rage 3
	Check if Schedul	le O contains a	respo	nse or note to any	line in this Part VII				<u> </u>
					(A) Total revenue	Rela exe fun	B) ted or empt ction	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
	1a Federated campaig	ns	1a			Tev	enue		312 - 314
Contributions, Gifts, Grants and Other Similar Amounts	b Membership dues	[1b						
Gra not	c Fundraising events		1c	7,540					
ß, A	d Related organizatio	ons	1d						
Gif ilar	e Government grants (co	L	1e	7,500					
ıs,	f All other contributions	L							
tio:	and similar amounts n		1f	13,740,895					
퍨	g Noncash contribution	ons included							
Contr and (ın lınes 1a - 1f \$								
<u>ਤ</u> ਙ	h Total. Add lines 1a	-1f		>	13,755,935				
<u>.</u>				Business		224 422			
พรม	2a COMMUNITY PROJECTS				561000	221,138	221,1		
æ	b CONF REGISTRATION				561000	56,029	56,0	29	
S C	с ———		_						
35	d ————		_						
an	е ———		-			29,330	29,3	30	
Program Service Revenue	f All other program se	rvice revenue			I	23,000	23/3		
Δ.	gTotal. Add lines 2a-2	2f		▶	100,497				
	3 Investment income (is similar amounts).			nterest, and other	30,17	76			30,176
	4 Income from investment			nd proceeds		+			<u> </u>
	5 Royalties								
		(ı) Real		(II) Personal					
	6a Gross rents								
	b Less rental expenses				-				
	c Rental income or (loss)								
	d Net rental income o	r (loss)	•		1				
		(ı) Securiti	es	(II) Other					
	7a Gross amount from sales of	40	8,558						
	assets other than inventory								
	b Less cost or				1				
	other basis and sales expenses	40	8,517						
	C Gain or (loss)		41]				
	d Net gain or (loss) .		-	•	1	41			41
	8a Gross income from f (not including \$	undraising ever 7,540 o							
듄	contributions reporte See Part IV, line 18		al	222 405					
e v	b Less direct expense		ь	232,485 72,319	4				
Other Revenue	c Net income or (loss)		L	<u> </u>		56			160,166
ğ.	9a Gross income from g		s [<u> </u>					
١	See Part IV, line 19		a						
	b Less direct expense	:S	ь						
	c Net income or (loss)		L	es >					
	10aGross sales of invent								
	returns and allowand	ces	a						
	b Less cost of goods s	sold	ь		-				
	c Net income or (loss)	from sales of ı	nvento	ory >	_				
	Miscellaneous	Revenue		Business Code					
	11a								
	b		7						
	С								
	d All other revenue		[
	e Total. Add lines 11a			•					
	12 Total revenue. See	Instructions		· · · •	14,252,81	15	306,497		0 190,383
									Form 990 (2018)

22 Depreciation, depletion, and amortization

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

25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

23 Insurance . . .

expenses on Schedule O)

a PUBLIC RELATIONS

b TRAINING

c RECRUITMENT

d DEVELOPMENT

e All other expenses

Form 990 (2018)				Page 10
Part IX Statement of Functional Expenses	- L All - #1		lata - aliana - (A)	
Section 501(c)(3) and 501(c)(4) organizations must complete all co	_		nete column (A)	
Check if Schedule O contains a response or note to any	Ine in this Part IX			<u> ⊔</u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	1,054,903	1,054,903		
Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,095,407	882,675	116,076	96,656
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	5,668,409	4,553,757	613,349	501,303
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	78,935	65,810	6,338	6,787
9 Other employee benefits	857,583	715,014	68,850	73,719
10 Payroll taxes	500,174	453,620	2,883	43,671
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	33,859		33,859	
d Lobbying				
e Professional fundraising services See Part IV, line 17	28,875			28,875
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	443,346	386,429	25,226	31,691
12 Advertising and promotion				
13 Office expenses	535,777	491,335	5,528	38,914
14 Information technology				
15 Royalties				
16 Occupancy	778,218	703,515	4,837	69,866
17 Travel	675,716	626,165	20,785	28,766
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	496,938	463,503	775	32,660
20 Interest				
21 Payments to affiliates				

143,875

18,266

113,954

113,862

44,521

16,185

168

12,698,971

129,609

16,539

104,721

106,669

41,385

14,953

10,810,602

795

104

2,501

128

168

902,209

13,471

1,623

6,732

7,186

3,008

1,232

986,160

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Page **11**

18.497.730

685,319

840.992

399.281

1.925.592

4.338.607

11,033,531

1.200.000

16,572,138

18,497,730

Form **990** (2018)

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16.006.197

592,737

9.000

427.697

1.029.434

5.209.104

8,567,659

1.200.000

14,976,763

16,006,197

		Check if Schedule O contains a response or not	e to ar	ny line in this Part IX $oldsymbol{.}$			<u> </u>
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			1,193,137	1	1,388,856
	2	Savings and temporary cash investments .			6,802,839	2	6,442,342
	3	Pledges and grants receivable, net			5,813,066	3	8,597,482
	4	Accounts receivable, net			12,400	4	13,900
	5	Loans and other receivables from current and for trustees, key employees, and highest compensa Part II of Schedule L				5	
ets	7	Loans and other receivables from other disqualities section 4958(f)(1)), persons described in section contributing employers and sponsoring organizations valuntary employees' beneficiary organizations. Part II of Schedule L	n 4958 tions ((see in	B(c)(3)(B), and of section 501(c)(9) structions) Complete		6	
ssets	8	Inventories for sale or use				8	
Ø	9	Prepaid expenses and deferred charges			234,726	9	140,556
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	1,329,670			
	ь	Less accumulated depreciation	10 b	924,095	489,452	10 c	405,575
	11	Investments—publicly traded securities .			1,460,577	11	1,509,019
	12	Investments—other securities See Part IV, line	11 .			12	
	13	Investments—program-related See Part IV, line	11 .			13	

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34

Fund Balances

Assets or 30

Net

Intangible assets

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17 - 24)

Total liabilities. Add lines 17 through 25 . .

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

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

Capital stock or trust principal, or current funds

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

Retained earnings, endowment, accumulated income, or other funds

Grants payable . .

Deferred revenue

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Other assets See Part IV, line 11 . . .

Total assets.Add lines 1 through 15 (must equal line 34) . .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

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

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

Form 990 (2018)

Liabilities

3a

3b

No

Form 990 (2018)

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

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

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version:

N ADVANCEMENT DROJECT

EIN: 95-4835230

Name: ADVANCEMENT PROJECT

Form 990 (2018)

Form 990, Part III, Line 4a:

ADVANCEMENT PROJECT CALIFORNIA HAD AMAZING SUCCESS IN PURSUING OUR VISION OF RACIAL EQUITY FOR ALL CALIFORNIANS IN 2018 BY WORKING TOGETHER WITH COMMUNITIES ACROSS ISSUES, ACROSS GEOGRAPHY, AND ACROSS DIVISIONS OF RACE, ETHNICITY, AND CLASS WE ACCOMPLISHED OUR WORK LARGELY THROUGH OUR THREE MAIN PROGRAM AREAS, AND AN INAUGURAL, CROSS-PROGRAMMATIC INITIATIVE POLITICAL VOICEPOLITICAL VOICE WORKS TO MAKE SURE STATE AND LOCAL GOVERNMENTS ARE MORE PARTICIPATORY AND REPRESENTATIVE OF THE COMMUNITIES THEY SERVE THE TEAM CONTINUED IN THROUGHOUT THE STATE THAT ARE DESIGNATED AS HARD-TO-COUNT (HTC) WILL

AND LOCAL GOVERNMENTS ARE MORE PARTICIPATORY AND REPRESENTATIVE OF THE COMMUNITIES THEY SERVE THE TEAM CONTINUED ITS WORK ON ENSURING THAT THE DISADVANTAGED AND UNDERREPRESENTED POPULATIONS IN L A COUNTY AND THROUGHOUT THE STATE THAT ARE DESIGNATED AS HARD-TO-COUNT (HTC) WILL BE MORE ACCURATELY COUNTED IN CENSUS 2020 THIS WORK INCLUDED SERVING AS THE LEAD ORGANIZATION IN THE STATEWIDE CENSUS POLICY ADVOCACY NETWORK AND THE LOCAL LOS ANGELES REGIONAL CENSUS TABLE WHILE GUIDING AND COLLABORATING WITH HUNDREDS OF OTHER NONPROFITS AND COMMUNITY-BASED ORGANIZATIONS TO SECURE MILLIONS OF ADDITIONAL OUTREACH DOLLARS, INCREASED AWARENESS OF HTC POPULATIONS' MULTIPLE PARTICIPATION CHALLENGES, AND COMMUNITY-BASED INPUT FROM THESE POPULATIONS TO INCREASE THEIR REPRESENTATION IN CENSUS 2020

EQUITY IN PUBLIC FUNDS AND HEALTH EQUITYIN 2018, WE BEGAN THE PROCESS OF MERGING OUR EQUITY IN PUBLIC FUNDS AND HEALTH EQUITY PROGRAMS INTO A SINGLE NEW PROGRAM THAT PARTNERS WITH COMMUNITIES OF COLOR TO EQUIP THEM WITH BUDGET AND ADVOCACY TOOLS AND WIN SUSTAINABLE INVESTMENTS THAT HELP ALL CALIFORNIANS THRIVE THROUGH THE COURSE OF THE YEAR, WE HELPED ADVANCE A FRAMEWORK FOR PARK EQUITY TO GUIDE HOW LA COUNTY DISTRIBUTES GRANTS THROUGH ITS NEW PARK FUNDING MEASURE, CREATED A BLUEPRINT FOR YOUTH DEVELOPMENT IN LA CITY TO PROVIDE A CITYWIDE PLATFORM

Form 990, Part III, Line 4b:

FOR INVESTING IN YOUTH, RELEASED A SERIES OF POLICY BRIEFS TO HELP COMMUNITIES IN KERN COUNTY UNDERSTAND HOW THE COUNTY'S LAND USE AND CAPITAL

ANGELES AS THEY WORKED TO ENSURE THAT FUNDING DECISIONS PRIORITIZED THE NEEDS OF STUDENTS OF COLOR

SPENDING DECISIONS IMPACTED THE BUILT ENVIRONMENT, AND SUPPORTED PARENT AND STUDENT ADVOCATES IN SCHOOL DISTRICTS FROM MERCED TO LOS

EDUCATIONAL EQUITYTHE EDUCATIONAL EQUITY PROGRAM EXPANDS EDUCATIONAL OPPORTUNITIES AND ENSURES APPROPRIATE SCHOOL FACILITIES FOR LOW INCOME AND DISADVANTAGED CHILDREN FROM BIRTH THROUGH HIGH SCHOOL GRADUATION. THIS TEAM UTILIZED EXTENSIVE DATA REVIEW AND FEEDBACK FROM A WIDE RANGE OF EARLY CARE AND EDUCATION (ECE) STAKEHOLDERS TO COMPILE AND PUBLISH A GROUNDBREAKING REPORT THAT PROVIDED A FULL ASSESSMENT OF AND POLICY RECOMMENDATIONS REGARDING THE QUALITY AND SITE SHORTAGE OF CALIFORNIA'S STATE-RUN ECE FACILITIES TO MAKE THE CASE FOR INCREASED

RESOURCE ALLOCATION THE TEAM HAS ALSO SPEARHEADED MULTIPLE LOCAL-, REGIONAL-, AND STATEWIDE-FOCUSED EFFORTS SURROUNDING DUAL LANGUAGE

LEARNERS, FAMILY AND COMMUNITY ENGAGEMENT AROUND ECE ISSUES, SUPPORT OF THE ECE WORKFORCE, AND SOLIDIFYING AN ENGAGED NETWORK OF ECE AND

Form 990, Part III, Line 4c:

K-12 STAKEHOLDERS

SCHEDUI Form 990 oi 990EZ)			Charity Statu rganization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) e mpt charitable	organization or trust.		2018
Department of the		► Go to	www.irs.gov/Forms			•	Open to Public Inspection
nternal Revenue S Name of the o ADVANCEMENT PR	rganization					Employer identific	cation number
			(41)			95-4835230	
		ublic Charity Stat ate foundation because				see instructions.	
-	•	ntion of churches, or as	•			(A)(i).	
2	school describe	ed in section 170(b)(1)(A)(ii). (Attach Sch	nedule E (Form 9	90 or 990-EZ))		
 3	nospital or a co	poperative hospital ser	vice organization desci	ıbed ın section	170(b)(1)(A)(iii).	
	medical resear me, city, and s	ch organization operat state	ed in conjunction with	a hospital descri	bed in section :	170(b)(1)(A)(iii). E	Enter the hospital's
		operated for the benefi (Complete Part II)	t of a college or univer	rsity owned or op	perated by a gov	ernmental unit descr	ibed in section 170
•		or local government o	governmental unit de	scribed in sectio	on 170(b)(1)(A	ı)(v).	
	-	that normally receives (1)(A)(vi). (Complete		s support from a	governmental u	nıt or from the gener	al public described in
8	ommunity tru	st described in sectio i	170(b)(1)(A)(vi)	(Complete Part I	I)		
		esearch organization de ollege of agriculture S					lege or university or a
fro inv	m activities re estment incon	that normally receives elated to its exempt fur ne and unrelated busin ection 509(a)(2). (Co	nctions—subject to cert ness taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its s	upport from gross
		organized and operate		r public safety S	ee section 509	(a)(4).	
mo	re publicly su	organized and operate pported organizations ugh 12d that describes	described in section 5	09(a)(1) or sec	ction 509(a)(2). See section 509(
a Ty	pe I. A suppo ganization(s) t	rting organization oper he power to regularly a IV, Sections A and B	rated, supervised, or co appoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by	
ma	nagement of I	orting organization sup the supporting organiz Part IV, Sections A	ation vested in the san				
		onally integrated. A zation(s) (see instruct					ated with, its
d Ty	pe III non-functionally integrated	inctionally integrate grated The organization u must complete Pa	d. A supporting organi n generally must satis	zation operated fy a distribution	in connection wi requirement and	th its supported orga	
e 🗌 Ch	eck this box if	the organization recei	ved a written determir	ation from the I		pe I, Type II, Type II	II functionally
		pe III non-functionally pported organizations	integrated supporting	organization			
		formation about the s	upported organization(s)			
	e of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the org in your govern	anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				Yes	No		
otal							
	Reduction A	Act Notice, see the I	nstructions for	Cat No 11285	SF S	Schedule A (Form 9	990 or 990-EZ) 2018

i	Support Schedule for (b)(1)(A)(ix)						
	(Complete only if you ch						under Part
_	III. If the organization fa Section A. Public Support	ins to quality und	der the tests list	ed below, please	e complete Part	111.)	
_	Calendar year	(-) 2014	(F) 2015	(-) 201 <i>6</i>	(4) 2017	(-) 2010	(6) T-1-1
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not	9,516,539	11,059,569	11,418,276	13,659,455	13,812,935	59,466,774
_	include any "unusual grant ") Tax revenues levied for the						
2	organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to						
4	the organization without charge Total. Add lines 1 through 3	9,516,539	11,059,569	11,418,276	13,659,455	13,812,935	59,466,774
5	The portion of total contributions by each person (other than a governmental unit or publicly	3,310,333	11,039,309	11,410,270	13,033,433	13,012,333	35,400,774
	supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						26,932,833
6	Public support. Subtract line 5 from line 4						32,533,941
5	Section B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f)Total
7	Amounts from line 4	9,516,539	11,059,569	11,418,276	13,659,455	13,812,935	59,466,774
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	14,970	20,448	15,561	21,701	30,176	102,856
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	47,060	24,188	42,914	41,868	232,485	388,515
11	Total support. Add lines 7 through 10						59,958,145
12	Gross receipts from related activities,	etc (see instructio	ns)			12	3,807,509
13	First five years. If the Form 990 is fo	r the organization'	s first, second, thir	d, fourth, or fifth	tax year as a secti	on 501(c)(3) organ	nization,
	check this box and stop here					▶□	
5	Section C. Computation of Public						
14	Public support percentage for 2018 (lir	ne 6, column (f) div	vided by line 11, co	olumn (f))		14	54 260 %
15	Public support percentage for 2017 Sc	nedule A, Part II, li	ne 14			15	54 460 %
16	33 1/3% support test—2018. If the	organization did n	ot check the box o	n line 13, and line	14 is 33 1/3% or		
ŀ	and stop here. The organization quali 33 1/3% support test—2017. If th	, ,	• • • • • • • • • • • • • • • • • • • •		nd line 15 is 33 1/3	3% or more, check	this

box and stop here. The organization qualifies as a publicly supported organization

organization

instructions

supported organization

17a 10%-facts-and-circumstances test-2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

b 10%-facts-and-circumstances test-2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Page 2

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▶ □

Schedule A (Form 990 or 990-EZ) 2018

20

Р	Support Schedule for					d + 1.6	law Dawk II - IS
	(Complete only if you c the organization fails to						ier Part II. If
Se	ection A. Public Support	quality affact t	ine cests fisced i	below, piedse ed	ompiete i die III	/	
	Calendar year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	(or fiscal year beginning in) ▶	(a) 2014	(B) 2013	(6) 2010	(u) 2017	(e) 2018	(I) Iotai
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
2	organization's tax-exempt purpose Gross receipts from activities that are						
3	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
-	to or expended on its behalf The value of services or facilities						
9	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
	ection B. Total Support	T	T	1	1	1	T
	Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
	income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from						
	businesses acquired after June 30,						
	1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is fo	r the organization	's first, second, tl	hird, fourth, or fift	h tax vear as a se	ction 501(c)(3) o	organization.
	check this box and stop here	.		,,,	,		▶ □
Se	ection C. Computation of Public	Support Perce	ntage				
15	Public support percentage for 2018 (lin			column (f))		15	
16	Public support percentage from 2017 S		•	(//		16	
	ection D. Computation of Invest					••	
17	Investment income percentage for 20:			line 13. column (f	7)	17	
	Investment income percentage for 20.	•		==, ==; (1	,,		
18	-			on line 14 and lin	o 15 is more than	18	ne 17 is not
	331/3% support tests—2018. If the	_					_
	more than 33 1/3%, check this box and s	•					
b	33 1/3% support tests—2017. If the	_					_
	not more than 33 1/3%, check this box	and stop here. `	i ne organization i	qualifies as a publ	icly supported org	janization – – – – – – – – – – – – – – – – – – –	▶□

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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Schedule A (Form 990 or 990-EZ) 2018 Page 4 Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509

(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below

3а Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the

determination 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you

checked 12a or 12b in Part I, answer (b) and (c) below 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations

Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported

organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by 5a

amendment to the organizing document) Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?

5b 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

than (1) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its

6

7

8

answer line 10b below

the organization had excess business holdings)

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

complete Part I of Schedule L (Form 990 or 990-EZ)

8 Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

9a Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI.

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

9b which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

9с

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

>cn	edule A (Form 990 or 990-E2) 2018		F	age 5
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11 c		
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization	-		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
_	<u> </u>			
	ection D. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		103	-140
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations		l	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ions)		
	The organization satisfied the Activities Test Complete line 2 below	•		
	b			
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test Answer (a) and (b) below.	į	Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement			
,		2b		
3	Parent of Supported Organizations Answer (a) and (b) below.	_		
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3h		

Sched	lule A (Form 990 or 990-EZ) 2018			Page 6
Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrat	ed Type III supporting or	ganızatıon (see

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

c Remainder Subtract lines 4a and 4b from 4

5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2
If the amount is greater than zero, explain in Part VI

Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.
 Excess distributions carryover to 2019. Add lines.

a Excess from 2014. **b** Excess from 2015. **c** Excess from 2016.

See instructions

d Excess from 2017.e Excess from 2018.

3_j and 4c

8 Breakdown of line 7

Additional Data

Software ID: Software Version:

EIN: 95-4835230

Name: ADVANCEMENT PROJECT

Schedule A (Form 990 or 990-EZ) 2018

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

Facts And Circumstances Test

SCHEDULE C

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

DLN: 93493310012599

Open to Public

Department of the Treasury Internal Revenue Service If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

EZ)

(Form 990 or 990-

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

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

• Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B

Inspection

f the	Section 501(c)(3) organizations that Section 501(c)(3) organizations that	n Form 990, Part IV, Line 4, or Form 99 have filed Form 5768 (election under so have NOT filed Form 5768 (election un	ection 501(h)) Co der section 501(h	mplete Part II-A Do not c)) Complete Part II-B Do	omplete Part II-B not complete Part II-A
Pro	e organization answered "Yes" or xy Tax) (see separate instruction: Section 501(c)(4), (5), or (6) organiz		i) (see separate ii	nstructions) or Form 990	0-EZ, Part V, line 35c
Nar	me of the organization	ations Complete Fart III		Employer ide	ntification number
ADV	/ANCEMENT PROJECT			95-4835230	
Par	t I-A Complete if the organ	nization is exempt under sectio	n 501(c) or is	a section 527 organ	ization.
1	Provide a description of the organ "political campaign activities")	ization's direct and indirect political cam	npaign activities in	Part IV (see instructions	for definition of
2	Political campaign activity expend	itures (see instructions)		•	\$
3	Volunteer hours for political camp	· · · · · · · · · · · · · · · · · · ·	- F01(-)(2)		
		nization is exempt under section x incurred by the organization under se			
1 2	, , , , , , , , , , , , , , , , , , ,	x incurred by the organization under se ix incurred by organization managers ur		•	≯ \$
3	·	ion 4955 tax, did it file Form 4720 for t		•	Yes No
4a	Was a correction made?				☐ Yes ☐ No
ь	If "Yes," describe in Part IV				
Par	t I-C Complete if the organ	nization is exempt under sectio	n 501(c), exce	ept section 501(c)(3).
1	·	ed by the filing organization for section	·		\$
2	Enter the amount of the filing org- function activities	anızatıon's funds contributed to other or	rganizations for se	ection 527 exempt	\$
3	Total exempt function expenditure	es Add lines 1 and 2 Enter here and on	Form 1120-POL,	line 17b ►	\$
4	Did the filing organization file For	m 1120-POL for this year?			☐ Yes ☐ No
5	organization made payments For of political contributions received	employer identification number (EIN) of each organization listed, enter the amo that were promptly and directly delivere se (PAC) If additional space is needed,	ount paid from the ed to a separate p	filing organization's fund: olitical organization, such	s Also enter the amount
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
1					
2					
3					
1					
5					
5					
or P	Paperwork Reduction Act Notice, see t	he instructions for Form 990 or 990-EZ.	Cat	No 50084S Schedule C	(Form 990 or 990-EZ) 2018

745,832

38,487

186,458

10,797

717,309

26.606

179,327

12,700

Lobbying nontaxable amount

(150% of line 2a, column(e))

Total lobbying expenditures

Grassroots ceiling amount

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Lobbying ceiling amount

2a

697,203

42,487

174,301

18,588

784,949

121,404

196,237

78,065

Schedule C (Form 990 or 990-EZ) 2018

2,945,293

4,417,940

228,984

736,323

1,104,485

120,150

activity

Volunteers?

Part IV

Return Reference

1

(b)

Amount

(a)

No

Yes

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b Carryover from last year C Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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

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

Explanation

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

Taxable amount of lobbying and political expenditures (see instructions)

instructions), and Part II-B, line 1 Also, complete this part for any additional information

Supplemental Information

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

5

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

(Form 990)

Department of the Treasury

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

DLN: 93493310012599

Open to Public

▶ Go to www.irs.gov/Form990 for the latest information. Internal Revenue Service Inspection Name of the organization **Employer identification number** ADVANCEMENT PROJECT 95-4835230 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art,

- (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items
- Revenue included on Form 990, Part VIII, line 1

following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 52283D Schedule D (Form 990) 2018

historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the

Par	t IIII	Organizations M	aintaining Col	lections of A	rt, Histori	ical T	reasu	ıres, oı	r Other	Similar A	ssets (c	ontınued	1)
3		the organization's acq (check all that apply)	juisition, accessioi	n, and other reco	ords, check	any of	the fo	llowing t	that are a	significant	use of its	collectio	n
а		Public exhibition			d		Loan	or excha	ange pro	grams			
b		Scholarly research			e		Othe	r					
С		Preservation for future	e generations										
4	Provid Part X	le a description of the	organization's col	lections and exp	lain how the	ey furtl	her the	e organız	zation's e	xempt purpo	se in		
5		g the year, did the org s to be sold to raise fui								nılar	☐ Yes	, _□	No
Pa	rt IV	Escrow and Cust Complete if the or X, line 21.			Form 990), Part	IV, lı	ne 9, o	r reporte	ed an amoi	unt on F	orm 990	0, Part
1a		organization an agent ed on Form 990, Part		an or other inter	mediary for	contri	bution	s or othe	er assets	not	☐ Yes	; 🗆	No
Ь	If "Ye	s," explain the arrange	ement ın Part XIII	and complete t	he following	table				Δ	mount		
c		ning balance		·	_				1c				
d	Addıtı	ons during the year							1d				
е	Distrib	outions during the yea	r						1e				
f	Ending	g balance							1f				
2a		e organization include									_	, 	No
b		s," explain the arrange			·			•					
Pa	rt V	Endowment Fun	ds. Complete if										
1 2	Reginni	ng of year balance .		(a)Current yea	ar (b) P	rior yea	ır	(c)Iwo y	ears back	(d)Three ye	ars back	(e)⊦our y	ears back
	_	utions											
		estment earnings, gaii	ne and losses				-						
		or scholarships	•										
		expenditures for facilities											
		grams	c3										
f	Adminis	strative expenses .											
g	End of	year balance											
2		le the estimated perce designated or quasi-e	=	ent year end bal	ance (line 1	g, colu	mn (a))) held a	ıs	•	•		
a		ndesignated of quasi-e anent endowment >	indownient P										
b													
С		orarily restricted endo		ld ogual 100%									
3a		ercentages on lines 2a iere endowment funds		•	nization tha	t are h	eld an	d admini	istered fo	r the			
		ization by	росси									Ye	s No
	(i) un	related organizations										(i)	
		elated organizations										(ii)	
4		s" on 3a(II), are the re Ibe In Part XIII the Inte	-	•							3	b	
Pa	rt VI	Land, Buildings,	and Equipme	nt.									
		Complete if the or	ganization ansv	vered "Yes" on									
	Descrip	ption of property	(a) Cost or oth (investme	, , ,	Cost or other	basis (other)	(c) Acc	cumulated (depreciation	(0	d) Book va	alue
1 a	Land												
b	Building	gs											
С	Leaseh	old improvements				5	07,659			259,157			248,502
d	Equipm	ent				4:	22,489			418,113			4,376
						39	99,522			246,825			152,697

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

Part VII Investments—Other Securities. Complete if the c	organization a	answered "Yes" or	Page s n Form 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	(E Bo val	ok Cos	(c) Method of valuation st or end-of-year market value
(1) Financial derivatives			
(3)Other			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•		
Part VIII Investments—Program Related.		\/ line 11c See F	form 000 Part V June 12
Complete if the organization answered 'Yes' on Form (a) Description of investment	(b) Book v	alue	(c) Method of valuation
(1)		Cos	st or end-of-year market value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	•		
Part IX Other Assets. Complete if the organization answered 'Ye (a) Description	es' on Form 99	0, Part IV, line 11d	See Form 990, Part X, line 15 (b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answ	· · · · wered 'Yes' o		▶ IV, line 11e or 11f.
See Form 990, Part X, line 25. (a) Description of liability	(b) Book value	
(1) Federal income taxes		•	
DEFERRED RENT LIABILITY (2)		399,281	_
(3)			
(4)			_
(5)			-
(6)			-
(7)			-
(8)			-
(9)			-
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)		200 201	-
2. Liability for uncertain tax positions. In Part XIII, provide the text of the	<u>▶</u>	399,281	<u></u>

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

d 2d 2e 202,231 e 3 3 14,268,421 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1

2b

2c

2a

2b

2c

2d

4a

4b

Investment expenses not included on Form 990, Part VIII, line 7b . 4a 4b -15,606 b

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

Add lines **4a** and **4b** 4c Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

c 5 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

Amounts included on line 1 but not on Form 990, Part IX, line 25

Donated services and use of facilities . . .

Other (Describe in Part XIII)

Return Reference

See Additional Data Table

Schedule D (Form 990) 2018

Part XI

b

c

1

2

c

d

Add lines 2a through 2d 3 Amounts included on Form 990, Part IX, line 25, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b . .

4 b

Add lines **4a** and **4b** 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Part XIII **Supplemental Information**

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

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

Explanation

4c 5

160,700

15,606

2e

3

160.700

Page 4

14,470,652

-15,606

14,252,815

12,875,277

176,306

12,698,971

12.698.971

Schedule D (Form 990) 2018

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

Schedule D (Form 990) 2018

Additional Data

Software Version:

EIN: 95-4835230

Name: ADVANCEMENT PROJECT

Explanation

Supplemental Information

Return Reference

PART XI, LINE 4B - OTHER DIRECT FUNDRAISING EXPENSES -15,606 **ADJUSTMENTS**

Software ID:

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	DIRECT FUNDRAISING EXPENSES 15,606

S

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization ADVANCEMENT PROJECT

Internal Revenue Service

Supplemental Information Regarding

Fundraising or Gaming Activities
Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the

organization entered more than \$15,000 on Form 990-EZ, line 6a ► Attach to Form 990 or Form 990-EZ.

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

DLN: 93493310012599 OMB No 1545-0047

2018

Open to Public Inspection

Employer identification number

					95-4835230				
Part I Fundraising Activities Form 990-EZ filers a	•	_			rm 990, Part IV, line 1	7.			
Indicate whether the organiza	ation raised funds thr	ough any	of the fo	ollowing activities Check	all that apply				
a Mail solicitations			е	Solicitation of non-	government grants				
b Internet and email solicita	ations		f	Solicitation of government grants					
c Phone solicitations			q	✓ Special fundraising events					
d In-person solicitations			_						
2a Did the organization have a workey employees listed in Fo						s 🗸 No			
b If "Yes," list the ten highest p to be compensated at least \$			draisers)	pursuant to agreements	under which the fundraise	er is			
i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai custo cont	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization			
		Yes	No						
JULIA HOWELL BARROS 1111 BUCHANAN ST NW	FUNDRAISING CONSULTING		No	0	28,875	-28,875			
WASHINGTON, DC 20011									
					l				

Cat No 50083H

che	dule G (Form 990 or 990-EZ) 2018					F	age 3			
.1	Does the organization conduct gaming	activities with nonmember	5?		☐ Yes	Пис				
.2	Is the organization a grantor, beneficial formed to administer charitable gaming		member of a partnership or other entity		□Yes					
3	Indicate the percentage of gaming activ	vity conducted in								
а	The organization's facility			13a			%			
b	An outside facility			13b			%			
4	Enter the name and address of the pers	son who prepares the orga	nization's gaming/special events books and re	ecords						
	Name ►									
	Address ►									
5a	Does the organization have a contract virevenue?	with a third party from who	om the organization receives gaming		□Yes	□No				
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$									
С	If "Yes," enter name and address of the	e third party								
	Name ►									
	Address ▶									
6	Gaming manager information									
	Name ►									
	Gaming manager compensation ▶ \$									
	Description of services provided ▶									
	☐ Director/officer	☐ Employee	☐ Independent contractor							
7	Mandatory distributions									
а	Is the organization required under state retain the state gaming license?	e law to make charitable di	stributions from the gaming proceeds to		Yes	□No				
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$									
Pai	t IV Supplemental Informatio	n. Provide the explanat	rions required by Part I, line 2b, column licable. Also provide any additional info				 S.			
_	Return Reference		Explanation							

Schedule G (Form 990 or 990-EZ) 2018

DLN: 93493310012599 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. **Open to Public** ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number ADVANCEMENT PROJECT 95-4835230 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization (book, FMV, appraisal, noncash assistance or assistance grant cash or government assistance other) (1) See Additional Data (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

Schedule I (Form 990) 2018						Page 2
Part III Grants and Other As Part III can be duplica	sistance to	Domestic Individ	uals. Complete if the org	anızatıon answered "Yes"	on Form 990, Part IV, line 22	
(a) Type of grant or assista		(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
Part IV Supplemental :	Information	on. Provide the in	nformation required in	Part I, line 2; Part III	, column (b); and any other a	additional information.
Return Reference	Explanation	on				
PART I, LINE 2	SUB-GRANTEES ARE RESPONSIBLE FOR MAINTAINING THE ORIGINAL SUBSTANTIATING DOCUMENTS RELATED TO PROJECT EXPENDITURES AND FOR MAKING THE RECORDS AVAILABLE FOR ADVANCEMENT PROJECT'S REVIEW UPON REQUEST SUB-GRANTEES ARE RESPONSIBLE FOR MAINTAINING ADEQUATE FINANCIAL RECORDS OF THEIR GRANT ADVANCEMENT PROJECT RESERVES THE RIGHT TO AUDIT SUB-GRANTEES' BOOKS AND RECORDS RELATING TO THE EXPENDITURE OF ANY FUNDS PROVIDED BY ADVANCEMENT PROJECT					

Schedule I (Form 990) 2018

Additional Data

AAAJ-EMPOWERING PACIFIC

1137 WILSHIRE BLVD STE 110

11145 WILSHIRE BLVD 2ND FL

ISLANDER COMMUNITY

LOS ANGELES, CA 90017 ASIAN AMERICANS

ADVANCING JUSTICE LA

LOS ANGELES, CA 90017

Software ID: **Software Version: EIN:** 95-4835230

Name: ADVANCEMENT PROJECT

rorm 990,5chedule 1, Part	11, Grants and	Other Assistance to	o Domestic Organiza	tions and Domest	ic dovernments.	
(a) Name and address of organization	(b) EIN	(c) IRC section If applicable	(d) Amount of cash grant	(e) Amount of non- cash	(f) Method of valuation (book, FMV, appraisal,	

501(C)(3)

501(C)(3)

organization ıf applıcable grant cash or aovernment assistance

93,294

93,294

(q) Description of

non-cash assistance

other)

(h) Purpose of grant

PROJECT PARTNERSHIP

PROJECT PARTNERSHIP

AS PART OF GRANT

AS PART OF GRANT

REQUIREMENTS

REQUIREMENTS

or assistance

95-3854152

95-3854152

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

AS PART OF GRANT

REQUIREMENTS

CALIFORNIA ASSOCIATION OF NONPROFITS 870 MARKET ST SUITE 985 SAN FRANCISCO. CA 94102	77-0045382	501(C)(3)	9,429		PROJECT PARTNERSH AS PART OF GRANT REQUIREMENTS
SAIT TRAITCISCO, CA 54102					

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

EDUCATION FUND

4801 EXPOSITION BLVD

LOS ANGELES, CA 90016

46-2301623 501(C)(3) 62.294 PROJECT PARTNERSHIP CALIFORNIA CALLS

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance CHILDREN NOW 94-3059243 501(0)(3) 85 129 PROJECT PARTNERSHIP

AS PART OF GRANT

REQUIREMENTS

1404 FRANKLIN STREET SUITE 700 OAKLAND, CA 94612	34 3 6 33243	301(0)(3)	03,127		AS PART OF GRANT REQUIREMENTS
COALITION FOR HUMANE	95-4421521	501(C)(3)	9,429		PROJECT PARTNERSHIP

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

IMMIGRANT RIGHTS

2533 W 3RD ST SUITE 101

LOS ANGELES, CA 90016

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

COMMUNITY COALITION 8101 S VERMONT AVE LOS ANGELES, CA 90044	95-4298811	501(C)(3)	52,831		PROJECT PARTNERSH AS PART OF GRANT REQUIREMENTS
COMMUNITY PARTNERS FOR	95-4302067	501(C)(3)	93,294		PROJECT PARTNERSH

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

LOS ANGELES, CA 90012

ENTS ARTNERSHIP (-/(-/ CA NATIVE VOTE AS PART OF GRANT 1000 N ALAMEDA STREET REQUIREMENTS

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

AS PART OF GRANT

REQUIREMENTS

COUNCIL ON AMERICAN-	77-0411194	501(C)(3)	83,865		PROJECT PARTNERSHI
ISLAMIC RELATIONS CA					AS PART OF GRANT
2180 W CRESCENT AVENUE					REQUIREMENTS
ANHEIM, CA 92801					

94-2505916 501(C)(3) 9.429 PROJECT PARTNERSHIP DISABILITY RIGHTS

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

CALIFORNIA

1831 K STREET

SACRAMENTO, CA 95811

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

EQUALITY CALIFORNIA INSTITUTE 3701 WILSHIRE BLVD STE 725 LOS ANGELES, CA 90010	68-0438008	501(C)(3)	93,294		PROJECT PARTNERSHIP AS PART OF GRANT REQUIREMENTS
TOTAL GRANTMAKERS CONCERN W IMMIGRANT &	20-2559651	501(C)(3)	5,000		PROJECT PARTNERSHIP AS PART OF GRANT

REQUIREMENTS REFUGE PO BOX 1100

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

SEBASTOPOL, CA 95473

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

PROJECT PARTNERSHIP

AS PART OF GRANT

REQUIREMENTS

HOUSING CALIFORNIA	68-0133565	501(C)(3)	9,429		PROJECT PARTNERSHIP
1107 9TH ST SUITE 560					AS PART OF GRANT
SACRAMENTO, CA 95814					REQUIREMENTS

10.015

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

501(C)(3)

INNERCITY STRUGGLE

LOS ANGELES, CA 90033

530 S BOYLE AVE

27-2133211

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance LA VOICE 95-4781974 45.000 PROJECT PARTNERSHIP

AS PART OF GRANT

REQUIREMENTS

501(C)(3) 3660 WILSHIRE BLVD SUITE AS PART OF GRANT REQUIREMENTS 602 LOS ANGELES, CA 90010

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

OF COMMERCE

350 S BIXEL ST SUITE 200

LOS ANGELES, CA 90017

LOS ANGELES AREA CHAMBER 95-2597392 501(C)(3) 9.000 PROJECT PARTNERSHIP

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 02-0661629 501(C)(3) 7.831 LOS ANGELES COMMUNITY PROJECT PARTNERSHIP

REQUIREMENTS

ACTION NETWORK AS PART OF GRANT 838 F 6TH STREET REQUIREMENTS LOS ANGELES, CA 90021

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

1710 E INDIAN SCHOOL DRIVE

PHOENIX, AZ 85016

MI FAMILIA VOTA EDUCATION 20-0182824 501(C)(3) 93.294 PROJECT PARTNERSHIP FUND AS PART OF GRANT

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

PROJECT PARTNERSHIP

AS PART OF GRANT

REQUIREMENTS

NALEO EDUCATIONAL FUND	52-1212849	501(C)(3)	83,865		PROJECT PARTNERSHIF
1122 W WASHINGTON BLVD					AS PART OF GRANT
3RD FLOOR					REQUIREMENTS
LOS ANGELES, CA 90015					1

7.817

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

501(C)(3)

95-4770745

PACOIMA BEAUTIFUL
13520 VAN NUYS BLVD SUITE

LOS ANGELES, CA 91331

200

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

REQUIREMENTS

501(C)(3) 93.294 PICO CALIFORNIA 94-2206497 2000 FRANKLIN STREET 3RD AS PART OF GRANT

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

FLOOR

OAKLAND, CA 94612

efil	e GRAPHIC pr	int - DO NOT PROCESS As	Filed Dat	a -	DLN: 934	9331	10012	:599
Sch	nedule J	Com	pensat	ion Information	OM	IB No	1545-0	0047
(For	m 990)	For certain Officers,	Directors, 1	rustees, Key Employees, and Hig	hest			
		Complete if the organic		ated Employees vered "Yes" on Form 990, Part IV	. line 23.	20	18	}
		•	▶ Attach	to Form 990.				
•	tment of the Treasury al Revenue Service	► Go to <u>www.irs.gov/r</u>	<u>orm990</u> tor	instructions and the latest inform	nation.		to Pul ectio	
	ne of the organiza				Employer identificat	ion nu	ımber	
ADV	ANCEMENT PROJEC				95-4835230			
Pa	rt I Questi	ons Regarding Compensation	1					
							Yes	No
1a				f the following to or for a person liste y relevant information regarding the				
		or charter travel		Housing allowance or residence for	•			
	_	companions	님	Payments for business use of perso				
		ification and gross-up payments	님	Health or social club dues or initiation				
	L Discretion	ary spending account	ш	Personal services (e g , maid, chauf	reur, cher)			
b		tes in line 1a are checked, did the o		ollow a written policy regarding payn nplete Part III to explain	nent or reimbursement	1 b		
2	Did the organiza	tion require substantiation prior to i	reimbursing	or allowing expenses incurred by all r, regarding the items checked in line	. 1.2	2		
	directors, truste	es, officers, including the CEO/Exec	ative Directo	r, regarding the items checked in line	e la'			
3				ed to establish the compensation of the	ne			
	_	EO/Executive Director Check all tha d organization to establish compens		not check any boxes for methods CEO/Executive Director, but explain i	n Part III			
	☑ Compensa			Months on a manufacture and a sandon at				
	'	ition committee ent compensation consultant	✓	Written employment contract Compensation survey or study				
		of other organizations	✓	Approval by the board or compensa	tion committee			
4		-	Part VII, Se	ction A, line 1a, with respect to the f				
	related organiza	tion						
а	Receive a sever	ance payment or change-of-control	payment?			4a		No
b	•	receive payment from, a suppleme	•	'		4b		No
С		receive payment from, an equity-b		nsation arrangement? plicable amounts for each item in Par	+ TTT	4c		No
	If les to any c	Times 4a-c, list the persons and pro	vide tile app	bilicable almounts for each item in Far	C 111			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) org	janizations	must complete lines 5-9.				
5		d on Form 990, Part VII, Section A, ontingent on the revenues of	line 1a, did	the organization pay or accrue any				
a	The organization	۶۱				5a		No
b	Any related orga					5b		No
	•	5a or 5b, describe in Part III						
6		d on Form 990, Part VII, Section A, ontingent on the net earnings of	line 1a, did	the organization pay or accrue any				
а	The organization	٦٦				6a		No
b	Any related orga					6 b		No
_	•	6a or 6b, describe in Part III						
7		d on Form 990, Part VII, Section A, escribed in lines 5 and 6? If "Yes," d		the organization provide any nonfixe rt III	d	7		No
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," de	escribe			Ne
9		3, did the organization also follow th	e rebuttable	presumption procedure described in	Regulations section	9		No
Ear I		ction Act Notice, see the Instruc	tions for Fo	orm 990 Cat No 5	50053T S chedule 1		. 000)	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

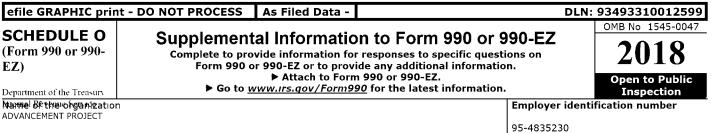
Instructions, on row (II) Do not list any individuals that are not listed on Form 990, Part VII

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

Note. The sum of column:	<u>s (B)</u>	(1)- (111) for each listed ind	lividual must equal the to	tal amount of Form 990,	Part VII, Section A, line 1	1a, applicable column (D)	and (E) amounts for tha	t ındıvıdual
(A) Name and Title	Į	(B) Breakdown	of W-2 and/or 1099-MISC	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
1 GIOVANNI COZZARELLI CFO	(i)	173,378	0	0	4,307	16,137	193,822	0
	(ii)	0	0	0	0	0	0	0
	(i)	231,241	0	0	1,800	19,798	252,839	0
	(ii)	0	0	0	0	0	0	0
	(i)	277,437	0	0	8,050	19,798	305,285	0
	(ii)	0	0	0	0	0	0	0
	(i)	193,281	0	0	5,822	908	200,011	0
	(ii)	0	0	0	0	0	0	0
DINECTOR OF LEADERSHIP	(i)	142,363	0	0	7,537	4,231	154,131	0
DEVELOR CA	(ii)	0	0	0	0	0	0	0
6 ZERLINE HUGHES SPRUILL	(i)	141,756	0	0	19,783	0	161,539	0
DIRECTOR OF	(ii)	0	0	0	0	0	0	0
7 KARLA HOWELL DIRECTOR OF POLICY &	(i)	135,088	0	0	19,767	3,900	158,755	0
DDOCDAMS CA	(ii)	0	0	0	0	0	0	0
8 JORGE JIMENEZ DIRECTOR OF HUMAN	(i)	134,741	0	0	16,098	2,375	153,214	0
DECULIDATE CV	(ii)	0	0	0	0	0	0	0
	H							
	Щ							
	_							
	_						Schedule	J (Form 990) 2018

Schedule J (Form 990) 2018 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Schedule J (Form 990) 2018



Return Reference	Explanation
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES	POWER AND DEMOCRACY OUR POWER AND DEMOCRACY PROGRAM CONTINUED TO EXPAND ELECTORATE THROUGH ELIMINATING CRIMINAL CONVICTIONS AS BARRIER TO VOTING NOR RESTORING VOTING RIGHTS TO PEOP LE WITH FELONY CONVICTIONS IN FLORIDA VIRGINIA, AND LOUISIANA, DEFEAT FEDERAL AND LOCAL PO LICIES THAT MAKE IT HARDER TO VOTE, HOLD LOCAL AND STATE ELECTION OFFICIALS ACCOUNTABLE IN VA, AZ, GA, FL, AND OH, INCREASE SUPPORT FOR A ROBUST DEMOCRACY, INCLUDING AN AFFIRMATIVE RIGHT TO VOTE, AND BUILD-UP THE NEXT GENERATION VOTING RIGHTS MOVEMENT IN FLORIDA WE REL EASED A GROUNDBREAKING REPORT THAT DEMONSTRATES THAT FELON DISENFRANCHISEMENT CORRELATES WITH POVERTY, UNEMPLOYMENT AND LOW EDUCATIONAL ATTAINMENT IN BLACK NEIGHBORHOODS DEMOCRACY DISAPPEARED HOW FLORIDA SILENCES THE BLACK VOTE THROUGH FELONY DISENFRANCHISEMENT, IS BE ING USED TO STRENGTHEN SUPPORT IN BLACK COMMUNITIES TO CHANGE FLORIDA'S LIFETIME BAN ON VO TING FOR PEOPLE WITH FELONIES IN VIRGINIA, WE HAVE CONTINUED DUX WORK WITH NEW VIRGINIA M AJORITY (NVM) AND THE VIRGINIA CVIC ENGAGEMENT TABLE TO IDENTIFY AND ASSIST VOTERS WITH FELONY CONVICTIONS TO APPLY TO HAVE THEIR RIGHTS RESTORED AND REGISTER TO VOTE IN JUNE 2018, OUR EXECUTIVE DIRECTOR, JUDITH BROWNE DIANIS, WAS ASKED TO GIVE REMARKS AT A CONGRESSIO NAL BLACK CAUCUS PANEL ON THE FIFTH ANNIVERSARY OF THE SHELBY V HOLDER COURT DECISION THAT EFFECTIVELY BLOCKED A KEY PROVISION OF THE VOTING RIGHTS ACT IN SEPTEMBER 2018, WE LAUN CHED A WEBINAR SERIES ON HOW TO PROTECT THE VOTE DIRING THE 2018 MID-TERM ELECTIONS THE W EBINARS, RELEASED IN FIVE STATES, HELPED VOTERS UNDERSTAND HOW AND WHERE TO REGISTER TO VOTE, WHAT TO EXPECT DURING THE WEEKS PRIOR TO ELECTION DAY AND HOW THEY CAN ASSERT THEIR RIGHTS TO VOTE, WHAT TO EXPECT DURING THE WEEKS PRIOR TO BLICK SON HOW TO PROTECT THE VOTE DIA GOVERNO FOR ALL PROJECT, CONTINUES TO FIGHT FOR STRONG PUBLIC SCHOOLS THAT CREATE NUCLUE BUILD SUPPORT AT LOCAL AND NATIONAL LEVEL FOR "FREE, SAFE, AND JUST" PUBLIC EDUCATION, DE VELOP MODEL FOR IMPLICIT BIAS ASSESSMENT AND TRAINING FOR STRONG

Return Reference	Explanation
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES	USTICE SPHERE, INCLUDING GRASSROOTS PARTNERS, ALLIED ORGANIZATIONS, AND FUNDERS TO ALIGN S TRATEGIES TO COMBAT WHAT WAS AN EXPECTED KNEE JERK REACTION OF INCREASING MILITARIZATION A T SCHOOLS IN MARCH 2018, ADVANCEMENT PROJECT HOSTED A MEDIA CALL FEATURING YOUTH ORGANIZE RS FROM ACROSS THE COUNTRY WHO WERE COORDINATING STUDENT WALKOUTS IN RESPONSE TO GUN VIOLE NCE IN SCHOOLS WE INTENTIONALLY CREATED A SPACE TO CENTER THE VOICES OF YOUNG PEOPLE OF C OLOR, WHO, IN THE DAYS FOLLOWING THE PARKLAND SHOOTING, WERE MOSTLY LEFT OUT OF THE CONVER SATION IN SEPTEMBER 2018, WE RELEASED A REPORT, WE CAME TO LEARN A CALL TO ACTION FOR PO LICE FREE SCHOOLS, DETAILING THE HARMFUL IMPACT OF SCHOOL POLICE ON BLACK AND BROWN YOUTH AND THEIR BASIC RIGHT TO EDUCATION DUE TO THE PREJUDICED APPLICATION OF POLICE PRESENCE, FORCE, AND VIOLENCE BY STATE ACTORS IT INCLUDED A COMPANION ACTION KIT ON SCHOOL POLICING, AND A DIGITAL TOOLKIT FOR OUR GRASSROOTS PARTNERS TO USE IN THEIR OWN ORGANIZING CAMPAIGN S AROUND REMOVING POLICE FROM SCHOOLS AND PROTECTING EVERY STUDENT'S RIGHT TO A SAFE AND S UPPORTIVE ENVIRONMENT AT SCHOOLS IMMIGRANT JUSTICE WITH A VERY SMALL TEAM, OUR IMMIGRANT JUSTICE PROJECT HAS BEEN CHALLENGED BY THE IMMENSE ATTACKS ON IMMIGRANTS DURING THESE DIF FICULT TIMES, WE HAVE RESPONDED TO THE NEEDS OF LOCAL GROUPS PROVIDING RESEARCH, ANALYSIS, TRAINING, AS WELL AS COMMUNICATION SUPPORT THE GOALS OF THE IMMIGRANT JUSTICE PROJECT IN CLUDE CHALLENGE NATIONAL AND LOCAL POLICIES THAT CRIMINALIZE IMMIGRANTS DUE AND LEAD TO INCAR CERATION AND DEPORTATION, RAISE PUBLIC AWARRENESS ABOUT CRIMINALIZE IMMIGRANT JUSTICE PROJECT IN CLUDE CHALLENGE NATIONAL AND LOCAL POLICIES THAT CRIMINALIZE IMMIGRANT SHE LAD LEAD TO INCAR CERATION AND DEPORTATION, RAISE PUBLIC AWARRENESS ABOUT CRIMINALIZE IMMIGRANT SHE LIAN EXPENSE AND SUPPORT THE PROACTIVE IMMIGRANT JUSTICE MOVEMENT, INCLUDING DEMONSTRATING THE LIN KED FATE OF IMMIGRANTS AND NON-IMMIGRANT JUSTICE MOVEMENT, INCLUDING DEMONSTRATING THE LIN RESPONSE PLAN RAPID PERSIDENT DEPRICACY OF THE

Return Reference	Explanation
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES	OJECT INCLUDE CHALLENGE THE STRENGTHENING OF THE POLICE STATE BY THE FEDERAL GOVERNMENT, ENSURE PROTESTORS ARE NOT CRIMINALIZED, TRANSFORM POLICING TO ENSURE COMMUNITY ACCOUNTABIL ITY AND SAFETY FOR COMMUNITIES OF COLOR, RE-DEFINE SAFETY IN COMMUNITIES OF COLOR, INCREAS E AWARENESS OF LOCAL AND NATIONAL POLICING AND MASS INCARCERATION ISSUES, REDUCE HARMFUL U SE OF DISCRETION IN APPLICATION OF CRIMINAL LAWS (INCLUDING PROSECUTORIAL DISCRETION), STR ENGTHEN THE CAPACITY OF THE NATIONAL MOVEMENT TO END OVER-POLICING AND PROFILING, AND CHAN GE THE DISCOURSE ON CRIMINALIZATION, ESPECIALLY IN THE AFTERMATH OF HIGH PROFILE POLICE MI SCONDUCT IN ST LOUIS, MISSOURI, A LOCAL JAIL (THE WORKHOUSE) HOUSES ALMOST 1,000 PEOPLE, 95%, OF WHOM ARE THERE PRE-TRIAL BECAUSE THEY CANNOT AFFORD BAIL IN AN UNUSUAL STRATEGY TO CLOSE A JAIL, WE FILED LITIGATION IN JANUARY CHALLENGING THE CASH BAIL SYSTEM WITH HOPES OF ENDING CASH BAIL AND THEREFORE EMPTYING THE JAIL AND MAKING IT USELESS IN JUNE 2018, WE HOSTED OUR FIRST CROSS-ISSUE ACTIONCAMP ON THE POLICE STATE INCLUDING POLICE IN SCHOOL S, IN COMMUNITIES AND AT THE BORDERS IN ADDITION TO ORGANIZING AND TRAINING, ACTIONCAMP IS AN IMPORTANT GATHERING FOR POLITICAL EDUCATION ACTIONCAMP 2018 POLICING RACE CONVENED OVER 125 ORGANIZERS FROM OVER 40 ORGANIZATIONS, COMMUNITY AND YOUTH LEADERS FOR 2 5 DAYS T O SHARPEN THEIR TOOLS, SHARE STORIES AND STRATEGIES, AND BUILD LONG-LASTING RELATIONSHIPS THE SCOPE OF ACTIONCAMP 2018 DOVE DEEPER INTO THE INTERCONNECTEDNESS OF POLICING, IMMIGRA TION ENFORCEMENT AND SCHOOL MILITARIZATION THAT PROHIBITS OUR COMMUNITIES FROM LIVING FREE AND SAFE YOUTH CRIMINALIZATION OUR YOUTH CRIMINALIZATION WORK FOCUSES ON INCREASING POSI TIVE PORTRAYALS OF YOUTH OR INTHALIZATION, AND MESSAGING AND COMMUNICATIONS STRA TEGIES THAT CAN BE SCALED TO LARGER CAMPAIGNS IN MARCH 2018, ADVANCEMENT PROJECT AND SRB COMMUNICATIONS HELD THREE FOOLDS GROUPD OF BLACK PARENTS, ONE GROUP OF LATINX PARE NTS, AND ONE GROUP OF WHITE TEACHERSOVER THREE DAYS IN PHILADELPHIA, PENNSYLVANIA T

Return Reference	Explanation
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES CONTINUE	STRATEGIC COMMUNICATIONS ADVANCEMENT PROJECT WORKS ON THE NATIONAL LEVEL TO SHIFT THE NARRATIVE AROUND RACE AND JUSTICE THROUGH RESEARCH AND FOCUS GROUPS, MEDIA OUTREACH, AND STRATEGIC COMMUNICATIONS CAMPAIGNS WITH OUR PARTNERS INCLUDING, E-ADVOCACY, SOCIAL MEDIA, AND TRADITIONAL NEWS OUTLETS AS THE DEMOGRAPHICS OF OUR NATION CHANGE AND GRASSROOTS MOVEMENTS POP UP IN RESPONSE TO ISSUES EFFECTING COMMUNITIES OF COLOR, THERE ARE INCREDIBLE OPPORTUNITIES TO CHANGE HEARTS AND MINDS ON YOUTH CRIMINALIZATION OUR STRATEGIC COMMUNICATIONS WORK IS AN UNDERLYING SUPPORT FOR ALL OF OUR PARTNERS AND CAMPAIGN ACCOMPLISHMENTS LISTED ABOVE WE OPERATE TO BOTH ADD EXPERTISE AND SUPPORT TO OUR GRASSROOTS PARTNERS AND CAMPAIGN, WHILE LAYING THE GROUNDWORK FOR NARRATIVE SHIFTS AT THE NATIONAL LEVEL IN FEBRUARY 2018, DURING NBA ALLSTAR WEEKEND IN LOS ANGELES, ADVANCEMENT PROJECT TEAMED UP WITH BOARD MEMBER, ACTORIACTIVIST JESSE WILLIAMS TO FILM STORIES FROM WELL-KNOWN ENTERTAINERS, ATHLETES AND OTHER INFLUENCERS INCLUDING (ALICIA KEYS, DEBBIE ALLEN, JEMELLE HILL, 2 CHAINZ, AND OTHERS) ABOUT THEIR INTERACTIONS WITH POLICE, AS WELL AS THEIR APPROACH TO DISCUSSING POLICING WITH THEIR CHILDREN AND LOVED ONES THE VIDEO PROJECT AIMED TO USE NARRATIVE TO RAISE PUBLIC AWARENESS OF THE DAILY INDIGNITIES THAT PEOPLE OF COLOR FACE AT THE HANDS OF POLICE OVER FORTY INTERVIEWS WERE TAPED FOR THE POLICING US VIDEO UNDER THE DIRECTION OF JESSE WILLIAMS IN AUGUST 2018, WE HELD AN EVENT OPEN TO THE PUBLIC IN MARTHA'S VINEYARD ON THE TOPIC OF "RISING UP AGAINST RACISM, CRIMINALIZATION, AND BARRIERS TO THE BALLOT BOX" WITH PANELISTS MELISSA HARRIS PERRY, ADRIANNE SHROPSHIRE, AND OUR EXECUTIVE DIRECTOR JUDITH BROWNE DIANIS AT THAT EVENT, WE PREVIEWED THE VIDEO IN SEPTEMBER 2018, OUR EXECUTIVE DIRECTOR JUDITH BROWNE DIANIS AT THAT EVENT, WE PREVIEWED THE VIDEO IN SEPTEMBER 2018, OUR EXECUTIVE DIRECTOR AND THE STRUGGLE TO FIND THEIR VOICE IN MOMENTS OF PERSONAL TRAGEDY IN OCTOBER 2018, WE WERE ABLE TO HOLD 6 SCREENINGS OF THE FILM FOLLOWED BY PANEL DISC

Return Explanation
Reference

FORM 990, BOARD SECRETARY/TREASURER STEVE ENGLISH AND BOARD PRESIDENT MOLLY MUNGER ARE MARRIED SECTION A.

990 Schedule O, Supplemental Information

LINE 2

Return Explanation

LINE 11B

FORM 990, THE FORM 990 IS REVIEWED BY MEMBERS OF THE FINANCE COMMITTEE PRIOR TO FILING AND MAKING IT AVAILABLE TO THE FULL BOARD FOR REVIEW UPON REQUEST SECTION B.

Return Explanation
Reference

FORM 990, PART VI, SECTION B, INTEREST POLICY, DISCLOSE SUCH INTEREST AND DO NOT VOTE ON THE MATTER

INTEREST POLICY, DISCLOSE SUCH INTEREST AND DO NOT VOTE ON THE MATTER

INTEREST POLICY, DISCLOSE SUCH INTEREST AND DO NOT VOTE ON THE MATTER

990 Schedule O, Supplemental Information

OFFICER ARE ALSO REVIEWED FOR REASONABLENESS BY THE AUDIT COMMITTEE

Return

Reference	
FORM 990,	ANNUALLY, THE COMPENSATION COMMITTEE OF THE BOARD (CP) RECOMMENDS THE SALARIES OF THE EXECUTIVE
PART VI,	DIRECTORS TO THE AUDIT COMMITTEE THE CP CONSIDERS THE PERFORMANCE OF THOSE EXECUTIVES AS WELL
SECTION B,	AS THE MARKET RATES FOR SIMILAR POSITIONS OF COMPARABLE ORGANIZATIONS MARKET INFORMATION IS
LINE 15	OBTAINED FROM SURVEYS. THE COMPENSATION OF THE EXECUTIVE DIRECTORS AND THE CHIEF FINANCIAL.

Explanation

Return Explanation

LINE 19

FORM 990, PART VI, SECTION C.

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON WRITTEN REQUEST

Return Explanation
Reference

FORM 990, PART XII, LINE 2C