

Department of the Treasury  
Internal Revenue Service

## 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

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

<b>A</b> For the 2020 calendar year, or tax year beginning		, 2020, and ending	
<b>B</b> Check if applicable		<b>C</b>	
<input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		<b>F</b> Name and address of principal officer <b>CHAUNCEY MCLEAN</b> <b>SAME AS C ABOVE</b> <b>I</b> Tax-exempt status <b>501(c)(3) <input checked="" type="checkbox"/> 501(c) (4) <input type="checkbox"/></b> (insert no) <b>4947(a)(1) or <input type="checkbox"/> 527 <input checked="" type="checkbox"/></b> <b>J</b> Website: <a href="https://WWW.FUTUREFORWARDUSA.ORG/">HTTPS://WWW.FUTUREFORWARDUSA.ORG/</a> <b>K</b> Form of organization <b>X Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other <input checked="" type="checkbox"/></b> <b>L</b> Year of formation <b>2018</b> <b>M</b> State of legal domicile <b>DC</b>	
		<b>D</b> Employer identification number <b>82-4170762</b> <b>E</b> Telephone number <b>202 552-0221</b> <b>G</b> Gross receipts <b>\$ 150,902,844.</b> <b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(c)</b> Group exemption number ►	

**Part I** Summary

<b>Activities &amp; Governance</b>	1 Briefly describe the organization's mission or most significant activities <b>FUTURE FORWARD USA ACTION HAS THE MISSION TO CREATE A STRONGER AMERICAN DEMOCRACY AND ADVOCATE FOR COMMON SENSE SOLUTIONS.</b>		
	2 Check this box ► <input type="checkbox"/> if the organization discontinued its operation		
<b>Revenue</b>	3 Number of voting members of the governing body (Part VI, line 1a)		
	4 Number of independent voting members of the governing body (Part VI, line 1b)		
<b>Expenses</b>	5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)		
	6 Total number of volunteers (estimate if necessary)		
<b>Net Assets or Fund Balances</b>	7a Total unrelated business revenue from Part VIII, column (A), line 12		
	b Net unrelated business taxable income from Form 990-T, Part I, line 1d		
<b>RECEIVED ✓</b>			
D243 DEC 03 2021 IRS-OSC OPENED			
		<b>Prior Year</b>	<b>Current Year</b>
8 Contributions and grants (Part VIII, line 1h)		5,096,340.	150,902,843.
9 Program service revenue (Part VIII, line 2g)		19,341.	1.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		5,115,681.	150,902,844.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10d, and 11e)		441,630.	116,755,000.
12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		209,274.	986,396.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		86,334.	
14 Benefits paid to or for members (Part IX, column (A), line 4)		3,155,956.	31,636,570.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		3,806,860.	149,377,966.
16a Professional fundraising fees (Part IX, column (A), line 11e)		1,308,821.	1,524,878.
b Total fundraising expenses (Part IX, column (D), line 25) ►			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		Beginning of Current Year	End of Year
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		5,339,563.	6,864,441.
19 Revenue less expenses Subtract line 18 from line 12		0.	0.
		5,339,563.	6,864,441.

**Part II** 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.

<b>Sign Here</b>	<b>Chauncey McLean</b>		<b>11 / 15 / 2021</b>
	Signature of officer		Date
<b>Paid Preparer Use Only</b>	<b>CHAUNCEY MCLEAN</b>		<b>PRESIDENT</b>
	Type or print name and title		
Print/Type preparer's name <b>KATHERINE CASSELL</b>		Preparer's signature <b>Chauncey McLean</b>	Date <b>11/15/21</b>
Firm's name ► <b>MBA CONSULTING GROUP</b>		Check <input type="checkbox"/> if self employed	PTIN <b>P02375316</b>
Firm's address ► <b>611 PENNSYLVANIA AVE SE, NUM 143 WASHINGTON, DC 20003</b>		Firm's EIN ► <b>47-1028527</b>	
		Phone no <b>202-552-0221</b>	

May the IRS discuss this return with the preparer shown above? See instructions

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

TEEA0101L 01/19/21

Form 990 (2020)

**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III 1 Briefly describe the organization's missionFUTURE FORWARD USA ACTION HAS THE MISSION TO CREATE A STRONGER AMERICAN DEMOCRACY AND ADVOCATE FOR COMMON SENSE SOLUTIONS.2 Did the organization undertake any significant program services during the year which were not listed on the prior

Form 990 or 990-EZ?

 Yes  No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

If "Yes," describe these changes on Schedule O

 Yes  No4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses  
Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses,  
and revenue, if any, for each program service reported**4 a** (Code \_\_\_\_\_) (Expenses \$ 148,218,504. including grants of \$ 116,755,000. ) (Revenue \$ \_\_\_\_\_)CONDUCTED QUANTITATIVE AND QUALITATIVE RESEARCH ON ISSUES OF NATIONAL IMPORTANCE THEN  
RAN MEDIA CAMPAIGNS INFORMED BY THAT RESEARCH.**4 b** (Code \_\_\_\_\_) (Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)**4 c** (Code \_\_\_\_\_) (Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)**4 d** Other program services (Describe on Schedule O)

(Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

**4 e** Total program service expenses ► 148,218,504.

## Part IV 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 Is the organization required to complete *Schedule B, Schedule of Contributors* See instructions?

3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I

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

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

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

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III

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

10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If 'Yes,' complete Schedule D, Part V

11 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI

b Did the organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII

c Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII

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

e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X

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

12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII

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

13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States?

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV

15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV

16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV

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

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

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

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

b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?

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

	Yes	No
1		X
2	X	
3	X	
4		
5		X
6		X
7		X
8		X
9		X
10		X
11a		X
11b		X
11c		X
11d		X
11e		X
11f		X
12a		X
12b		X
13		X
14a		X
14b		X
15		X
16		X
17		X
18		X
19		X
20a		X
20b		
21		X

**Part IV Checklist of Required Schedules (continued)**

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22	X
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25a	24a	X
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	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a	X
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	X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II	26	X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions)		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV	28a	X
b	A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV	28b	X
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If 'Yes,' complete Schedule L, Part IV	28c	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33	X
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	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
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	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	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	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	X

**Part V Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response or note to any line in this Part V 

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

1 a	23	Yes	No
1 b	0		

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

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

BAA

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Form 990 (2020)

## Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	8	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation on Schedule O	3b		
4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X	
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)			
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X	
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X	
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5c		
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X	
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	X	
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>			
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?	7a		
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d If 'Yes,' indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
<b>9 Sponsoring organizations maintaining donor advised funds.</b>			
a Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
<b>10 Section 501(c)(7) organizations. Enter</b>			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
<b>11 Section 501(c)(12) organizations. Enter</b>			
a Gross income from members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b		
12 a <b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>			
a 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			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c Enter the amount of reserves on hand	13c		
14 a Did the organization receive any payments for indoor tanning services during the tax year?	14a	X	
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O	14b		
15 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?	15	X	
If 'Yes,' see instructions and file Form 4720, Schedule N			
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	X	
If 'Yes,' complete Form 4720, Schedule O			

**Part VI** **Governance, Management, and Disclosure** For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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

### Section A. Governing Body and Management

		1 a	3	Yes	No
1 a	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 on Schedule O				
1 b	b Enter the number of voting members included on line 1a, above, who are independent		2	X	
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?			X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?			X	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			X	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			X	
6	Did the organization have members or stockholders?			X	
7 a	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?			X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?				
b	Each committee with authority to act on behalf of the governing body?				
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 on Schedule O			X	

### Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10 a	Did the organization have local chapters, branches, or affiliates?		X
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?		
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O		
12 a	Did the organization have a written conflict of interest policy? If 'No,' go to line 13		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done SEE SCHEDULE Q		
13	Did the organization have a written whistleblower policy?		X
14	Did the organization have a written document retention and destruction policy?		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official		
b	Other officers or key employees of the organization		
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions)		
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		
b	If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

### Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► NONE

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply

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

19 Describe on 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 SEE SCHEDULE O

20 State the name, address, and telephone number of the person who possesses the organization's books and records ►

MBA CONSULTING GROUP 611 PENNSYLVANIA AVE SE NUM 143 WASHINGTON DC 20003 202 552-0221

**Part VIII 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**

1 a 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

See instructions for the order in which to list the persons above

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				(D) Reportable compensation from the organization (W-2/1099 MISC)	(E) Reportable compensation from related organizations (W-2/1099 MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated			
(1) CHAUNCEY MCLEAN PRESIDENT	35 5	X		X			240,000.	0.	0.
(2) JON FROMOWITZ SECRETARY	35 5		X				213,000.	0.	0.
(3) DAVID SHOR DATA SCIENTIST	35 5				X		107,542.	0.	0.
(4) GAURAV SHIROLE TREASURER	5 1		X				0.	0.	0.
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									

## Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				(D) Reportable compensation from the organization (W-2/1099 MISC)	(E) Reportable compensation from related organizations (W-2/1099 MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
		Former employee	Highest compensated employee	Key employee	Officer	Institutional trustee	Individual trustee or director		
(15)									
(16)									
(17)									
(18)									
(19)									
(20)									
(21)									
(22)									
(23)									
(24)									
(25)									

1 b Subtotal	►	560,542.	0.	0.
c Total from continuation sheets to Part VII, Section A	►	0.	0.	0.
d Total (add lines 1b and 1c)	►	560,542.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 3

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes,' complete Schedule J for such individual	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person	5	X

## Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
WATERFRONT STRATEGIES 3050 K ST NW SUITE 100 WASHINGTON, DC 20007	TV AD BUYS	21,839,260.
RISING TIDE INTERACTIVE, LLC 1250 H ST NW SUITE 200 WASHINGTON, DC 20004	TV AD BUYS	3,100,395.
CIVIS ANALYTICS INC. 200 W MONROE ST SUITE 2200 CHICAGO, IL 60606	POLLING & ANALYTICS	2,301,100.
BNG RESEARCH, LLC 700 13TH ST NW STE 600 WASHINGTON, DC 20005	RESEARCH CONSULTING	848,000.
LUCID HOLDINGS LLC 365 CANAL ST SUITE 3100 NEW ORLEANS, LA 70130	RESEARCH	847,736.

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 ► 13

**Part VIII Statement of Revenue**Check if Schedule O contains a response or note to any line in this Part VIII 

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	150902843.			
	g Noncash contributions included in lines 1a-1f	1g				
	<b>h Total. Add lines 1a-1f</b>		► 150902843.			
<b>Program Service Revenue</b>		<b>Business Code</b>				
	2 a					
	b					
	c					
	d					
	e					
	f All other program service revenue					
	<b>g Total. Add lines 2a-2f</b>		►			
<b>Other Revenue</b>	3 Investment income (including dividends, interest, and other similar amounts)		1.	1.		
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross rents	(i) Real	(ii) Personal			
	b Less rental expenses	6a				
	c Rental income or (loss)	6b				
	d Net rental income or (loss)	6c				
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
b Less cost or other basis and sales expenses	7a					
c Gain or (loss)	7b					
d Net gain or (loss)	7c					
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	8a					
b Less direct expenses	8b					
c Net income or (loss) from fundraising events		►				
9 a Gross income from gaming activities See Part IV, line 19	9a					
b Less direct expenses	9b					
c Net income or (loss) from gaming activities		►				
10 a Gross sales of inventory, less returns and allowances	10a					
b Less cost of goods sold	10b					
c Net income or (loss) from sales of inventory		►				
<b>Miscellaneous Revenue</b>		<b>Business Code</b>				
	11 a					
	b					
	c					
	d All other revenue					
<b>e Total. Add lines 11a-11d</b>		►				
<b>12 Total revenue. See instructions</b>		► 150902844.	1.	0.	0.	

**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 

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	116,755,000.	116,755,000.		
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	453,000.	154,124.	277,663.	21,213.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7 Other salaries and wages	473,799.	106,652.	350,342.	16,805.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	8,810.	1,612.	7,104.	94.
10 Payroll taxes	50,787.	12,133.	36,700.	1,954.
11 Fees for services (nonemployees)				
a Management				
b Legal	115,238.		115,238.	
c Accounting	43,394.		43,394.	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,301,446.	2,158,198.	105,166.	38,082.
12 Advertising and promotion	25,711,657.	25,679,532.	32,125.	
13 Office expenses	14,674.	948.	13,594.	132.
14 Information technology	51,829.	21,342.	30,487.	
15 Royalties				
16 Occupancy				
17 Travel	30,506.	11,395.	11,057.	8,054.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	11,858.		11,858.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a POLLING & ANALYTICS	2,565,607.	2,532,972.	32,635.	
b FOCUS GROUPS	639,000.	639,000.		
c VOTER CONTACT PROGRAM FIELD	100,000.	100,000.		
d VOTER CONTACT PROGRAM PHONE	45,596.	45,596.		
e All other expenses	5,765.		5,765.	
25 Total functional expenses Add lines 1 through 24e	149,377,966.	148,218,504.	1,073,128.	86,334.
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)				

**Part X** **Balance Sheet**Check if Schedule O contains a response or note to any line in this Part X 

		(A) Beginning of year	(B) End of year	
<b>Assets</b>	1 Cash – non-interest-bearing	5,339,275.	1 6,864,152.	
	2 Savings and temporary cash investments	288.	2 289.	
	3 Pledges and grants receivable, net	3		
	4 Accounts receivable, net	4		
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	5		
	6 Loans and other receivables from other disqualifying persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	6		
	7 Notes and loans receivable, net	7		
	8 Inventories for sale or use	8		
	9 Prepaid expenses and deferred charges	9		
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a		
	b Less accumulated depreciation	10b		10c
	11 Investments – publicly traded securities		11	
	12 Investments – other securities See Part IV, line 11		12	
	13 Investments – program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11		15	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33)		5,339,563.	16 6,864,441.	
<b>Liabilities</b>	17 Accounts payable and accrued expenses	17		
	18 Grants payable	18		
	19 Deferred revenue	19		
	20 Tax-exempt bond liabilities	20		
	21 Escrow or custodial account liability Complete Part IV of Schedule D	21		
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	22		
	23 Secured mortgages and notes payable to unrelated third parties	23		
	24 Unsecured notes and loans payable to unrelated third parties	24		
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	25		
	<b>26 Total liabilities.</b> Add lines 17 through 25	0.	26	0.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here ►</b> <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.	27		
	27 Net assets without donor restrictions	27	6,864,441.	
	28 Net assets with donor restrictions	28		
	<b>Organizations that do not follow FASB ASC 958, check here ►</b> <input type="checkbox"/> and complete lines 29 through 33.	29		
	29 Capital stock or trust principal, or current funds	29		
	30 Paid-in or capital surplus, or land, building, or equipment fund	30		
	31 Retained earnings, endowment, accumulated income, or other funds	31		
	32 Total net assets or fund balances	32	5,339,563.	
	33 Total liabilities and net assets/fund balances	33	6,864,441.	
			5,339,563.	6,864,441.

BAA

TEEA011L 10/07/20

Form 990 (2020)

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI 

1 Total revenue (must equal Part VIII, column (A), line 12)	1	150,902,844.
2 Total expenses (must equal Part IX, column (A), line 25)	2	149,377,966.
3 Revenue less expenses Subtract line 2 from line 1	3	1,524,878.
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	5,339,563.
5 Net unrealized gains (losses) on investments	5	
6 Donated services and use of facilities	6	
7 Investment expenses	7	
8 Prior period adjustments	8	
9 Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	6,864,441.

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII 

	Yes	No
1 Accounting method used to prepare the Form 990 <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other _____		
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X
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		
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
2b Were the organization's financial statements audited by an independent accountant?	2b	X
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both		
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
2c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O		
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	X
3b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b	

BAA

TEEA0112L 10/19/20

Form 990 (2020)

## Political Campaign and Lobbying Activities

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

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.  
► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No 1545 0047

**2020**

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

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

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

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

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

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

Name of organization

**FUTURE FORWARD USA ACTION**

Employer identification number

82-4170762

**Part I-A** Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV  
(See instructions for definition of 'political campaign activities')
- 2 Political campaign activity expenditures (See instructions)
- 3 Volunteer hours for political campaign activities (See instructions)

SEE PART IV

► \$ 67,404,882.

**Part I-B** Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?

Yes  No  
 Yes  No

4 a Was a correction made?  
b If 'Yes,' describe in Part IV

**Part I-C** Complete if the organization is exempt under section 501(c) , except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ► \$ 6,704,882.
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ► \$ 60,700,000.
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ► \$ 67,404,882.
- 4 Did the filing organization file Form 1120-POL for this year?  
 Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV

(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) FF PAC	611 PENNSYLVANIA AVE SE WASHINGTON, DC 20003	83-0791921	60,275,000.	
(2) JUSTICE & PUBLIC SAFETY PAC	700 13TH ST NW STE 600 WASHINGTON, DC 20005	81-5457317	150,000.	
(3)	-----			
(4)	-----			
(5)	-----			
(6)	-----			

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

Schedule C (Form 990 or 990-EZ) 2020

**Part II-A** Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check ►  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ►  if the filing organization checked box A and 'limited control' provisions apply

Limits on Lobbying Expenditures (The term 'expenditures' means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditures to influence public opinion (grassroots lobbying)			
b Total lobbying expenditures to influence a legislative body (direct lobbying)			
c Total lobbying expenditures (add lines 1a and 1b)			
d Other exempt purpose expenditures			
e Total exempt purpose expenditures (add lines 1c and 1d)			
f Lobbying nontaxable amount Enter the amount from the following table in both columns			
If the amount on line 1e, column (a) or (b) is	The lobbying nontaxable amount is		
Not over \$500,000	20% of the amount on line 1e		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
g Grassroots nontaxable amount (enter 25% of line 1f)			
h Subtract line 1g from line 1a If zero or less, enter -0-			
i Subtract line 1f from line 1c If zero or less, enter -0-			
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

**4-Year Averaging Period Under Section 501(h)**  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2 a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

BAA

Schedule C (Form 990 or 990-EZ) 2020

**Part II-B** Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity		
		(a)
		(b)
Yes	No	Amount
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?	
d	Mailings to members, legislators, or the public?	
e	Publications, or published or broadcast statements?	
f	Grants to other organizations for lobbying purposes?	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	
i	Other activities?	
j	Total Add lines 1c through 1i	
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 III-A** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

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

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

**Part IV** Supplemental Information

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

**PART I-A, LINE 1 - DIRECT AND INDIRECT POLITICAL CAMPAIGN ACTIVITIES**

PRODUCED AND DISSEMINATED PAID ADVERTISEMENTS SUPPORTING OR OPPOSING CANDIDATES FOR PUBLIC OFFICE AND MADE CONTRIBUTIONS TO POLITICAL ORGANIZATIONS

**SCHEDULE I**  
(Form 990)

Department of the Treasury  
Internal Revenue Service  
Name of the organization

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

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

► Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

**2020**

**Open to Public  
Inspection**

OMB No. 1545-0047

Name of the organization

Employer identification number

82-4170762

**FUTURE FORWARD USA ACTION**

**[Part II] General Information on Grants and Assistance**

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

2 Does the organization's procedures for monitoring the use of grant funds in the United States

**[Part II] 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

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) OPEN MARKETS ACTION FUND — 140 G ST NW — WASHINGTON, DC 20005	82-5097446	501 (C) (4)	150,000.	0.			GENERAL SUPPORT
(2) WORKMONEY INC — 790 N MILWAUKEE ST STE 300 — MILWAUKEE, WI 53202		501 (C) (4)	850,000.	0.			PRIMARY PURPOSE SUPPORT
(3) LEAGUE OF CONSERVATION VOTERS — 740 15TH STREET NW FL 7 — WASHINGTON, DC 20005	52-1733698	501 (C) (4)	500,000.	0.			PRIMARY PURPOSE SUPPORT
(4) FIGHT FOR THE BASE, LTD. — 150 COLUMBIA HEIGHTS #150 — BROOKLYN, NY 11201		501 (C) (4)	250,000.	0.			PRIMARY PURPOSE SUPPORT
(5) MAJORITY FORWARD — 700 13TH ST NW STE 600 — WASHINGTON, DC 20003	83-3690373	501 (C) (4)	1,000,000.	0.			PRIMARY PURPOSE SUPPORT
(6) BATTLEGROUND TEXAS ENGAGEMENT — PO BOX 11525 — AUSTIN, TX 78701		501 (C) (4)	400,000.	0.			PRIMARY PURPOSE SUPPORT
(7) MI FAMILIA VOTA EDUCATION — 1140 E WASHINGTON ST RM 206 — PHOENIX, AZ 85034	20-0182824	501 (C) (4)	200,000.	0.			PRIMARY PURPOSE SUPPORT
(8) UNITE HERE ACTION FUND — 275 7TH AVE FL 16 — NEW YORK, NY 10001		501 (C) (4)	300,000.	0.			PRIMARY PURPOSE SUPPORT

2 Enter total number of section 501 (c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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

TEEA3901L 07/15/20

**Schedule I (Form 990) 2020**

TEEA3901L 07/15/20

**Schedule I (Form 990) 2020**

**Schedule I (Form 990) 2020**

**Schedule I (Form 990) 2020**

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1						
2						
3						
4						
5						
6						
7						

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

## Continuation Sheet for Schedule I (Form 990)

**2020**

► Attach to Form 990 to list additional information for  
Schedule I (Form 990), Part II and Part III.

Continuation Page 1 of 1

Name of the organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
<b>FUTURE FORWARD USA ACTION</b>							
<b>Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments.</b> (Schedule I (Form 990), Part II.)							
— <u>AMERICA'S PROMISE ACTION FUND</u> — <u>29 BRIARWOOD DR</u> — <u>RINGOLD, GA 30736</u>	85-0953078	501 (C) (4)	200,000.				PRIMARY PURPOSE SUPPORT
— <u>LA UNION DEL PUEBLO ENTERO</u> — <u>PO BOX 188</u> — <u>SAN JUAN, TX 78589</u>	93-1029197	501 (C) (3)	50,000.				PRIMARY PURPOSE SUPPORT
— <u>TEXAS FREEDOM NETWORK</u> — <u>PO BOX 1624</u> — <u>AUSTIN, TX 78767</u>	74-2736849	501 (C) (4)	20,000.				PRIMARY PURPOSE SUPPORT
— <u>JUSTICE AND PUBLIC SAFETY PAC</u> — <u>700 13TH ST NW STE 600</u> — <u>WASHINGTON, DC 20005</u>	81-5457317	527	150,000.				GENERAL SUPPORT
— <u>WHEN WE ALL VOTE</u> — <u>PO BOX 34673 1400 L ST NW</u> — <u>WASHINGTON, DC 20005</u>	83-0996376	501 (C) (3)	1,160,300.				PRIMARY PURPOSE SUPPORT
— <u>CENTER FOR VOTER INFORMATION</u> — <u>1707 L ST NW STE 700</u> — <u>WASHINGTON, DC 20036</u>	03-0554750	501 (C) (4)	1,620,000.				PRIMARY PURPOSE SUPPORT
— <u>VOTER PARTICIPATION CENTER</u> — <u>1707 L ST NW STE 950</u> — <u>WASHINGTON, DC 20036</u>	55-0889748	501 (C) (3)	470,000.				PRIMARY PURPOSE SUPPORT
— <u>SILICON VALLEY COMMUNITY FOUN</u> — <u>2440 W EL CAMINO REAL STE 300</u> — <u>MOUNTAIN VIEW, CA 94040</u>	20-5205488	501 (C) (3)	49,160,000.				PRIMARY PURPOSE SUPPORT
— <u>FE PAC</u> — <u>611 PENNSYLVANIA AVE SE #143</u> — <u>WASHINGTON, DC 20003</u>	83-0791921	527	60,275,000.	67,479	FMV		STAFF TIME & OVERHEAD EXPENSES
							GENERAL SUPPORT

**Schedule I Cont (Form 990) 2020**

TEA4001L 07/15/20

**SCHEDULE J**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Compensation Information**  
For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees  
► Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.  
► Attach to Form 990.  
► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No 1545 0047

**2020**

**Open to Public  
Inspection**

Name of the organization

**FUTURE FORWARD USA ACTION**

Employer identification number  
**82-4170762**

**Part I. Questions Regarding Compensation**

**1 a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items

<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (such as maid, chauffeur, chef)

Yes	No

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

**3** Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III

<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract
<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee

<b>1 b</b>	
<b>2</b>	X
<b>3</b>	
<b>4 a</b>	
<b>4 b</b>	
<b>4 c</b>	X

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization

a Receive a severance payment or change-of-control payment?  
b Participate in or receive payment from a supplemental nonqualified retirement plan?  
c Participate in or receive payment from an equity-based compensation arrangement?

If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

<b>4 a</b>	X
<b>4 b</b>	X
<b>4 c</b>	X
<b>5 a</b>	
<b>5 b</b>	X

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

a The organization?  
b Any related organization?  
If 'Yes' on line 5a or 5b, describe in Part III

<b>5 a</b>	X
<b>5 b</b>	X
<b>6 a</b>	
<b>6 b</b>	X
<b>7</b>	X

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

a The organization?  
b Any related organization?  
If 'Yes' on line 6a or 6b, describe in Part III

<b>6 a</b>	X
<b>6 b</b>	X
<b>7</b>	
<b>8</b>	
<b>9</b>	

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If 'Yes,' describe in Part III

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III

**9** If 'Yes' on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

**Schedule J (Form 990) 2020**

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
CHAUNCEY MCLEAN		\$ 240,000.	\$ 0.	\$ 0.	\$ 0.	\$ 0.	\$ 240,000.	\$ 0.
1 PRESIDENT		\$ 0.	\$ 0.	\$ 0.	\$ 0.	\$ 0.	\$ 0.	\$ 0.
JON FROMOWITZ		\$ 213,000.	\$ 0.	\$ 0.	\$ 0.	\$ 0.	\$ 213,000.	\$ 0.
2 SECRETARY		\$ 0.	\$ 0.	\$ 0.	\$ 0.	\$ 0.	\$ 0.	\$ 0.
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								

**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.

**BAA**

**SCHEDULE L**  
(Form 990 or 990-EZ)

**Transactions With Interested Persons**

OMB No 1545 0047

**2020**

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Inspection**

Department of the Treasury  
Internal Revenue Service

- Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
- Attach to Form 990 or Form 990-EZ.
- Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization

**FUTURE FORWARD USA ACTION**

Employer identification number

82-4170762

**Part II Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only). Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction		(d) Corrected?	
			Yes	No		
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958

► \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

► \$

**Part III Loans to and/or From Interested Persons.**

Complete if the organization answered 'Yes' on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												

Total

► \$

**Part III Grants or Assistance Benefiting Interested Persons.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

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

Schedule L (Form 990 or 990-EZ) 2020

**Part IV Business Transactions Involving Interested Persons.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) GAURAV SHIROLE	DIRECTOR	848,000.	INDEPENDENT CONTRACTOR		X
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

**Part VI Supplemental Information.**

Provide additional information for responses to questions on Schedule L (see instructions).

**SUPPLEMENTAL INFORMATION**

GAURAV SHIROLE IS A MAJORITY OWNER OF BNG RESEARCH, LLC.

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

Department of the Treasury  
Internal Revenue Service

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

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

► Attach to Form 990 or 990-EZ.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No 1545 0047

**2020**

Open to Public  
Inspection

Name of the organization

FUTURE FORWARD USA ACTION

Employer identification number

82-4170762

**FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS**

FORM 990 IS PROVIDED TO THE GOVERNING BODY AND OUTSIDE COUNSEL FOR REVIEW PRIOR TO  
FILING.

**FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS**

ORGANIZATION INQUIRES ANNUALLY TO THE DIRECTORS, OFFICERS, AND KEY EMPLOYEES  
REGARDING ANY POTENTIAL CONFLICTS.

**FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE**

THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE MADE  
AVAILABLE UPON REQUEST.

**SCHEDULE R**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
FUTURE FORWARD USA ACTION

**Related Organizations and Unrelated Partnerships**

- Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
- Attach to Form 990.

► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information

**2020**

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Inspection**

OMB No 1545 0047

**Part II Identification of Disregarded Entities.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) _____	_____	_____	_____	_____	_____
(2) _____	_____	_____	_____	_____	_____
(3) _____	_____	_____	_____	_____	_____

**Part III Identification of Related Tax-Exempt Organizations.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Sec 512(b)(13) controlled entity?
(1) FF PAC 611 PENNSYLVANIA AVE SE NUM 143 WASHINGTON, DC 20003 83-0791921	POLITICAL COMMITTEE	DC	527	N/A	N/A	Yes X
(2) _____	_____	_____	_____	_____	_____	_____
(3) _____	_____	_____	_____	_____	_____	_____
(4) _____	_____	_____	_____	_____	_____	_____

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

TEEA5001L 07/15/20

Schedule R (Form 990) 2020

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

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

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a Receipt of (i) interest, (ii) royalties, or (iv) rent from a controlled entity
- b Gift, grant, or capital contribution to related organization(s)
- c Gift, grant, or capital contribution from related organization(s)
- d Loans or loan guarantees to or for related organization(s)
- e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (e-s)	(c) Amount involved	(d) Method of determining amount involved
(1) FF PAC	B	60,275,000	CASH
(2) FF PAC	M	32,761	TIME ALLOCATIO
(3) FF PAC	N	34,718	TIME ALLOCATIO
(4)			
(5)			
(6)			Schedule R (Form 990) 2020

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unre- lated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor- tional allocations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	(k) Percentage ownership
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										

BAA

TEEA5004L 07/15/20

Schedule R (Form 990) 2020

**Part VII Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.