**Paid** 

**Preparer** 

**Use Only** 

							294	931	28028	03
. <b>∉</b> Forn	99		ırn of Organiz 501(c), 527, or 4947(a)		-				OMB No 15	
Depa	rtment of	he Treasury 1	not enter social secu o to <i>www.irs.gov/Fo</i>	-		-	-	an	Open to Inspec	
		2018 calendar year, or tax y		May 1		and ending		1111	, <b>20</b> 19	.1101.1
			on North Carolina Ci						er identification n	umber
	Address			itizeris ioi Protect	ing our 3	CIIOOIS			45-2294710	
	Name ch	** · · · · · · · · · · · · · · · · · ·	t (or P O. box if mail is no	t delivered to street a	uddress)	Room/suite	,	E Telepho	ne number	_
	Initial ret	go	•		•			•	919-679-1776	
$\equiv$			or province, country, and	d ZIP or foreign posta	l code				0.00.070	
$\equiv$	Amende		2				1.	G Gross re	eceipts \$	8,553,196
_		n pending F Name and address		chael L. Weisel			H(a) is this a oro	up return for	subordinates? Yes	
	•	· • • • • • • • • • • • • • • • • • • •	et, Suite 205, Raleigi	h, NC 27604-1455		+U			s included? Tes	
•	Tax-exe	pt status 501(c)(3)		) ◀ (insert no.) 🗌 4	947(a)(1) or	527			a list (see instructio	
J	Website	<b>&gt;</b>			T	· · · · · · · · · · · · · · · · · · ·	H(c) Group e	xemption	number ►	
K	Form of o	ganization. Corporation T	rust Association	Other ▶	LY	ear of formatio	n: 2011	M State	of legal domicile	NC
Pa	art I	Summary			<u> </u>					
	1	Bnefly describe the organ	ızatıon's mission or	most significan	activities	: The orga	nızatıon's n	nission i	s to promote th	е
Activities & Governance		common good and social w	elfare of North Caro	lına residents by	conductir	ıq research,	sponsoring	educati	onal activities a	nd
Tan.	_	events, and disseminating a								
9.6	2	Check this box ▶☐ if the	•	•		•		1	ıts net assets.	
Ğ	3	Number of voting member			-			3		2
88	4	Number of independent vo	_			-		4		1
V. E.	5	Total number of individual			-	e 2a) .		5		0
ct	о 7а	Total number of volunteer Total unrelated business r	•	• •				6 7a		0
1	b	Net unrelated business ta						7b		0
_		vet differated business ta	Addie income nom	7 0711 330-7, 1116	30	i	Prior Yea		Current Ye	<u> </u>
	8	Contributions and grants (	(Part VIII line 1h)			-	2	882,666		8,553,196
Revenue	9	Program service revenue (	•					002,000		0,555,150
eve	10	nvestment income (Part V		s 3, 4, and 7d)				0	. , , ,	0
Œ	11	Other revenue (Part VIII, c	• •					0	ı	
	12	Total revenue—add lines 8			•		2,	882,666	:	8,553,196
	13	Grants and similar amoun	ts paid (Part IX, col	umn (A), lines 1-	3)			453,636		2,010,045
	14	Benefits paid to or for mei	mbers (Part IX, colu	mn (A), line 4)		[		0		0
8	15	Salanes, other compensation	on, employee benefit	ts (Part IX, columi	n (A), lines	5–10)		290,227		587,830
SLIS	16a	Professional fundraising fe	• •			· ·  _		0		0
Expenses		Total fundraising expense				0				
	17	Other expenses (Part IX, c	• • •			· · ·		591,124		<u>6,485,735</u>
	18	Total expenses. Add lines						334,987		9,083,610
_	19	Revenue less expenses. S	subtract line 18 from	n line 12	· · ·			547,679		<u>(530,414)</u>
Net Assets or Fund Balances		F-1-11- (D1 V 1 4	<b>C</b> )			De l	ginning of Cun		End of Ye	
Pala Bala	20 21	Fotal assets (Part X, line 1	•			· ·		574,605		35,046
E E	22	Fotal liabilities (Part X, line Net assets or fund balance	-	from line 20		· · ·  -		10,270		1,125
	rt II	Signature Block	es. Sublidet iiile 21	nom me zo .	· · ·	· · I		564,335	l <del> </del>	33,921
Und	ier penal	les of perjury, I declare that I have and complete. Declaration of pre-							ny knowledge and	belief, it is
		Muhu	J. Her	$\mathcal{U}$				9/0	/2×20	
Sig	n	Signature of officer					Date	17		
Hei		MICHAEL L.  Type or print name and title		LEASURER 4	DIQ EC	TOR			·	
Doi	_	Print/Type preparer's name	Prepar	er's signature		Date	11	Chast: [	ZL 4 PTIN	

Firm's address ▶ May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions.

Michael J Schierbeek

Firm's name ▶

Cat. No 11282Y

9/2020

SEP 2 3 2020 Form 990 (2018)

PO1606041

✓ Yes 
☐ No



Kansas City, MO

Check / if self-employed

IFITT'S EINTENHAM MANIER

I (PROBERM US Bank - USB

7.20

	90 (2018)	mont of Ducasan Car	ino Accomplishments	<del></del>	Page
art		<del>-</del>	vice Accomplishments s a response or note to any line in thi	s Part III	
1		ribe the organization's n		<u> </u>	
	The organiza	ition's mission is to prom	ote the common good and social welfare	of North Carolina residents by con	ducting
		onsoring educational acti olina's public education s	ivities and events, and disseminating acc system.	urate and timely information on the	subject
2			significant program services during the		ne Ves No
3	Did the org	scribe these new service		n how it conducts, any progra	
		scribe these changes on			□ Tes ☑ No
4	Describe the expenses. S	e organization's program Section 501(c)(3) and 50	n service accomplishments for each or 1(c)(4) organizations are required to reany, for each program service reported.	port the amount of grants and a	
4a	(Code:	) (Expenses \$	4,760,176 including grants of \$	775,000) (Revenue \$	)
			n NC Citizens for Protecting our Schools I harmful potential amendments to the No		
	persuade the	in to vote against several	i narmiui potentiai amendments to the No	orth Carolina Constitution	
4b					
4b	(Code:	) (Expenses \$		0) (Revenue \$	)
4b	(Code:	) (Expenses \$	1,808,344 including grants of \$	0) (Revenue \$to Inform North Carolinians through	the NC Common
4b	(Code: NC Common Grounds pro	) (Expenses \$	1,808,344 including grants of \$	0) (Revenue \$to inform North Carolinians through	the NC Common
4b	(Code: NC Common Grounds pro	) (Expenses \$	1,808,344 including grants of \$	0) (Revenue \$to inform North Carolinians through	the NC Common
4b	(Code: NC Common Grounds pro	) (Expenses \$	1,808,344 including grants of \$	0) (Revenue \$to inform North Carolinians through	the NC Common
<b>4</b> b	(Code: NC Common Grounds pro	) (Expenses \$	1,808,344 including grants of \$	0) (Revenue \$to inform North Carolinians through	the NC Common
4b	(Code: NC Common Grounds pro	) (Expenses \$	1,808,344 including grants of \$	0) (Revenue \$to inform North Carolinians through	the NC Common
<b>4</b> b	(Code: NC Common Grounds pro	) (Expenses \$	1,808,344 including grants of \$	0) (Revenue \$to inform North Carolinians through	the NC Common
4b	(Code:	(Expenses \$) (Expenses \$)  Ground program NC Cit gram about the actions of d a clean environment. It	1,808,344 including grants of \$ izens for Protecting our Schools worked fithe state legislature on key issues of im communicated via digital advertising, management	0) (Revenue \$	the NC Common
	(Code:	(Expenses \$) (Expenses \$)  Ground program NC Cit gram about the actions of d a clean environment. It	1,808,344 including grants of \$	0) (Revenue \$	the NC Common
	(Code:	) (Expenses \$  Ground program NC City gram about the actions of d a clean environment. It	1,808,344 including grants of \$ izens for Protecting our Schools worked fithe state legislature on key issues of im communicated via digital advertising, management of \$ 1,106,698 including grants of \$	0) (Revenue \$	n the NC Common ality public
	(Code:	) (Expenses \$  Ground program NC City gram about the actions of d a clean environment. It  (Expenses \$  program (Aim Higher No	1,808,344 including grants of \$ izens for Protecting our Schools worked fithe state legislature on key issues of im communicated via digital advertising, management	0) (Revenue \$  to inform North Carolinians through portance such as the economy, qual and television advertising.  288,545) (Revenue \$  cation of the general public about t	h the NC Common ality public
	(Code:  (Code:  (Code:  (Code:  NC Education of adequately organizations	) (Expenses \$  Ground program NC City gram about the actions of diaclean environment. It  ) (Expenses \$  program (Aim Higher Now funding teacher compenses, including the Aim Higher Now funding the Aim Higher No	1,808,344 including grants of \$  izens for Protecting our Schools worked fithe state legislature on key issues of im communicated via digital advertising, material including grants of \$  1,106,698 including grants of \$  ow) The organization supported the education in the state's public education system.	0) (Revenue \$  to inform North Carolinians through portance such as the economy, quall and television advertising.  288,545) (Revenue \$  cation of the general public about to the public through proadcase through the public through broadcase.	h the NC Common ality public  he importance ants to like minded at media,
	(Code:  (Code:  (Code:  (Code:  NC Education of adequately organizations	) (Expenses \$  Ground program NC City gram about the actions of diaclean environment. It  ) (Expenses \$  program (Aim Higher Now funding teacher compenses, including the Aim Higher Now funding the Aim Higher No	1,808,344 including grants of \$  izens for Protecting our Schools worked fithe state legislature on key issues of im communicated via digital advertising, material including grants of \$  1,106,698 including grants of \$  Dw) The organization supported the eduncation in the state's public education systems.	0) (Revenue \$  to inform North Carolinians through portance such as the economy, quall and television advertising.  288,545) (Revenue \$  cation of the general public about to the public through proadcase through the public through broadcase.	h the NC Common ality public  he importance ants to like minded at media,
	(Code:  (Code:  (Code:  (Code:  NC Education of adequately organizations	) (Expenses \$  Ground program NC City gram about the actions of diaclean environment. It  ) (Expenses \$  program (Aim Higher Now funding teacher compenses, including the Aim Higher Now funding the Aim Higher No	1,808,344 including grants of \$  izens for Protecting our Schools worked fithe state legislature on key issues of im communicated via digital advertising, material including grants of \$  1,106,698 including grants of \$  ow) The organization supported the education in the state's public education system.	0) (Revenue \$  to inform North Carolinians through portance such as the economy, quall and television advertising.  288,545) (Revenue \$  cation of the general public about to the public through proadcase through the public through broadcase.	h the NC Common ality public  he importance ants to like minded at media,
4b	(Code:  (Code:  (Code:  (Code:  NC Education of adequately organizations	) (Expenses \$  Ground program NC City gram about the actions of diaclean environment. It  ) (Expenses \$  program (Aim Higher Now funding teacher compenses, including the Aim Higher Now funding the Aim Higher No	1,808,344 including grants of \$  izens for Protecting our Schools worked fithe state legislature on key issues of im communicated via digital advertising, material including grants of \$  1,106,698 including grants of \$  ow) The organization supported the education in the state's public education system.	0) (Revenue \$  to inform North Carolinians through portance such as the economy, quall and television advertising.  288,545) (Revenue \$  cation of the general public about to the public through proadcase through the public through broadcase.	h the NC Common ality public  he importance ants to like minded at media,

	of adequiately for	nding teacher companeation in the state	's public education system. This wa	e achieved through grante to	like minded
					·
	organizations, in	cluding the Aim Higher Now educationa	I project, for the education of the pu	blic through broadcast medi	a <i>,</i>
	dissemination of	mailers and direct contact with the pub	lic to urge citizens to contact their e	lected representatives	
					·•••
					•••
		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		******	
				••••••	
ld	Other program s	services (Describe in Schedule O.)			
đ			oue soo) (Revenue \$	0)	
	(Expenses \$	1,203,551 including grants of \$	946,500) (Revenue \$	0)	
d e	(Expenses \$	1,203,551 including grants of \$	946,500) (Revenue \$ 78,770		orm <b>990</b> (2018)

OC DID Page 3

		_	162	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	1	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		·	
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		1
•	•	- <del>-</del> -	<u> </u>	Ė
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_		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	✓	
ь	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	1	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓_
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		✓
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		✓
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<b>✓</b>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<b>✓</b>
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		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		<b>✓</b>
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		✓
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		✓
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		✓
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<b>√</b>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? N/A	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	1	
			000	

Part	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
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		✓
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . N/A	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		
đ	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . N/A	24d	ļ	<b>.</b>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<b>\</b>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			1
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		✓
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
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		✓
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		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓_
	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. N/A	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	1	
Part	<b>-</b> · · · · · · · · · · · · · · · · · · ·			
	Check if Schedule O contains a response or note to any line in this Part V	• •	· ·	
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a   10		Yes	No
b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		- 1	
-	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	<b>✓</b>	

Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
_	Establish south as of association as associated as Essay M.O. Tarasas Male of Marco and Total		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
ь	Statements, filed for the calendar year ending with or within the year covered by this return 2a 27  If at least one is reported on line 2a, did the organization file all required federal employment tax returns?.	2b	<u> </u>	<u> </u>
U	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	<b>V</b>	-
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O. N/A	3b		<del>-</del>
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,	-		<b>-</b>
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		1
b	If "Yes," enter the name of the foreign country: ►  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	 5a		<u></u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<b> </b>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	1	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	✓	
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	<u>.</u> 7a	<del></del>	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? N/A	7b		<del>                                     </del>
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
·	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year N/A 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		✓
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required N//			
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-CN/A	7h		Ĺ.,
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	_		ļ <sup>J</sup>
	sponsoring organization have excess business holdings at any time during the year? N/A  Sponsoring organizations maintaining donor advised funds. N/A	8		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter: N/A			
	Initiation fees and capital contributions included on Part VIII, line 12	-		İ
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter: N/A		-	
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources		- 1	. 1
	against amounts due or received from them.)			لــــا
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?N/A If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	123		
	Section 501(c)(29) qualified nonprofit health insurance issuers. N/A		ľ	
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			1
	Enter the amount of reserves the organization is required to maintain by the states in which		- 1	
	the organization is licensed to issue qualified health plans			, ,
C	Enter the amount of reserves on hand	l		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<b>✓</b>
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O N/A	14b	]	
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or		- 1	
	excess parachute payment(s) during the year?	15		<b>✓</b>
	If "Yes," see instructions and file Form 4720, Schedule N.			لب
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		<b>√</b>
	ii res, complete i omi 4720, sonedule o.	Form	990	(2018)
				/

Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			
C4	Check if Schedule O contains a response or note to any line in this Part VI	<u>···</u>		
Secu	on A. Governing Body and Management		W	
10	Enter the number of voting members of the governing body at the end of the tax year	-	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 2  If there are material differences in voting rights among members of the governing body, or			1
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			
ь	Enter the number of voting members included in line 1a, above, who are independent . 1b 1			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			-
	any other officer, director, trustee, or key employee?	2		<b>✓</b>
3	Did the organization delegate control over management duties customanly performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<b>✓</b>
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		<b>\</b>
6	Did the organization have members or stockholders?	6		✓
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		1
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7ь		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	7	
b	Each committee with authority to act on behalf of the governing body?	8b	7	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	[	✓
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co	ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓_
b	If "Yes," did the organization have written policies, and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? N/A	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	✓	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	✓	
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	1	
C	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	Did the organization have a written whistleblower policy?	13	<b>✓</b>	
14	Did the organization have a written document retention and destruction policy?	14	1	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	<u> </u>	
b	Other officers or key employees of the organization	15b		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			$\neg$
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		$\overline{\downarrow}$
<b>J</b>	with a taxable entity during the year?	iva		
b	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			2 C
	organization's exempt status with respect to such arrangements?	16b		
Section	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ North Carolina			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-1	(Sec	tion 5	01(c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  Own website  Another's website  Upon request  Other (explain in Schedule O)	•		
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interior financial statements available to the public during the tax year.	∍rest p	oolicy	, and
20	State the name, address, and telephone number of the person who possesses the organization's books and recommendation of the person who possesses the organization of the person of the per	cords	<b>&gt;</b>	
	Michael L. Weisel, 1101 Haynes Street, Suite 205, Raleigh, NC 27604-1455			

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Form **990** (2018)

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

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

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

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

☐ Check this box if neither the organization no	r any relate	d org	anız			ompe	nsa	ted any currer	t officer, directo	r, or trustee.
(A) Name and Title	(B) Average hours per week (list any	Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D)  Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other				
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) J Laurenz Board Director	11	1						0	0	0
(2) Michael L Weisel Board Director and Secretary/Treasurer	11	1	1					0	0	0
(3)										
(4)				ļ						
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										-,
(14)									_	

Part	Section A. Officers, Directors, Trus	ees, Key E	mpio	yee	s, a	na r	ugne	ST C	ompensated E	mployees	(contin	ued)		
	(A) Name and title	(B) Average hours per	box,	unles	Pos neck is pe	rson	e than o is both or/trus	n an	(D) Reportable compensation	(E) Reportal compensatio	n from	Esti am	(F) imated ount of	
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	relatec organizati (W-2/1099-l	ions	comp fro orga and	other ensation of the nization related nizations	1
(15)					-									
(16)											_			
(17)														
(18)				-								-		
(19)											$\rightarrow$			-
(20)								-			$\dashv$			
(21)								-			$\dashv$			
(22)														
(23)								_				<del></del>		
(23)														
(24)														
(25)														
1b	Sub-total		• -	•	•			<b>_</b>	0		0			0
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)	VII, Section				 		<b>▶</b>			0			
2	Total number of individuals (including but reportable compensation from the organi	not limited			list	ed a	above	e) w	ho received mi	ore than \$1		O of		
		•							0				Yes	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete 3							emp	loyee, or high	est compe	ensated	d 3		<u></u>
4	For any individual listed on line 1a, is the organization and related organizations	sum of rep	oortal	ole d	com	per	satio					e -		. !
	individual	• • • •						٠.				4		7
5	Did any person listed on line 1a receive of for services rendered to the organization?									ation or inc	dividua	5		<b>→</b>
	on B. Independent Contractors													
1	Complete this table for your five highest compensation from the organization. Repyear.	•		•								-		ıx
	(A) Name and business add	ress							(B) Description of se	ervices		(C) Compens	ation	
2								2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 0						

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Par	VIII	Check if Schedule O contains a response or note to	o any line in this	Part VIII		Г"
	-	Oncok ii Genedale o contains a response of note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns 1a 0				
ar a	ь	Membership dues 1b 0	1	İ		
s, C	С	Fundraising events 1c 0				
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organizations 1d 0		ĺ		ľ
έĒ	е	Government grants (contributions) 1e 0				
후후	f	All other contributions, gifts, grants,				
혈美	}	and similar amounts not included above 1f 8,549,321				
<u>a</u> =	g	Noncash contributions included in lines 1a–1f: \$ 3,875				
<u>2</u> g	h	<b>Total.</b> Add lines 1a–1f	8,553,196			
Program Service Revenue		Business Code				
Xe.	2a				•	
æ	Ь					
Š	С					
Ŗ	d					
Ē	е					
ğ	f	All other program service revenue .		<u></u>		
<u>~</u>	9	<b>Total.</b> Add lines 2a–2f	<u> </u>			
	3	Investment income (including dividends, interest,				
		and other similar amounts)	0	0	0	
	4	Income from investment of tax-exempt bond proceeds ▶		0	0	
	5	Royalties	0		0	
		(i) Real (ii) Personal	1	ļ		-
	6a	Gross rents	ł	Ī		
	Ь	Less: rental expenses				
	C	Rental income or (loss)		<u>-</u>		
	d	Net rental income or (loss)	0	0	0	
	7a	Gross amount from sales of (i) Secunties (ii) Other				
		assets other than inventory	1			
	b	Less: cost or other basis		-		
		and sales expenses .		1		
	C	Gain or (loss)				
	d	Net gain or (loss)	0	0	0	(
venue	8a	Gross income from fundraising events (not including \$				
Other Reve		of contributions reported on line 1c). See Part IV, line 18				
ខី		Less: direct expenses b				
		Net income or (loss) from fundraising events .  Gross income from gaming activities. See Part IV, line 19	0		0	
		Less: direct expenses b  Net income or (loss) from gaming activities ▶	0	0	0	
		Gross sales of inventory, less returns and allowances a	o o	U U	U	
		Less: cost of goods sold b				
	С	Net income or (loss) from sales of inventory	0	0	0	
		Miscellaneous Revenue Business Code				
	11a					
	b					
	С					
	d	All other revenue				
	е	<b>Total.</b> Add lines 11a–11d ▶	0			
	12	Total revenue. See instructions	8 553 196	ol	٥	l o

Form 990 (2018) Page 10 Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (C) Management and general expenses (D) Fundraising Do not include amounts reported on lines 6b, 7b, (A) Total expenses Program service expenses 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . 2,010,045 2,010,045 2 Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . . 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . Benefits paid to or for members . . . . Compensation of current officers, directors, trustees, and key employees . . . . . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . 0 Other salaries and wages 462,991 462,991 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 0 9 Other employee benefits . . . . . . . 64,417 64,417 0 0 10 Payroll taxes . . . . . . . . 43,681 43,681 0 Fees for services (non-employees): Management 182,020 62,620 119,400 0 73,151 34,393 Legal . . . . . . 0 38,758 Accounting C 25,948 25,948 0 Lobbying . . . . . . . 0 0 Professional fundraising services. See Part IV, line 17 e f 0 g 0 12 0 13 <u>0</u> 14 0 15 <u>0</u> 16 0 17 0 18 19 20 21 22 23 24

Professional fundraising services. See Part IV, line 17		<u> </u>		
Investment management fees	0	0	0	0
Other (If line 11g amount exceeds 10% of line 25, column				
(A) amount, list line 11g expenses on Schedule O)	16,741	16,741	o	0
Advertising and promotion	6,010,273	6,010,273	0	0
Office expenses	18,093	16,588	1,505	0
Information technology	3,909	2,667	1,242	0
Royalties	0	o	0	0
Occupancy	72,336	72,336	0	0
Travel	26,108	26,108	0	0
Payments of travel or entertainment expenses				
for any federal, state, or local public officials	o	o	ol	0
Conferences, conventions, and meetings .	1,118	1,118	0	0
Interest	0	0	0	0
Payments to affiliates	0	0	0	0
Depreciation, depletion, and amortization .	6,125	o	6,125	0
Insurance	8,263	O'	8,263	0
Other expenses. Itemize expenses not covered				
above (List miscellaneous expenses in line 24e. If				j
line 24e amount exceeds 10% of line 25, column				
(A) amount, list line 24e expenses on Schedule O.)				!
Research	32,471	32,471	o	0
Books, Subscriptions, Reference	25,920	22,320	3,600	0
	O	0	o	0
	0	o	0	_0
All other expenses	0	0	0	0
Total functional expenses. Add lines 1 through 24e	9,083,610	8,878,769	204,841	0
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)				
	-			Form <b>990</b> (2018)

b C d e

33

34

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X . . . . . . . (A) (B) End of year Beginning of year 1 Cash—non-interest-bearing . . . . . . . . . 1 557,745 27.809 2 2 Savings and temporary cash investments . . . . 0 0 3 3 0 0 4 4 ol 0 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 n 0 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L . . . . . . . . 6 Assets 0 0 Notes and loans receivable, net . . . . . . 7 o 0 Inventories for sale or use . . . . . . . . 8 8 o 0 9 Prepaid expenses and deferred charges . . . 9 ol n 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 31,624 10b b Less: accumulated depreciation . . . . 8.747 10c 29,002 2622 11 Investments—publicly traded securities 11 0 0 12 Investments—other securities. See Part IV, line 11 . . . . 12 ol 0 13 investments—program-related. See Part IV. line 11... 13 o 0 14 0 14 0 15 15 8,113 4,615 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 574,605 35,046 17 17 10.270 1,125 18 Grants payable . . . . . . . . . . . . . . . . . . 18 ol 0 19 19 0 0 20 20 0 0 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 0 0 Loans and other payables to current and former officers, directors, 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . . . . 22 0 23 Secured mortgages and notes payable to unrelated third parties . . . 23 0 0 24 Unsecured notes and loans payable to unrelated third parties . . . 24 ol 0 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 0 26 Total liabilities. Add lines 17 through 25 10,270 26 <u>1,125</u> Organizations that follow SFAS 117 (ASC 958), check here ▶ 📝 and Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets . . . . . . . . . . . . . 27 564,335 33.921 28 28 0 0 Fund 29 29 0 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34. ò Net Assets 30 Capital stock or trust principal, or current funds . . . . . . 30 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 32 Retained earnings, endowment, accumulated income, or other funds . 32

Total liabilities and net assets/fund balances .

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33,921

35.046

33

34

564,335

574.605

Part	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>		. <u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)		8,5	53,196
2	Total expenses (must equal Part IX, column (A), line 25)		9,0	<u>83,610</u>
3	Revenue less expenses. Subtract line 2 from line 1		(53	0,414)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4		5	54,33 <u>5</u>
5	Net unrealized gains (losses) on investments			0
6	Donated services and use of facilities			0
7	Investment expenses			0
8	Prior period adjustments			0
9	Other changes in net assets or fund balances (explain in Schedule O)			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))		;	33,92 <u>1</u>
Part	XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII	· · ·		ᆜ
			Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		ļ	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in	1	1	
_	Schedule O.	<u> </u>	<del> </del>	اسيسا
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		✓.
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		-	
	reviewed on a separate basis, consolidated basis, or both:	ļ	}	
_	Separate basis Consolidated basis Both consolidated and separate basis			لبدا
D	Were the organization's financial statements audited by an independent accountant?	2b	-	<b>/</b>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			
	separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	A 2c	1	}
	of the audit, review, or compilation of its financial statements and selection of an independent accountant? N	A 20	<del> </del>	├
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		1	
0-				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	-	,
	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	Sa		<u> </u>
b	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. N/	A 3b	1	
	required addit of addits, explain with in deficulte of and describe any steps taxen to undergo such addits. 19/		- 000	(2018)

### SCHEDULE C (Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

OMB No 1545-0047 2018

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

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

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

Open to Public Inspection

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

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

	see separate instructions), t				
	ection 501(c)(4), (5), or (6) org	anizations: Complete Part III.		1	4.64
	of organization			Employer idei	ntification number
	Carolina Citizens for Protec		1		45-2294710
Part	<del></del>	e organization is exempt und		·	_ <del></del>
1	•	of the organization's direct and in	ndirect political ca	ampaign activities in Part	IV. (see instructions fo
•	definition of "political car	, ,		_ 0	,
2 3		ty expenditures (see instructions)			· · · · · · · · · · · · · · · · · · ·
		ical campaign activities (see instru			0
	· · · · · · · · · · · · · · · · · · ·	e organization is exempt und			
1 2	•	excise tax incurred by the organize excise tax incurred by organization			) 
3	_	ed a section 4955 tax, did it file Fo	•		Yes No
3 4a	Was a correction made?		-		Yes No
b	If "Yes," describe in Part				[] ies [] ito
Part		e organization is exempt und	ler section 501/	c) excent section 501	(c)(3)
1	· · · · · · · · · · · · · · · · ·	tly expended by the filing organi		* *	(0)(0).
•				> \$ \$	(
2		filing organization's funds contri			
_		vities	-		835.000
3	•	expenditures. Add lines 1 and 2			
	•			· .	835,000
4		n file Form 1120-POL for this year			. Yes 🗸 No
5	organization made paym the amount of political co	ses and employer identification nu ents. For each organization listed, ontributions received that were pro I fund or a political action committe	enter the amount omptly and directly	paid from the filing organic delivered to a separate p	zation's funds. Also enter olitical organization, such
	(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
(4) To	gether Wisconsin Political				
	nd	Milwuakee, Wi	82-4738777	475,000	0
(2)		PO Box 255			
No.	orth Carolina Families First	Raleigh, NC 27602	45-3626206	360,000	0
(3)			-		
(4)			-		
(5)			-		
(6)					

٠	Schedule C (Form 990 or 990-EZ) 2018		

	_
_	•
Page	•

Pa	rt II-A	Complete if the organizati section 501(h)).	on is exempt	under section 5	01(c)(3) and file	d Form 5768 (ele	ection under
A	Check ▶	If the filing organization belo	ngs to an affilia	ted group (and list	ın Part IV each af	filiated group memb	er's name,
		address, EIN, expenses, and			•		
В	Check ▶	if the filing organization chec			rovisions apply.		
			bying Expendi			(a) Filing	(b) Affiliated
		(The term "expenditures" r		•	<u> </u>	organization's totals	group totals
1		obbying expenditures to influence	•				
		obbying expenditures to influence	_	• •			
		obbying expenditures (add lines	•				<del></del>
		exempt purpose expenditures .					
		exempt purpose expenditures (ac					
		ing nontaxable amount. Enter	the amount	from the followin	g table in both	1	
	colum	<del>,</del>	T ==		.:		-
		mount on line 1e, column (a) or (b) i		g nontaxable amour	nt is:	1	
		er \$500,000	<del></del>	mount on line 1e.			
		00,000 but not over \$1,000,000		is 15% of the excess		1	<u> </u>
	1	,000,000 but not over \$1,500,000	<del></del>	is 10% of the excess		-	
		,500,000 but not over \$17,000,000		is 5% of the excess of	over \$1,500,000.		
		7,000,000	\$1,000,000.			<del> </del>	
	_	oots nontaxable amount (enter 2 act line 1g from line 1a. If zero or	•				
		ct line 1g from line 1a. If zero or l	•			<del></del>	
			•			- FIR Fr. 4700	
		e is an amount other than zerong section 4911 tax for this year	_	·	_	F	<b>Yes</b> □ No
	Торога	<del></del>		Period Under Sec			
	(Som	e organizations that made a so	ection 501(h) e		re to complete al	of the five column	s below.
	<del></del>						· · · · · · · · · · · · · · · · · · ·
		Lobbyin	g Expenditure	s During 4-Year A	veraging Period		
	Cale	endar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) Total
2	a Lobbyi	ng nontaxable amount					
		ng ceiling amount of line 2a, column (e))					
	c Total id	obbying expenditures					
	d Grassr	oots nontaxable amount					
		oots ceiling amount of line 2d, column (e))	,		-		
	f Grassr	oots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2018

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT file (election under section 501(h)).	d I	Forn	1 576	3	rage
For	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(a	)		(b)	
	ription of the lobbying activity.	es	No	4	lmour	nt
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				•	
a	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?	$\dashv$				
d	Mailings to members, legislators, or the public?	4				
e	Publications, or published or broadcast statements?	4				
T	Grants to other organizations for lobbying purposes?	4				
9	Direct contact with legislators, their staffs, government officials, or a legislative body?	-				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?	$\dashv$		-		
i	Total. Add lines 1c through 1i	$\dashv$				
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	+				
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .	-				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c)(5) 501(c)(6).	, 0	r se	ction		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the price			3	I	
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c)(5) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (answered "Yes."	, o b)	r se Part	ction III-A,	line	3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	i   _				
а	Current year	L	2a			
b	Carryover from last year	L	2b			
C	Total	L	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	ŀ	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying					
5	and political expenditure next year?	ŀ	4			
	Taxable amount of lobbying and political expenditures (see instructions)		5			
2 (see	Supplemental Information  le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group I instructions); and Part II-B, line 1. Also, complete this part for any additional information.  Carolina Citizens for Protecting our Schools conducted public issue and policy polling on various educational				ines 1	and
disser	ninated such information to the general public. The entity also contributed to organizations that promoted the	se	issue	<u>s</u>		
					<b>.</b>	

	m 990 or 990-E2) 2018	Page 4
Part IV	Supplemental Information (continued)	
	***************************************	
	***************************************	
	***************************************	
	***************************************	
	***************************************	
		·

# . SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

North	Carolina Citizens for Protecting our Schools		45-2294710
Pa			
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 6.	·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year) .		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor	advisors in writing that the assets h	eld in donor advised
	funds are the organization's property, subject to the	ne organization's exclusive legal contro	ol?
6	Did the organization inform all grantees, donors, a	and donor advisors in writing that grain	nt funds can be used
	only for charitable purposes and not for the bene		
Par	Conservation Easements.		
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the		-
•	Preservation of land for public use (e.g., recrea		f a historically important land area
	Protection of natural habitat		f a certified historic structure
	Preservation of open space	Li Fleseivation o	a certified flistoric structure
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation contribution	on in the form of a conservation
_	easement on the last day of the tax year.	eld a qualmed conservation continuation	Held at the End of the Tax Yea
_	· ·		<u> </u>
a			
b	Total acreage restricted by conservation easement		
C	Number of conservation easements on a certified h		
d	Number of conservation easements included in		l i
_	historic structure listed in the National Register .		
3	Number of conservation easements modified, trans	sferred, released, extinguished, or terr	ninated by the organization during the
	tax year ▶		
4	Number of states where property subject to conse		
5	Does the organization have a written policy reg	,	· · · ·
	violations, and enforcement of the conservation ea		
6	Staff and volunteer hours devoted to monitoring, inspec	cting, handling of violations, and enforcing	g conservation easements during the year
	<b></b>		
7	Amount of expenses incurred in monitoring, inspecting	ng, handling of violations, and enforcing	conservation easements during the year
	<b>&gt;</b> \$		
8	Does each conservation easement reported on line	- · ·	section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		· · · · · · · · · · · · · · · · · · ·
9	In Part XIII, describe how the organization reports of	conservation easements in its revenue	and expense statement, and
	balance sheet, and include, if applicable, the text of		ancial statements that describes the
	organization's accounting for conservation easeme	ents.	
Par	III Organizations Maintaining Collections	s of Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered '	"Yes" on Form 990, Part IV, line 8.	
13	If the organization elected, as permitted under SF	AS 116 (ASC 958), not to report in its	revenue statement and balance shee
	works of art, historical treasures, or other similar	assets held for public exhibition, ed	lucation, or research in furtherance of
	public service, provide, in Part XIII, the text of the fe	footnote to its financial statements that	t describes these items.
b	If the organization elected, as permitted under S	FAS 116 (ASC 958), to report in its	revenue statement and balance shee
	works of art, historical treasures, or other similar		
	public service, provide the following amounts relati	ing to these items:	·
	(i) Revenue included on Form 990, Part VIII, line 1		<b>▶ \$</b>
	(ii) Assets included in Form 990, Part X		<b>▶</b> \$
2	If the organization received or held works of art,		
_	following amounts required to be reported under S		
а	Revenue included on Form 990, Part VIII, line 1 .		
	Assets included in Form 990. Part X		• • • • • • • • • • • • • • • • • • •

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Scho	dute	n i	Form	ggn)	2018	

ı	Page	2

Par	Organizations Maintaining								
3	Using the organization's acquisition, collection items (check all that apply):		ther recor	ds, chec	k any of th	e follov	wing that are a s	gnificant	use of its
а	☐ Public exhibition		đ	☐ Loan	or exchang	e prog	rams		
b	☐ Scholarly research		е	☐ Other	r				
C	☐ Preservation for future generations	S							
4	Provide a description of the organiza XIII.	tion's collections	and expla	in how t	hey further	the org	ganization's exem	npt purpos	e in Part
5	During the year, did the organization assets to be sold to raise funds rather								s □ No
Par	IV Escrow and Custodial Arra	angements.			•				
	Complete if the organization 990, Part X, line 21.				·	·	•		Form
1a	included on Form 990, Part X?								. □ No
b	If "Yes," explain the arrangement in P	art XIII and comple	ete the fo	llowing ta	able:		Ar	nount	
C	Beginning balance					10	;		
đ	Additions during the year					10	i i		
е	Distributions during the year					1e	,		
f	Ending balance					11	<del></del>		
2a	Did the organization include an amount	nt on Form 990, P	art X. line	21, for e	scrow or cu	ıstodia	account liability	?   Yes	□ No
b	if "Yes," explain the arrangement in P								
	V Endowment Funds.			•					
	Complete if the organization	answered "Yes	" on Fon	n 990, F	Part IV, line	10.			
	3	(a) Current year	(b) Pno	r year	(c) Two years	s back	(d) Three years back	(e) Four ye	ears back
1a	Beginning of year balance								
b	Contributions								
C	Net investment earnings, gains, and losses								
đ	Grants or scholarships						<del>-</del>	1	
е	Other expenditures for facilities and								
	programs					ı		1	
f	Administrative expenses	***		-				1	<del></del>
g	End of year balance							f	
2	Provide the estimated percentage of t	he current vear en	d balance	e (line 1a	column (a)	) held a	as.	<u> </u>	
а	Board designated or quasi-endowmer		%	- (	, (,	,			
b	Permanent endowment ▶		' '						
	Temporarily restricted endowment ▶	%							
_	The percentages on lines 2a, 2b, and		00%						
3a	Are there endowment funds not in the			ation tha	t are held a	and ad	ministered for the	9	
	organization by:	•	3						es No
	(i) unrelated organizations							3a(i)	<del></del>
	(ii) related organizations							3a(ii)	+-
b	If "Yes" on line 3a(ii), are the related or							3b	
4	Describe in Part XIII the intended uses							<u> </u>	
Part				<u> </u>			·		
	Complete if the organization		" on For	n 990 F	Part IV line	11a s	See Form 990 I	Part X lin	e 10
	Description of property	(a) Cost or ot			r other basis		Accumulated	(d) Book	
	2 ccc. property	(investme			her)		preciation	(a) Dook (	
1a	Land		0		0				0
b	Buildings		0		0		0		0
C	Leasehold improvements		0		o		o		0
d	Equipment		o		31,624		29,002		2,622
e	Other		0		01,024		0		0
Total.	Add lines 1a through 1e. (Column (d) m	nust equal Form 99		column		c.)			2.622

(6) Beacryption of summer of security (1) Financial derivatives (2) Closely-held equity interests (3) Other (4) (3) (3) (4) (6) (6) (7) (6) (7) (7) (7) (8) (8) (9) (9) (9) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1		Complete if the organization				
		(a) Description of security or cat (including name of security		(b) Book value		
(3) Other (A) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	(1) Financial	derivatives				
(A) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	(2) Closely-ł	neld equity interests				
(G) (G) (G) (G) (G) (G) (G) (G) (G) (G)	(3) Other					
(G) (G) (G) (G) (G) (G) (G) (G) (G) (G)	(A)					
(6) (7) (8) (8) (9) (9) Total, Column (b) must equal Form 999, Part X, cot. (B) line 12) ▶  Part VIII Investments — Program Related.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, cot. (B) Membra of investment (b) Book value (c) Membra of valuation Cost or end-of-year market value (t)  (9) (9) (9) (9) (9) (9) (9) (10) (11) (12) (13) (14) (15) (15) (16) (17) (18) (19) (19) (19) (10) (11) (11) (11) (12) (13) (14) (15) (15) (16) (17) (18) (19) (10) (10) (11) (11) (12) (13) (14) (15) (15) (16) (17) (18) (19) (10) (10) (10) (11) (11) (12) (13) (14) (15) (15) (16) (17) (18) (19) (10) (10) (11) (11) (12) (13) (14) (15) (15) (16) (17) (18) (19) (10) (10) (11) (11) (12) (13) (14) (15) (15) (16) (17) (18) (19) (10) (10) (10) (11) (11) (12) (13) (14) (15) (15) (15) (16) (17) (18) (19) (19) (10) (10) (10) (10) (11) (11) (12) (13) (14) (15) (15) (15) (16) (17) (18) (19) (19) (10) (10) (10) (10) (10) (10) (11) (11	(B)					
(G) (G) (G) (G) (G) (G) (G) (G) (G) (G)	(C)					
(ic) (ic) (ic) (ic) (id) (id) (id) (id) (id) (id) (id) (id	(D)		***************************************			
(G) (H) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F	(E)	······································				
(G) (H) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F	(F)		***************************************	*	· · · · · ·	<del></del>
Total, (Column (i) must equal Form 990, Part X, cot. (ii) line 12)			***************************************			<del></del>
Investments - Program Related.   Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, (a) Description of investment   (b) Book value   (c) Method of valuation Cost or end-of-year market value   (d)   (e)	(H)				·	
Investments — Program Related.   Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, (a) Description of investment   (b) Book value   (c) Method of valuation Cost or end-of-year market value   (d)   (e)		b) must equal Form 990, Part X, col. (B) line 12.	<b>&gt;</b>	*		
Complete if the organization answered "Yes" on Form 990, Part IV, tine 11c. See Form 990, Part X, (a) Description of investment   (b) Book value   (c) Method of valuation* Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c) Cost or end-of-year market value   (c)						
(a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market val (d) (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 answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, col. (B) line 15.)				rm 990 Part IV line	11c See Form	990 Part X line 13
(1)   Cost or end-of-year market val						
(2) (3) (4) (5) (6) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (9) (10) (10) (10) (10) (11) (10) (11) (11		(a) Description of investmen		(b) Book value		
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(6) (5) (6) (7) (8) (9) (9) (10tal. (Column (b) must equal Form 990, Part X, col. (B) line 13) ▶  Part IX  Other Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, (b) Book (1) AHN Field offices deposits (2) (3) (4) (5) (6) (7) (8) (9)  Part X  Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, col. (B) line 15.)  Part X  Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, col. (B) Book value (I) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  Form (b) Book value (I) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶						
(5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13) ▶  Part IX Other Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, (b) Book v(1) AHN Field offices deposits (2) (3) (4) (5) (6) (7) (8) (9)  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Piline 25.  1. (a) Description of hability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (9) (9) (10) (10) (10) (10) (10) (10) (10) (10		<del>-</del>				
(6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13) ▶  Part IX Other Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, (b) Book x (1) AHN Field offices deposits (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 answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, P line 25.  1. (a) Description (b) Book value (1) Book value (1) Form 990, P line 25. (2) (3) (4) (5) (6) (7) (8) (9) (9) (9) (9) (9) (1) Getail income taxes (2) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9		<del></del>	·	<del> </del>		
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Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 11e or 11f. See Form 990, P		· · · · · · · · · · · · · · · · · · ·				
Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part IV, line 25.  1. (a) Description of liability (b) Book value  (1) Federal income taxes  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶			(, col. (B) line 15.)		<u> ▶</u>	4,6
Line 25.   1.   (a) Description of liability   (b) Book value   (1) Federal income taxes   (2)   (3)   (4)   (5)   (6)   (7)   (8)   (9)   (7)   (8)   (9)   (7)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)   (10)	Part X					
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(1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶		line 25.				
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(8) (9)   otal. (Column (b) must equal Form 990, Part X, col. (B) line 25.} ▶						
(9)  fotal. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶			· <del> </del>			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶				<del></del>		
		n must equal Form 990 Part Y and (P) has 25 )				
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Part	ΧI	Complete if the organization answered "Yes" on Form 99		•	Return	<b>)-</b>
1	Total	revenue, gains, and other support per audited financial statemer			1	
2		unts included on line 1 but not on Form 990, Part VIII, line 12:			┝╧┼	
a		inrealized gains (losses) on investments	.   2a		]	
b		ted services and use of facilities			1	
c		veries of prior year grants			1	
ď		r (Describe in Part XIII.)	. 2d		1	
e		ines 2a through 2d			2e	
3		ract line 2e from line 1			3	
4		unts included on Form 990, Part VIII, line 12, but not on line 1:	iiii		<u> </u>	
а		tment expenses not included on Form 990, Part VIII, line 7b .	. 4a			
b		r (Describe in Part XIII.)			1	
C		ines 4a and 4b			4c	
5		revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, II			5	<del></del>
Part		Reconciliation of Expenses per Audited Financial Stat			r Retu	m.
		Complete if the organization answered "Yes" on Form 99		•		
1	Total	expenses and losses per audited financial statements			1	
2		unts included on line 1 but not on Form 990, Part IX, line 25:				
а		ted services and use of facilities	.   2a			
b	Prior	year adjustments	. 2b		1	
C		losses	. 2c		1	
d		(Describe in Part XIII.)	. 2d		1 1	
е		ines 2a through 2d			2e	
3		ract line 2e from line 1		<i>.</i> .	3	
4	Amou	ants included on Form 990, Part IX, line 25, but not on line 1:				
а	Inves	tment expenses not included on Form 990, Part VIII, line 7b .	. 4a			
b	Other	(Describe in Part XIII.)	. 4b		ll	
C	Add i	ines <b>4a</b> and <b>4b</b>			4c	
5	Total	expenses. Add lines 3 and 4c. (This must equal Form 990, Part I,	line 18.) .	. <i></i>	5	
		descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a es 2d and 4b; and Part XII, lines 2d and 4b. Also complete this p				
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						<b></b>
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Schedule D (For	m 990) 2018	Page 5
Part XIII	Supplemental Information (continued) .	
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SCHEDULEI (Form 990) Department of the Treasury

Name of the organization Internal Revenue Service

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

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

▶ Attach to Form 990

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

Open to Public

OMB No. 1545-0047

Fund NC Constitutional Referendum education 2018 Inspection

Employer identification number

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, ° □ Fund education issues Fund education issues Fund education issues Fund education issues Fund education issues Fund education issues Fund education issues Fund education issues (h) Purpose of grant or assistance o ✓ Yes 45-2294710 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and • • • • • • • • • • • (g) Description of noncash assistance Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. ٤ A/N ٤ ۶ ¥ ٩ ٧X ¥ (e) Amount of non- (f) Method of valuation cash assistance other) Ϋ́ Α× Ϋ́ ξ ٨ ž ž ۲ Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 475,000 35,000 35,000 35,000 6,500 775,000 360,000 288,545 (d) Amount of cash grant Enter total number of other organizations listed in the line 1 table (c) IRC section (if applicable) the selection criteria used to award the grants or assistance? General Information on Grants and Assistance 501(c)4 501(c)4 501(c)4 501(c)4 501(c)4 501(c)4 527 527 26-4568349 81-3459495 83-1846942 82-4738777 45-3626206 45-2862217 82-4042237 56-2271150 (P) EIN North Carolina Citizens for Protecting our Schools 732 9th Street,#505, Durham,NC27705 Ave NW, #600, Washington, DC 20036 1821 Green Street, Durham, NC 27701 (4) America Votes-1155Connecticu (6) Progress North Carolina Action (7) Sheriffs for Trustina Communitites 1 (a) Name and address of organization (1) Stop Deceptive Amendments (3) North Carolina Families First (2) Together Wisconsin PO Box 41306, Raleigh, NC 27629 PO Box 1323, Raleigh, NC 27602 PO Box 825, Raleigh, NC 27602 PO Box 255, Raleigh, NC 27602 or government (8) Democracy NC (5) Lead NC Milwaukee, WI Part I Part II <u>2</u> N

Schedule I (Form 990) (2018)

Cat. No. 50055P

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

North Carolina Citizens for Protecting our Schools monitors activities of grants to other organizations by receiving and reviewing written progress reports, receiving and reviewing financial (f) Description of noncash assistance Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. reports, meeting with the organization, discussing their program activities and verifying that intended activities were completed (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of noncash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Part III Part IV က S Θ

Schedule I (Form 990) (2018)

## SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2018

Open to Public Inspection

**Employer identification number** 

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

North Carolina Citizens for Protecting our Schools	45-2294710
Part III - Line 2 - New program services - North Carolina Citizens for Protecting our Schools intiated two	o new program service areas of in
support of educating the public on the NC constitutional referendum through the Stop Dec	eptive Amendments program and
educating the public on the actions of the legislature in the ares of the economy, public ec	ducation and environment through
the NC Common Ground program	
Part VI - Line 11 - Describe the process used by the organization to review the form 990. The form 990	s prepared after an internal review
of the organization's books and records for the year. The draft form is then sent to the organization	anızatıon's officers for their
comments and suggested changes. After completion of that review, the revised form is ser	nt to the Board for review
Questions ,comments and changes, if any, are incorporated after discussion with the Boar	d and the preparer to finalize
and file the return	
Part VI - Line 19 - Describe how the organization makes its governing documents, conflict of interest production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the production of the	olicy, and financial statements
available to the public. The organizations governing documents are available online through	gh the State of North Carolina's
online access to corporate records. In addition, the organization's governing documents, c	onflict of interest policy and
financial statements are available upon request by submitting a written request to the orga	nization's address.
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Schedule U (Form 990 or 990-EZ) (2018)	Pa	ige 2
Name of the organization	Employer identification number	
North Carolina Citizens for Protecting our Schools	45-2294710	
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