2949214819817 Short Form 2949
Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2020

Department of the Treasury Internal Revenue Service

► Do not enter social security numbers on this form, as it may be made public.

► Go to www.irs.gov/Form990EZ for instructions and the latest information.

Open to Public Inspection

Α	For t	he 2020 calendar year, or tax year beginning , 2020,	and ending	,	
В	Check	if applicable C		D Employer ide	ntification number
		s change Progressive Pipeline		84-192	9570
A		159 Codman		E Telephone nu	
┝	Initial r	Portland, ME 04103		(207)	650-6564
\vdash		urn/terminated led return	$\Delta \lambda$		••
F		ation pending	UH	F Group Exe	emption •
G		unting Method X Cash Accrual Other (specify) ►	H Check	k ► ☐ if the o	rganization is not
Ī		site: www.progressive-pipeline.org		ed to attach S	
J	Tax-ex	tempt status (check only one) —	1) or 527 (Form	1 990, 990-EZ,	or 990-PF)
ĸ		of organization X Corporation Trust Association Other			
L	Add I	ines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are	\$200,000 or more, or	ıf total	
_		is (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 99		▶\$	77,599.
Pa	ırt I	Revenue, Expenses, and Changes in Net Assets or Fund Bala Check if the organization used Schedule O to respond to any question in this		tructions to	r Part I)
	1	Contributions, gifts, grants, and similar amounts received		1 1	77,599.
	2	Program service revenue including government fees and contracts		2	11,333.
	3	Membership dues and assessments - RECEIVED		3	
	4			4	
	5 a	Gross amount from sale of assets other han inventory 2021	5 a		
	b	Less cost or other basis and sales expenses	5 b		
	c	Gain or (loss) from sale of assets other than inventory (subtrast line 5b from line 5a)		5 c	
	6	Gaming and fundraising events			
ē	a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6 a		
ē	b	Gross income from fundraising events (not including\$	of contributions		
Revenue		from fundraising events reported on line 1) (attach Schedule G if the sum	- - 61-1		
Œ		of such gross income and contributions exceeds \$15,000)	6 b		
		Less direct expenses from gaming and fundraising events	00		
2024		Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	_ 1	6 d	
-		Gross sales of inventory, less returns and allowances	7 a		
>		Less cost of goods sold	7 b	——————————————————————————————————————	
پ	١ ـ	Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)		7 c	
\equiv	8	Other revenue (describe in Schedule O)		8 • 9	77. 500
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	 	10	77,599.
<u>I</u>	10	Grants and similar amounts paid (list in Schedule O) Benefits paid to or for members		11	
Z,	11	Salaries, other compensation, and employee benefits		12	26 000
EXPERSAN	12			13	26,989.
	13	Professional fees and other payments to independent contractors Occupancy, rent, utilities, and maintenance		14	3,145.
Ž,	15	Printing, publications, postage, and shipping		15	
	16	Other expenses (describe in Schedule O)	ee Schedule O	16	7,027.
	17	Total expenses. Add lines 10 through 16		► 17	37,161.
	18	Excess or (deficit) for the year (subtract line 17 from line 9)		18	40,438.
Net Assets	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (r figure reported on prior year's return)	must agree with end-of	f-year	
Ä	20	Other changes in net assets or fund balances (explain in Schedule O)		20	72,860.
Ž	21	Net assets or fund balances at end of year Combine lines 18 through 20		► 21	113,298.
RΛ		r Paperwork Reduction Act Notice, see the separate instructions.	0111	1 -, 1	Form 990-EZ (2020)
		apo	<i>[]</i>	11	\ \P
			911	-14	14
				1 1	I(I)



	the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V			
	Did the organization engage in any significant activity not previously reported to the IRS?		Yes	No
33	If 'Yes,' provide a detailed description of each activity in Schedule O	33	_	Х
34	, , , , , , , , , , , , , , , , , , , ,			
	a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions	34		<u> X</u>
35	a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35 a		х
	b If 'Yes' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an explanation in Schedule O	35 b		
	c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If 'Yes,' complete Schedule C, Part III			
		35 c		<u> X</u>
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N	36		Х
	a Enter amount of political expenditures, direct or indirect, as described in the instructions > 37a 11,519.			لـــا
	b Did the organization file Form 1120-POL for this year?	37 b		X
38	a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38 a		
	b If 'Yes,' complete Schedule L, Part II, and enter the total			
20	amount involved Section 501(c)(7) organizations Enter			
	a Initiation fees and capital contributions included on line 9. 39a 0.			
	b Gross receipts, included on line 9, for public use of club facilities 39b 0.			
	a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under N/A			
70	section 4911 ► 0., section 4912 ► 0., section 4955 ► 0.			
	b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess.			
	benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	40 b		X
	c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization			
	d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization □ 0.			
	e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T	40 e		Х
41				Ь
	List the states with which a copy of this return is fined			
42	ta The organization's books are in care of ► Michael Michaelson Located at ► 59 Codman St Portland ME Telephone no ► 207 6	6 <u>-0</u>		
42	Telephone no 207 6. Located at 59 Codman St Portland ME ZIP + 4 > 04103 b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a		5 <u>64</u> Yes	 No
42	ta The organization's books are in care of ► Michael Michaelson Telephone no ► 207 6. Located at ► 59 Codman St Portland ME ZIP + 4 ► 04103 b 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)?	50-6 42b		No X
42	Telephone no 207 6. Located at 59 Codman St Portland ME ZIP + 4 > 04103 b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a			
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	Telephone no 207 6 Located at 59 Codman St Portland ME Description of 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)? If 'Yes,' enter the name of the foreign country See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) C At any time during the calendar year, did the organization maintain an office outside the United States?			
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	Telephone no 207 6. Located at 59 Codman St Portland ME Dip + 4 04103 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)? If 'Yes,' enter the name of the foreign country See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) c At any time during the calendar year, did the organization maintain an office outside the United States? If 'Yes,' enter the name of the foreign country Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here	42 b		X
43	Telephone no 207 6 Located at 59 Codman St Portland ME DATE of 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)? If 'Yes,' enter the name of the foreign country See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) c At any time during the calendar year, did the organization maintain an office outside the United States? If 'Yes,' enter the name of the foreign country Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year A Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead	42 b	Yes	X X N/A N/A
43	Telephone no 207 6 Located at 59 Codman St Portland ME ZIP+4 04103 b 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)? If 'Yes,' enter the name of the foreign country See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) c At any time during the calendar year, did the organization maintain an office outside the United States? If 'Yes,' enter the name of the foreign country Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year 1a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	42 b	Yes	X X N/A N/A
43	Telephone no 207 6. Located at 59 Codman St Portland ME 21P+4 04103 b 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)? If 'Yes,' enter the name of the foreign country See the instructions for exceptions and filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) c At any time during the calendar year, did the organization maintain an office outside the United States? If 'Yes,' enter the name of the foreign country Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year *43 b Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	42 b	Yes	X N/A N/A No X
43	Telephone no 207 6. Located at 59 Codman St Portland ME 21P 4 04103 b 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)? If 'Yes,' enter the name of the foreign country See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) c At any time during the calendar year, did the organization maintain an office outside the United States? If 'Yes,' enter the name of the foreign country Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year 1a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ c Did the organization receive any payments for indoor tanning services during the year?	42 b 42 c	Yes	X N/A N/A No X
43	Telephone no 207 6 Located at 59 Codman St Portland ME 207 6 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)? If 'Yes,' enter the name of the foreign country See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) c At any time during the calendar year, did the organization maintain an office outside the United States? If 'Yes,' enter the name of the foreign country Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year La Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ c Did the organization receive any payments for indoor tanning services during the year? d If 'Yes,' to line 44c. has the organization filed a Form 720 to report these payments?	42 b 42 c	Yes	X N/A N/A No X
43	Telephone no 207 6. Located at 59 Codman St Portland ME 21P 4 04103 b 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)? If 'Yes,' enter the name of the foreign country See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) c At any time during the calendar year, did the organization maintain an office outside the United States? If 'Yes,' enter the name of the foreign country Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year 1a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ c Did the organization receive any payments for indoor tanning services during the year?	42 b 42 c 44 a 44 b 44 c	Yes	X N/A N/A No X
43	Telephone no 207 6 Located at 59 Codman St Portland ME 207 6 Located at 50 Codman St Portland ME 207 6 Located at 50 Codman St Portland ME 207 6 Located at 50 Codman St Portland ME 207 6 Located at 50 Codman St Portland ME 207 6 Located at 50 Codman St Portland ME 207 6 Located at 50 Codman St Portland ME 207 6 Located at 50 Codman St Portland ME 207 6 Located at 50 Codman St Portland ME 207 6 Located at 50 Codman St Portland ME 207 6 Located at	42 b 42 c 44 a 44 b 44 c	Yes	X N/A N/A No X X X

Form 990-1	EZ(2020) Progressive Pipelin	ie				84-192	9570	Р	age 4
	ne organization engage, directly or indire		gn activities	on behalf o	of or in o	opposition to	46	Yes	No
Part VI	Section 501(c)(3) Organizations All section 501(c)(3) organization	only	uestions 4	7-49b and	d 52, a	and complete		<u></u>	
	for lines 50 and 51. Check if the organization used 5	•							
	Check if the organization used to	ochedule O to resp	ond to an	y question	11 111 (11	is i ait vi		Yes	No
47 Did th	ne organization engage in lobbying activities plete Schedule C, Part II	or have a section 501(h)	election in e	ffect during t	the tax y	rear? If 'Yes,'	47	163	
48 Is the	e organization a school as described in se	ection 170(b)(1)(A)(ii)?	If 'Yes,' con	nplete Sche	dule E		48		
49 a Did tl	he organization make any transfers to an	exempt non-charitable	related orga	anızatıon?			49 a		
	s,' was the related organization a section						49 b		
	plete this table for the organization's five high pyees) who each received more than \$100,00						ey		
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable (Forms W-2/	compensation 1099-MISC)	contribu benefit p	dealth benefits, itions to employee plans, and deferred empensation	(e) Estimate other com		
						-			
								_	
51 Com	number of other employees paid over \$1 plete this table for the organization's five high bensation from the organization. If there is	nest compensated indep	endent contra	ctors who ea	ach recei	ived more than \$	100,000 of		
	(a) Name and business address of each independent co	ontractor		(b) Type (of service		(c) Comp	ensation	1
						`			
						•			
52 Did t	number of other independent contractors he organization complete Schedule A? No pleted Schedule A	_		ons must a	ttach a	•	► Yes		No
Under penaltie true, correct, a	es of perjury, I declare that I have examined this return, and complete. Declaration of preparer (other than office	including accompanying scherr) is based on all information of	dules and statem of which preparer	ents, and to the has any knowl	e best of medge	ny knowledge and bel	ief, it is		
	Merflyn		 .			tober 27, 2021			
Sign Here	Signature of officer Michael Michaelson			_	Date Presi	ident & CE	0		
	Type or print name and title	Propagation		Date			TIN		
Paid	Print/Type preparer's name Elizabeth K Steppe, CPA	Preparer's signature Elizabeth K Stepp	e, CPA	Date		Check X if	01709690_		
Preparer	Firm's name ► <u>Elizabeth K Steppe</u>								
Use Only	Firm's address ► 317 Morningside Dr					Firm's EIN			
	Albuquerque, NM 871		 			Phone no 510-	375-0648		
May the IF	RS discuss this return with the preparer sh	nown above? See instr	uctions				► X Yes	· <u> </u>	No

Form **990-EZ** (2020)

BAA

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

2020

Open to Public Inspection

Schedule C (Form 990 or 990-EZ) 2020

Department of the Treasury Internal Revenue Service ► 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.

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

• 9	Section	501(c)(4), (5), or (6) o	rganizations Complete Part III			
Name	of organ	ization			Employer identific	ation number
		ssive Pipeline			84-192957	
Par	t I-A	Complete if the or	rganization is exempt under section	on 501(c) or is a s	section 527 organia	zation.
1			organization's direct and indirect political con of 'political campaign activities')	ampaign activities in	Part IV See Part	IV
2	Politic	cal campaign activity ex	xpenditures (See instructions)		► \$	11,513.
3	Volun	iteer hours for political	campaign activities (See instructions)			800
Par	t I-B	Complete if the or	rganization is exempt under section	on 501(c)(3).		
1	Enter	the amount of any exc	ise tax incurred by the organization under	section 4955	▶\$	
2	Enter	the amount of any exc	ise tax incurred by organization managers	under section 4955	▶\$	
3	If the	organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No
4 a	Was a	a correction made?				Yes No
b	If 'Ye	s,' describe in Part IV				
Par	t I-C	Complete if the or	rganization is exempt under section	on 501(c) , excep	t section 501(c)(3).	
1	Enter	the amount directly ex	pended by the filing organization for section	n 527 exempt function	n activities > \$	27,617.
2		the amount of the filing xempt function activities	g organization's funds contributed to other	organizations for sec	tion ►\$	
3	Total line 1		ditures Add lines 1 and 2 Enter here and	on Form 1120-POL,	► \$	27,617.
4	Did th	ne filing organization file	e Form 1120-POL for this year?			Yes X No
5	organ amou	nzation made payments nt of political contribution	and employer identification number (EIN) For each organization listed, eriter the ailust received that were promptly and directly deful action committee (PAC). If additional spa	mount paid from the flivered to a separate po	ílling organization's fund blitical organization, such	ds. Also eritei the
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
(1)						
(2)	<u>.</u> .	•				
(3)						
(4)	·					
(5)						
(6)						

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

Part II-A Complete if t section 501(the organization	is exempt under se	ction 501(c)(3) and	filed Form 5768 (el	ection under
·		s to an affiliated group (and	list in Part IV each affilia	ated group member's name	
		share of excess lobbying		J ,	
B Check ► ☐ If the filling	ng organization che	cked box A and 'limited co	ntrol' provisions apply		
(The term		ing Expenditures ns amounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	ures to influence pu	blic opinion (grassroots lot	obying).		
b Total lobbying expenditu	ures to influence a l	egislative body (direct lobb	oying)	_	
c Total lobbying expenditu	ures (add lines 1a a	nd 1b)			
d Other exempt purpose e	•				
e Total exempt purpose e	xpenditures (add lir	es 1c and 1d)			
f Lobbying nontaxable am both columns	nount Enter the am	ount from the following tal	ole in		
If the amount on line 1e, colu	umn (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,		\$100,000 plus 15% of the excess			
Over \$1,000,000 but not over \$,,	\$175,000 plus 10% of the excess			
Over \$1,500,000 but not over \$		\$225,000 plus 5% of the excess (\$1,000,000	over \$1,500,000		
g Grassroots nontaxable a			<u> </u>		
h Subtract line 1g from lin				-	
i Subtract line 1f from line					
j If there is an amount othe section 4911 tax for this	er than zero on either	•	ganization file Form 4720	reporting	Yes No
(Som	e organizations tha	4-Year Averaging Period l t made a section 501(h) el low. See the separate inst	ection do not have to o		
	Lobb	ying Expenditures During	4-Year Averaging Peri	od	
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures			-		
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))	, e	, ,			
f Grassroots lobbying expenditures					
ВАА				Schedule C (Form	990 or 990-EZ) 2020

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

or each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description f the lobbying activity)	(b)	
		No	Amount	
During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?		1		
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?				

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 expenses for which the section 527(f) tax was paid).	of political	
a Current year	2 a	
b Carryover from last year	2 b	
c Total	2 c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e)) dues 3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the edoes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year?	excess political 4	
5 Taxable amount of lobbying and political expenditures (See instructions)	5	

Part IV | Supplemental Information

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

Part I-A, Line 1 - Direct and Indirect Political Campaign Activities

Trained, coached, and supported a cohort of college students who organized on progressive political campaigns.

SCHEDULE O · (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Progressive Pipeline

Employer identification number 84-1929570

Form 990-EZ, Part I, Line 16 Other Expenses

Bank fees	\$ 34.
Conferences, Conventions, and Meetings	1,125.
Fellow Expenses	500.
Fellow Stipends	822.
Insurance	120.
Office Expenses	127.
Trainer Stipends	4,299.
Total	\$ 7,027.

Form 990-EZ, Part III - Organization's Primary Exempt Purpose

Recruit and train the next generation of progressive leaders.

Form 990-EZ, Part III, Line 28 - Statement of Program Service Accomplishments

Progressive Pipeline recruits, trains, and supports underrepresented college students and helps them launch careers in organizing and civic engagement. The organization offers interactive training and intensive coaching or digital organizing techniques and career readiness. Fellows learn to manage volunteers, lead trainings, tell their own stories, and move others to action. Then, they receive personalized career coaching, resume and cover letter help, and connections to future employers. In 2020, the Organization recruited, trained, coached and supported more than 120 fellows, 65% of which were people of color and 69% women or non-binary people.



DEPARTMENT OF CONSUMER & REGULATORY AFFAIRS District of Columbia Government Corporations Division

Articles of Amendment of Domestic Nonprofit Corporation Form DNP-2, Version 3, April 2013

Under the provisions of the Title 29 of D.C. Code (Business Organizations Act), the domestic filing entity listed below hereby applies for a Certificate of Amendment and for that purpose submits the statement below.

1. Corporation Name.

Alexandra Fascione

Progressive Pipeline
2. The text of each amendment adopted.
Article 1 is amended as follows to change the name of this corporation from New Organizing Fund to Progressive Pipeline The name of this corporation is Progressive Pipeline.
·
3. If the amendment provides for an exchange, reclassification, or cancellation of memberships, provisions for implementing the amendment.
4. The date of each amendment's adoption 7/10/2019 7.34.56 PM
5. Amendment has been adopted in the following manner The amendment was duly approved by the incorporators or by the board of directors, as the case may be, and that shareholder approval was not required.

If you sign this form you agree that anyone who makes a false statement can be punished by criminal penalties of a fine up to \$1000, imprisonment up to 180 days, or both, under DCOC § 22-2405;

Name of the Governor or Authorized Person	Date	Signature
Alfredo Patino	2/2/2021 5 57.30 PM	ESIGNED
Evan Wolfson	2/2/2021 5 57 30 PM	
Mıchael Michaelson	2/2/2021 5 [.] 57:30 PM	
Elaine Cummings	2/2/2021 5.57 30 PM	

2/2/2021 5 57 30 PM

GOVERNMENT OF THE DISTRICT OF COLUMBIA

DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS CORPORATIONS DIVISION



THIS IS TO CERTIFY that all applicable provisions of the District of Columbia Business Organizations Code have been complied with and accordingly, this *CERTIFICATE OF AMENDMENT* is hereby issued to:

Progressive Pipeline

Effective Date: 2/2/2021

IN WITNESS WHEREOF I have hereunto set my hand and caused the seal of this office to be affixed as of 2/2/2021 5:57 PM



Muriel Bowser Mayor

Tracking #: dhkjAx3m

Business and Professional Licensing Administration

Josef G. Gasimov

JOSEF G. GASIMOV

JOSEF G. GASIMOV
Superintendent of Corporations,
Corporations Division