efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493270002018 OMB No 1545-0047 **Return of Organization Exempt From Income Tax**

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

2017

Department of the Treasury

foundations)

▶ Do not enter social security numbers on this form as it may be made public ▶ Information about Form 990 and its instructions is at www.IRS gov/form990

Open to Public

mterna	reve	enue service							Tushe	CUOII
A F	or th	e 2017 c	alendar year, or tax year beginni	ng 01-01-2017 , and end	ing 12-31	-2017				
□ Ad	dress	applicable change	C Name of organization NEO PHILANTHROPY INC				D Employe 13-319:		cation nu	ımber
□ Na	tıal re	turn	Doing business as							
☐ Am	nende	n/terminated d return ion pending	Number and street (or P O box if mail 45 WEST 36TH STREET 6TH FLOOR	is not delivered to street address)	Room/suite	e	E Telephon	e number 78-2800		
, , ,	,	,	City or town, state or province, countr NEW YORK, NY 10018	y, and ZIP or foreign postal code	1		G Gross re-		3 001 041	
			F Name and address of principal of	officer	Т	H/a) Ta thu		•	,,001,041	
			Michele Lord 45 WEST 36TH STREET 6TH FLOOI NEW YORK, NY 10018			H(a) Is this subort H(b) Are all	dinates?			es 🗹 No
	x-exer	mpt status	✓ 501(c)(3) ☐ 501(c)() ◀ (in		¬	ì ínclud	ed?			es □No
U K	ebsit	te:► WW	/W NEOPHILANTHROPY ORG	sert no)		H(c) Group	," attach a l exemption	**		ons)
K Form	n of o	rganızatıon	✓ Corporation ☐ Trust ☐ Associa	otion Other ►		L Year of forma	ation 1983	M State o	of legal do	omicile NY
Pa	rt I	Sum	mary							
Governance	2	issues, probuilding in	is box $ ightharpoonup \square$ if the organization disco	ement of projects and campa	osed of mo	evelops orga	nization and	field-foo		pacity
Activities &	l		of voting members of the governing					3		7
#De	l		of independent voting members of the					5		7
Ę	l		nber of individuals employed in calei nber of volunteers (estimate if neces	•	•			6		107 7
ď	l		elated business revenue from Part V					7a		0
	l		ated business taxable income from I	, , , , ,				7b		0
							or Year		Current	Year
O)	8	Contribut	cions and grants (Part VIII, line 1h)		•		37,899,3	323		57,238,552
Rəvenue	9	Program	service revenue (Part VIII, line 2g)				394,3	370		723,953
RộV	10	Investme	ent income (Part VIII, column (A), lir	nes 3, 4, and 7d)			80,4	194		105,909
_	l		venue (Part VIII, column (A), lines 5					0		0
	_		enue—add lines 8 through 11 (must	, ,,,,	ine 12)		38,374,1			58,068,414
	l	Grants ar	953	26,781,13						
	l		paid to or for members (Part IX, colu	, ,,	• • F 10)		4 365 /	0		
Expenses	l		other compensation, employee bene mal fundraising fees (Part IX, columi		-		4,265,4	1/6		6,862,342
9	l		raising expenses (Part IX, column (D), line		•			- 		
五	l		penses (Part IX, column (A), lines 1:	· ·			10,285,0	32		11,442,665
	l		enses Add lines 13-17 (must equal	•			38,557,4			45,086,138
	19	Revenue	less expenses Subtract line 18 from	n line 12			-183,2	274		12,982,276
8 8						Beginning	of Current Y	ear	End of	Year
Net Assets or Fund Balances	20	Total acc	ets (Part X, line 16)				21,700,0	260		34,839,820
AB	l				•		1,060,3			1,217,787
ž Š	l		s or fund balances Subtract line 21				20,639,7			33,622,033
Pai		_	ature Block	110111 11110 20 1 1 1 1	•		20,033,7	3/		33,022,033
Unde	pen	alties of p	erjury, I declare that I have examin							
any k			f, it is true, correct, and complete [Deciaration of preparer (other	than office	i) is based o	II all IIIIOIIII	ation of w	mich pre	parei nas
		 	*			201	0.00.11			
Sign		Signati	ure of officer			Date	8-09-11 e			
Here		MICHE	LE LORD PRESIDENT							
			r print name and title							
			rint/Type preparer's name (evin Sunkel	Preparer's signature Kevin Sunkel	Da	te Che		PTIN P00706145		
Paid		-				self	-employed			
Pre		FI -	irm's name ► Owen J Flanagan & Co				n's EIN ► 13- ne no (212) (
Use	On	ily ˈ				Prio	e (Z1Z) !	002-2/63		
			New York, NY 10165	1 2/				[J].		
May t	ne IR	(> discuss	this return with the preparer shown	above (see instructions) .				ı ∠ ı Y	es 🗆 N	10

Cat No 11282Y

Form **990** (2017)

For Paperwork Reduction Act Notice, see the separate instructions.

Form	990 (2	017)					Page 2
Par	t III	Statement	of Program Servi	ce Accomplis	hments		
		Check If Sched	dule O contains a resp	onse or note to a	any line in this Part III		🗹
1	Briefly	describe the o	rganızatıon's mıssıon				
					en the work of philanthr ignity, and opportunity t	opic institutions, nonprofit grou for all people	ps, and other public interest
2		-	, ,		vices during the year wh	uch were not listed on	□Yes ☑No
	•		990-EZ?				⊔ Yes 🛂 No
3		,	se new services on Sc cease conducting, or n		changes in how it condu	cts, any program	
			se changes on Schedu				☐ Yes 🗹 No
4	Sectio	n 501(c)(3) and		ons are required	to report the amount of	argest program services, as me f grants and allocations to other	
4a	(Code See Ad	dıtıonal Data) (Expenses \$	17,739,629	including grants of \$	14,971,064) (Revenue \$	0)
4b	(Code See Ad	ldıtıonal Data) (Expenses \$	8,126,011	including grants of \$	6,967,880) (Revenue \$	0)
4c	(Code See Ad	lditional Data) (Expenses \$	1,738,446	including grants of \$	1,439,256) (Revenue \$	0)
	(Code NEO Ph	nılanthropy has se) (Expenses \$ veral other fiscally sponso	14,291,752 ored special project		3,402,931) (Revenue \$ other programs including Funders Co	723,953) pmmittee for Civic Participation
4d	Other	program servic	es (Describe in Sched	ule O)			
	(Expe	nses \$	14,291,752 inc	luding grants of	\$ 3,402,9	31) (Revenue \$	723,953)
4e	Total	program serv	rice expenses >	41,895,8	38		

Checklist of Required Schedules

Page 3

No

Nο

Nο

Nο

Nο

Nο

No

No

Nο

Νo

Nο

Form **990** (2017)

Yes

Yes

Yes

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? 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🛸 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets? 8

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 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

Nο Νo Nο No 10 Nο permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable

11a assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸 11b 11c 11d

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? Yes b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its 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 Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f 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? 12a If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a

b Was the organization included in consolidated, independent audited financial statements for the tax year? 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 14b

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 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

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

15 16

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

18 No Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 Nο

Nο

Νo

No

Nο

Νo

Nο

Yes

Yes

21

22

23

24a

24b

24c

24d

25a

25b

26

27

28a

28b

28c

29

30

31

32

33

34

35a

35h

36

37

Yes

Yes

•	,
ΙV	Checklist of Required Schedules (continued)

Part 1 Yes 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . 20a No b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b

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 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

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 🔧

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

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

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

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

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

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

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,"

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

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," 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?

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

instructions for applicable filing thresholds, conditions, and exceptions)

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . . 🥞

29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I . Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Yes Form 990 (2017)

orm	990 (2017)			Page !
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 263			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
	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	, l		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2ь	Yes	
٦-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			N
	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3a 3b		No
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	30		
7 0	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	30		
·	In 165, to line 3d of 35, and the organization file form 6000-12.	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	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		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			
,		7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
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?			
۸-	Did the annual and annual annu	8		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter	9b		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter	1		
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
_	against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for			
	additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in	13a		
	which the organization is licensed to issue qualified health plans	.		
	Enter the amount of reserves on hand	.		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Par	t VI	Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "No" 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions	respor	nse to li	nes
		Check if Schedule O contains a response or note to any line in this Part VI			✓
Se	ction	A. Governing Body and Management			
				Yes	No
1a	Enter	the number of voting members of the governing body at the end of the tax year 1a 7			
	body,	re are material differences in voting rights among members of the governing or if the governing body delegated broad authority to an executive committee or ir committee, explain in Schedule O			
b	Enter	the number of voting members included in line 1a, above, who are independent 1b 7			
2		ny officer, director, trustee, or key employee have a family relationship or a business relationship with any other r, director, trustee, or key employee?	2		No
3		ne organization delegate control over management duties customarily performed by or under the direct supervision cers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did th	ne organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did th	ne organization become aware during the year of a significant diversion of the organization's assets?	5		No
6		ne organization have members or stockholders?	6		No
	Did th	ne organization have members, stockholders, or other persons who had the power to elect or appoint one or more			
		pers of the governing body?	7a		No
b		ny governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or ns other than the governing body?	7b		No
8		ne organization contemporaneously document the meetings held or written actions undertaken during the year by illowing			
а	The g	overning body?	8a	Yes	
b	Each	committee with authority to act on behalf of the governing body?	8 b	Yes	
9		re any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the ization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction	B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	.)	
		_		Yes	No
		' ' '	10a		No
Ь		s," did the organization have written policies and procedures governing the activities of such chapters, affiliates, ranches to ensure their operations are consistent with the organization's exempt purposes?	10ь		
11a	Has t form?	he organization provided a complete copy of this Form 990 to all members of its governing body before filing the	11a	Yes	
b	Descr	ibe in Schedule O the process, if any, used by the organization to review this Form 990			
			12a	Yes	
Ь		officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	12b	Yes	
С		ne organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in dule O how this was done</i>	12c	Yes	
13	Did th	ne organization have a written whistleblower policy?	13	Yes	
14	Did th	ne organization have a written document retention and destruction policy?	14	Yes	
15		ne process for determining compensation of the following persons include a review and approval by independent ns, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The o	rganization's CEO, Executive Director, or top management official	15a	Yes	
b		, , , , ₂	15b	Yes	
		s" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Dıd tl taxab	ne organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a le entity during the year?	16a		No
b	ın joir	s," did the organization follow a written policy or procedure requiring the organization to evaluate its participation it venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt			
	status	s with respect to such arrangements?	16b		
		C. Disclosure			
17	Lıst t	ne States with which a copy of this Form 990 is required to be filed▶ NY , CA , OR , MS			
18		on 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) ible for public inspection. Indicate how you made these available. Check all that apply			
	_	Own website 🗹 Another's website 🗹 Upon request 🔲 Other (explain in Schedule O)			
19	Descr	ibe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest , and financial statements available to the public during the tax year			
20	State	the name, address, and telephone number of the person who possesses the organization's books and records Philanthropy Inc. 45 WEST 36TH STREET 6TH FLOOR NEW YORK, NY 10018 (212) 378-2800			

Part VII

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

and Independent Contractors

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

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

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

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

of reportable compensation from the organization	nand any relate	ed organ	nızatı	ons				,	,	,	
 List all of the organization's former director organization, more than \$10,000 of reportable co 											
List persons in the following order individual trus compensated employees, and former such person		rs, insti	tution	nal t	:rust	ees, c	office	ars, key employees	,, highest		
Check this box if neither the organization noi	r any related or	ganızat	ion c	:omp	ens	ated a	any o	current officer, dire	ctor, or trustee		
(A) Name and Title	(B) Average hours per week (list any hours	perso	an on on is	ne bo both	t che ox, u h an or/tr	inless office ustee)	er)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
(1) JOHN GILROY ESQ	1 00	1 1		\Box			\Box				
CHAIRPERSON	1 00	×		X		'	'	0	0	0	
(2) CHRIS MEYER ESQ SECRETARY	1 00	_		x				0	0	0	
(3) CHRISTINA SCHATZ TREASURER	1 00	х		х				0	0	0	
(4) PATRICIA BAUMAN BOARD MEMBER	1 00	x						0	0	0	
(5) DARREN SANDOW BOARD MEMBER	1 00	х						0	0	0	
(6) BEN WYSKIDA BOARD MEMBER	1 00	х						0	0	0	
(7) SEAN THOMAS-BREITFIELD BOARD MEMBER	1 00	х						0	0	0	
(8) MICHELE LORD PRESIDENT	35 00 5 00			×				209,310	34,095	32,620	
(9) ERIN BALLARD CHIEF OPERATING OFFICER	34 00 6 00			x				152,490	27,450	4,033	
(10) NEERAJ NAGPAL CHIEF FINANCIAL OFFICER	31 00 9 00			x				71,518	15,902	15,236	
(11) SU LIM CHIEF FINANCIAL OFFICER	31 00			x				52,017	15,253	316	
(12) ANITA KHASHU PROGRAM DIRECTOR	9 00				×			179,057	0	14,273	
(13) LISA VERSACI PROGRAM DIRECTOR	40 00				×			171,379	0	20,582	

40 00 (14) ROBERT BRAY 187,103 Х 0 14.475 COMMUNICATIONS DIRECTOR 40 00 (15) HENRY DER Х 192,717 6,511 SR PROGRAM OFFICER 40 00 (16) RINI CHAKRABORTY Χ 178,593 6,137 SR PROGRAM OFFICER 40 00 (17) KUNG LI 178.685 Х 9,151 DIRECTOR OF RESEARCH

409 7th Street NW Washington, DC 20004

compensation from the organization ▶ 12

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

Page 8

CLE SULC MAISMALL	(A) Name and Title	(B) Average hours per week (list any hours	than o	one bo	οx, ι an of	ot che unle: fficer	eck moss ss pers r and a tee)	son	(D) Reportable compensation from the organization (W	eportable Reportable compensation rom the from related			ated of other sation the
1		below dotted	Individual trustee or director	In stitutional Trustee	Officer	key employee	Highest compensated emptovies	Former	2/1033-1113C)		y -	relat	ed
Total from continuation sheets to Part VII, Section A .	,	40 00			_	_	×	ig	146,35	59	0		14,148
c Total from continuation sheets to Part VII, Section A .													
c Total from continuation sheets to Part VII, Section A .													
c Total from continuation sheets to Part VII, Section A .					igspace	\perp	_						
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 ► 13 2 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a² If "Yes," complete Schedule J for such individual	c Total from continuation sheets to Part	VII, Section A			<u>. </u>	·	-	<u></u>	1,719,228	92,70	00		137,482
Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	2 Total number of individuals (including but	t not limited to t				/e) v	vho re	ceiv		00,000			
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								-	•	employee on	3	Yes	
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	organization and related organizations gr									the		Yes	
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) (B) (C) (Compensation Project Incompensation of Services (Compensation Project Management (Compensation Management (Compens	services rendered to the organization? If	"Yes," complete											No
from the organization Report compensation for the calendar year ending with or within the organization's tax year (A) (B) (C) Compensation Team Blackbird LLC Project Management 1,876,405 1161 Mission Street San Francisco, CA 94103 Social Transformation Project Inc Project Management 475,952 PO Box 17354 Boulder, CO 80308 Shout LLC Project Management 360,000 1122 East Pike Street Seattle, WA 98122 Chong & Koster LLC Project Management 242,498 1244 19th Street NW Washington, DC 20036	-		1							*100.000 -6			
Name and business address Team Blackbird LLC Project Management 1,876,405 1161 Mission Street San Francisco, CA 94103 Social Transformation Project Inc Project Management 475,952 PO Box 17354 Boulder, CO 80308 Shout LLC Project Management 360,000 1122 East Pike Street Seattle, WA 98122 Chong & Koster LLC Project Management 242,498 1244 19th Street NW Washington, DC 20036	, , ,	•									npen	sation	
Team Blackbird LLC 1161 Mission Street San Francisco, CA 94103 Social Transformation Project Inc Project Management 475,952 PO Box 17354 Boulder, CO 80308 Shout LLC Project Management 360,000 1122 East Pike Street Seattle, WA 98122 Chong & Koster LLC Project Management 242,498 1244 19th Street NW Washington, DC 20036	Name and h								Descr				
San Francisco, CA 94103 Social Transformation Project Inc PO Box 17354 Boulder, CO 80308 Shout LLC Project Management 360,000 1122 East Pike Street Seattle, WA 98122 Chong & Koster LLC Project Management 242,498 1244 19th Street NW Washington, DC 20036		JUSINESS address		_	_			_					
Social Transformation Project Inc PO Box 17354 Boulder, CO 80308 Shout LLC Project Management 360,000 1122 East Pike Street Seattle, WA 98122 Chong & Koster LLC Project Management 242,498 1244 19th Street NW Washington, DC 20036													
PO Box 17354 Boulder, CO 80308 Shout LLC Project Management 360,000 1122 East Pike Street Seattle, WA 98122 Chong & Koster LLC Project Management 242,498 1244 19th Street NW Washington, DC 20036					—			—	Project Mana	agement			475,952
Shout LLC Project Management 360,000 1122 East Pike Street Seattle, WA 98122 Chong & Koster LLC Project Management 242,498 1244 19th Street NW Washington, DC 20036													
1122 East Pike Street Seattle, WA 98122 Chong & Koster LLC Project Management 242,498 1244 19th Street NW Washington, DC 20036						—			Project Mana	 agement		 	360.000
Chong & Koster LLC Project Management 242,498 1244 19th Street NW Washington, DC 20036	1122 East Pike Street												- ,
1244 19th Street NW Washington, DC 20036									Project Mana			 	242 498
	1244 19th Street NW								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	iger.ie.ie			2.2,
					—			—	Project Mana	agement			240,000

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

Part		I Statement of	Revenue								rage 9
·	-	Check if Schedul		a resno	onse or note to a	ny line in thi	s Part VII	ī			
		Check in Schedul	ic o comains	и гозра	Shipe of Hote to a	(A Total re	.)	(E Relate exer func	B) ed or mpt tion	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	12	a Federated campaig	ns	1a				reve	nue		512-514
ats ats		b Membership dues				_					
rar om		•		1b		_					
. G		c Fundraising events		1c		_					
ifts ar /	1	d Related organizatio	ns	1d		_					
9 ∺	١ '	e Government grants (co	ontributions)	1e		_					
tributions, Gifts, Grants Other Similar Amounts	1	 All other contributions and similar amounts n 			E7 220 EE	2					
uti Jer		above		1f	57,238,55	_					
哥哥	!	9 Noncash contribution in lines 1a-1f \$		4 03	32,627						
Contributions, Giffs, Grants and Other Similar Amounts	١,	Total.Add lines 1a-1									
<u> </u>	_!"	i iotai.Add iiiles 1a-1		• •	1		238,552			1	
<u>ا ا</u>					Busine	ess Code					
3	_	Consulting Fees				900099		12,025	140,26		
υ Œ		Conference Fees PROGRAM REVENUE				900099		40,269 66,796	66,79		
Service Revenue		Publications/media sales	<			900099		4,863	4,86		
₹									<u> </u>		
Program	e										
rog		All other program se				723,953					
<u> </u>		Total.Add lines 2a-2i			<u> </u>						
		Investment income (ii similar amounts) .			interest, and other	er •	107,46	8			107,468
		Income from investme			ond proceeds	•					
	5	Royalties				•					
			(ı) Rea	I	(II) Personal						
	6a	Gross rents									
	h	Less rental expenses				\dashv					
	_	'									
	c	Rental income or (loss)									
	d	Net rental income o	r (loss)								
			(ı) Securi		(II) Other						+
	7a	Gross amount from sales of assets other than inventory	.,	931,068	` ,						
	b	Less cost or other basis and sales expenses	4,9	932,627							
	c	Gain or (loss)		-1,559							
	d	Net gain or (loss)		•	•	<u>- </u>	-1,55	9			-1,559
Other Revenue	8a	Gross income from f (not including \$ contributions reporte See Part IV, line 18	ed on line 1c)	of							
æ		Less direct expense		b							
ıer		: Net income or (loss)			ents 🕨						
p	9a	Gross income from g See Part IV, line 19		ies							
				a	1						
	b	Less direct expense	s	b							
		: Net income or (loss)		activit	ies >						
	10a	aGross sales of invent returns and allowand	tory, less ces	a							
	b	Less cost of goods s	sold	b							
	c	Net income or (loss)		ınvent	ory ►						
		Miscellaneous	Revenue		Business Code	e					
	11	.a									
	b)									
	c	:									
		All other revenue									
	e	Total. Add lines 11a	-11d		•						
	12	Total revenue. See	Instructions			.	58,068,41	4	723,953		0 105,909
							,,	-	,		0 105,909 Form 990 (2017)

Forr	n 990 (2017)				Page 10
	rt IX Statement of Functional Expenses sion 501(c)(3) and 501(c)(4) organizations must complete all co	lumns All other orga	nızatıons must comp	lete column (A)	
	Check if Schedule O contains a response or note to any	line in this Part IX .			🗹
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	26,600,281	26,600,281	3 '	
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, line 15 and 16	180,850	180,850		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	914,816	119,722	301,562	493,532
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	4,861,903	3,638,181	1,106,106	117,616
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	97,042	72,178	22,974	1,890
9	Other employee benefits	553,765	409,558	136,693	7,514
10	Payroll taxes	434,816	292,057	105,347	37,412
11	Fees for services (non-employees)				
ā	Management				
ŀ	Legal	50,494	35,000	15,494	
•	: Accounting	20,000	5,785	14,215	
	Lobbying				
•	Professional fundraising services See Part IV, line 17				
f	Investment management fees	154		154	
ç	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	8,787,269	8,610,772	176,497	
12	Advertising and promotion	5,895	3,409	2,486	
13	Office expenses	340,628	224,744	63,895	51,989
14	Information technology	159,738	80,236	63,528	15,974
15	Royalties				
16	Occupancy	523,688	278,872	201,186	43,630
	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings	1,343,756	1,230,812	45,558	67,386
	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	36,931	4,078	32,853	
23	Insurance	23,906	10,823	13,083	
	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
	a Miscellaneous	112,794	62,471	50,323	
	b Education and outreach	37,412	36,009	1,403	
	С				

45,086,138

41,895,838

2,353,357

836,943

Form **990** (2017)

ď

e All other expenses

25 Total functional expenses. Add lines 1 through 24e

26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

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Liabilities 22

Fund Balances

Assets or

Net

Intangible assets

Grants payable . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

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

Organizations that do not follow SFAS 117 (ASC 958),

check here > and complete lines 30 through 34.

Capital stock or trust principal, or current funds

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

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

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

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees,

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

Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and

12,309,252 16.206.887

4.397

34,839,820

787,787

430,000

1,217,787

650,123

32,971,910

33,622,033

34.839.820

Form **990** (2017)

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22 23

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31 32

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34

49.749

765.804

294,499

1,060,303

-30,132

20.669.889

20,639,757

21,700,060

21,700,060

Page **11**

	Beginning of year		End of y
Cash-non-interest-bearing	5,129,106	1	
Savings and temporary cash investments	10,636,115	2	

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

	barnings and comportary cash introduction.	,	_	, ,
3	Pledges and grants receivable, net	5,394,513	3	5,902,280
4	Accounts receivable, net	234,801	4	218,129
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			

"	Accounts receivable, net	234,001		
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
7	Notes and loans receivable, net		7	
ı				

S		contributing employers and sponsoring organizations voluntary employees' beneficiary organizations Part II of Schedule L	itions c	of section 501(c)(9)		6	
et	7	Notes and loans receivable, net				7	
Asse	8	Inventories for sale or use	entories for sale or use				
	9	Prepaid expenses and deferred charges			113,009	9	83,765
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	317,761			
	L .	Lana and the state of the state	4 A L	202 651	142 767	40-	115 110

et	7	Notes and loans receivable, net				7	
SS	8	Inventories for sale or use				8	
A	9	Prepaid expenses and deferred charges			113,009	9	83,765
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	317,761			
	b	Less accumulated depreciation	10 b	202,651	142,767	10 c	115,110
	11	Investments—publicly traded securities .				11	
	12	Investments—other securities See Part IV, line	11 .			12	
	13	Investments—program-related See Part IV, line	e 11			13	

☐ Cash ☑ Accrual ☐ Other

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

10

33,622,033

No

Νo

Nο

Form 990 (2017)

Yes

Yes

Yes

2a

2b

2c

3a

3b

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))

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

If the organization changed its method of accounting from a prior year or checked "Other," explain in

c 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?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

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

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

Financial Statements and Reporting

1 Accounting method used to prepare the Form 990

separate basis, consolidated basis, or both

Part XII

Schedule O

☐ Separate basis

consolidated basis, or both

Separate basis

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version:

EIN: 13-3191113

Form 990 (2017)

Form 990, Part III, Line 4a:

immigrants' rights organizations and leaders

Name: NEO PHILANTHROPY INC.

Four Freedoms Fund works toward full integration of immigrants as active participants in our democracy by supporting a robust local, state and national infrastructure of

Form 990, Part III, Line 4b:

State Infrastructure Fund supports the development of state-based networks of organizations that coordinate their programming to increase civic participation among

historically underrepresented communities and protect their right to vote

The Anti-Human Trafficking Fund embraces a human rights approach in response to human trafficking and supports organizations dedicated to finding systemic solutions to end trafficking in the U.S. by expanding access to human rights for affected populations

Form 990, Part III, Line 4c:

em	e GR/	APHIC pri	<u> 1t - DO NO</u>	T PROCESS	As Filed Data -			DLN: 9:	3493270002018
SCI	H ED	ULE A		Public (Charity Staturganization is a sect	ion 501(c)(3) o mpt charitable	organization or trust.	ort	2017
		the Treasury	▶ Info	ormation abou	► Attach to Form It Schedule A (Form www.irs.a			ıctions is at	Open to Public Inspection
Nam	e of th	he organiza THROPY INC	tion					Employer identific	ation number
-		D	Cara Barbilla	Charles Charle	(All		t - th t > 0	13-3191113	
	rt I organiz				us (All organization : it is (For lines 1 thro			see instructions.	
1			•		sociation of churches	5 ,	,	(A)(i).	
2		•			1)(A)(ii). (Attach Sch				
3						•	• •		
_	Ш	·	·	·	vice organization desc			•	
4		name, city,	and state _		ed in conjunction with				
5		(b)(1)(A)	(iv). (Comple	ete Part II)	t of a college or unive				ped in section 170
6		A federal, s	tate, or local	government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	\)(v).	
7	✓			mally receives (vi). (Complete	a substantial part of it Part II)	s support from a	governmental u	init or from the genera	al public described in
8		A communi	ty trust desci	ribed in section	170(b)(1)(A)(vi)	(Complete Part I	I)		
9					escribed in 170(b)(1) ee instructions Enter				ege or university or a
10		from activit	ies related to income and	its exempt fun unrelated busin	(1) more than 331/39 ctions—subject to cer ess taxable income (le implete Part III)	taın exceptions, a	and (2) no more	than 331/3% of its su	
11		An organiza	ation organize	ed and operated	exclusively to test fo	r public safety S	ee section 509	(a)(4).	
12		more public	ly supported	organizations of	d exclusively for the be described in section 5 the type of supporting	09(a)(1) or se d	ction 509(a)(2). See section 509(a	e purposes of one or)(3). Check the box
a		Type I. A so	supporting or n(s) the pow	ganızatıon oper	ated, supervised, or componit or elect a major	ontrolled by its s	upported organi	zation(s), typically by	
b		Type II. A manageme	supporting o nt of the sup	rganızatıon sup	ervised or controlled i				
С		Type III f	unctionally i	ntegrated. A s	supporting organizatio ons) You must com				ted with, its
d		Type III n	on-function integrated	ally integrate The organization	d. A supporting organi n generally must satis t IV, Sections A and	ization operated fy a distribution i	ın connection wi requirement and	th its supported orgar	
e		Check this	box if the org	anızatıon receiv	ved a written determing integrated supporting	nation from the II		pe I, Type II, Type II	functionally
f	Enter			l organizations	micegrated supporting	organization			
g	Provi	de the follow	ing informati	on about the su	ipported organization(s)			
	(i) N	Name of supp organization		(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the orgain your govern		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
Tota	ı								

instructions

(b)(1)(A)(ix)

Page 2

	(Complete only if you ch III. If the organization f						alıfy under Part —————
S	ection A. Public Support				T		Т
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	(or fiscal year beginning in) ► Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant") Tax revenues levied for the	41,190,902	51,239,616	38,892,928	37,899,323	57,238,55	2 226,461,321
	organization's benefit and either paid to or expended on its behalf						
_	The value of services or facilities furnished by a governmental unit to the organization without charge						
5	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly	41,190,902	51,239,616	38,892,928	37,899,323	57,238,55	2 226,461,321
	supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column						99,511,395
6	(f) Public support. Subtract line 5 from line 4						126,949,926
S	ection B. Total Support		•				
	Calendar year	(a)2013	(b) 2014	(c)2015	(d)2016	(e) 2017	(f)Total
-	(or fiscal year beginning in) ► Amounts from line 4	41,190,902	51,239,616	38,892,928	37,899,323	57,238,55	
8	Gross income from interest,	41,190,902	31,239,010	30,092,920	37,033,323	37,230,33	2 220,401,321
Ū	dividends, payments received on securities loans, rents, royalties and income from similar sources	140,510	163,813	139,787	116,499	107,46	8 668,077
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						227,129,398
12	Gross receipts from related activities,	etc (see instruction	ons)	L	L	12	2,155,114
13	First five years. If the Form 990 is for	or the organization	's first, second, thi	rd, fourth, or fifth	tax year as a sect	tion 501(c)(3) o	rganization,
	check this box and stop here						
S	ection C. Computation of Publi						
	Public support percentage for 2017 (li	• •	_	olumn (f))		14	 55 890 %
	Public support percentage for 2016 Sc					15	54 010 %
	33 1/3% support test—2017. If the			on line 13, and line	e 14 is 33 1/3% or		
	and stop here. The organization qual 33 1/3% support test—2016. If the	ifies as a publicly s	supported organiza	tion			▶ ☑
17a	box and stop here. The organization 10%-facts-and-circumstances tes is 10% or more, and if the organization Part VI how the organization meets	t—2017. If the order meets the "facts	ganization did not d -and-circumstance	check a box on line s" test, check this	box and stop he	re. Explain	▶ □
b	organization 10%-facts-and-circumstances te: 15 is 10% or more, and if the organi Explain in Part VI how the organization	zation meets the "i	facts-and-circumsta	ances" test, check	this box and stop	here.	▶⊔
	supported organization						▶ 🗆

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

Р	Support Schedule for						
	(Complete only if you cl the organization fails to						er Part II. If
Se	ection A. Public Support	quality under t	ine tests listed i	below, please co	ompiete Part II.,)	
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
_	(or fiscal year beginning in) ▶	(a) 2013	(0) 2014	(6) 2015	(4) 2016	(e) 2017	(I) Iotai
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
-	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
S	from line 6) ection B. Total Support						
	Calendar year						
	(or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9							
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
Ь	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c,						
14	11, and 12) First five years. If the Form 990 is for	l r the organization	l 's first, second, th	L urd, fourth, or fift	l lax vear as a sec	ction 501(c)(3) o	l rganization
	check this box and stop here			,,	,		▶ □
Se	ection C. Computation of Public S	Support Perce	ntage				
15	Public support percentage for 2017 (lin			column (f))		15	
16	Public support percentage from 2016 S	chedule A, Part II	II, line 15			16	
Se	ction D. Computation of Investr	nent Income	Percentage				
17	Investment income percentage for 201	7 (line 10c, colur	nn (f) divided by	lıne 13, column (f	·))	17	
18	Investment income percentage from 20	016 Schedule A, I	Part III, line 17			18	
	331/3% support tests—2017. If the	organization did n	ot check the box	on line 14, and lir	ne 15 is more than		e 17 is not
	more than 33 1/3%, check this box and s						ightharpoons
	33 1/3% support tests—2016. If the						. —
_	not more than 33 1/3%, check this box	-			· ·		ightharpoons
20	Private foundation. If the organization	-	-				ightharpoons

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

Yes

5b

5c

7

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1	İ	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)			
	in section 309(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a	İ	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the			
	determination	3b		

b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the	re that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If what controls the organization put in place to ensure such use zation not organized in the United States ("foreign supported organization")? If "Yes" and if you to I, answer (b) and (c) below 4a		
	determination	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?	a)(2)? If "Yes," describe in Part VI when and how the organization made the t to such organizations was used exclusively for section 170(c)(2)(B) purposes? the organization put in place to ensure such use zed in the United States ("foreign supported organization")? If "Yes" and if you and (c) below 4a		
I	f "Yes," explain in Part VI what controls the organization put in place to ensure such use			
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			

				3.
c	Did the organization ensure that all support to such organizations was used exclusively for section $170(c)(2)(B)$ purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	-		
		3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or		$\overline{}$	
	supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections			
	501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support			
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes		$\overline{}$	
		4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and			

			, ,	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
С	id the organization support any foreign supported organization that does not have an IRS determination under section O1(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all sup</i>			
	to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the			
	organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		

6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing		
	organization's supported organizations? If "Yes," provide detail in Part VI.	6	
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a		
	substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)		

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

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

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

organization's organizing document?

10a

answer line 10b below

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

the organization had excess business holdings)

8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"		
	complete Part I of Schedule L (Form 990 or 990-EZ)	8	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as		i

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defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"
provide detail in Part VI.
```

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

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

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

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

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

Pa	rt IV Supporting Organizations (continued)			-9
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year			
_		1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2		
5	ection C. Type II Supporting Organizations			
	cetion c. Type 11 Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the			
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
S	ection D. All Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		Yes	No
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
s	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct The organization satisfied the Activities Test. Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see		ctions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional)

Page 6

(B) Current Year

(optional)

Current Year

Schedule A (Form 990 or 990-F7) 2017

1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5

7

8

1 2

3

4 5

6

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

Portion of operating expenses paid or incurred for production or collection of gross 6 income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions)

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year Section B - Minimum Asset Amount 1 1a

Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year) a Average monthly value of securities **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors 2

(explain in detail in Part VI) 2 Acquisition indebtedness applicable to non-exempt use assets Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see 4 instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6

6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 8

3

7

Schedule A (Form 990 or 990-EZ) 2017

Section C - Distributable Amount

Minimum Asset Amount (add line 7 to line 6) Adjusted net income for prior year (from Section A, line 8, Column A)

Enter 85% of line 1

2

Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3

temporary reduction (see instructions)

instructions)

4 5 Income tax imposed in prior year

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency

3	Administrative expenses paid to accomplish exempt purposes of supported organizations	<u> </u>
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI) See instructions	
7	Total annual distributions. Add lines 1 through 6	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9	Distributable amount for 2017 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

8	Distributions to attentive supported organizations to wh details in Part VI) See instructions			
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			

ich the organization is respons	sive (provide	
(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
	(i)	(1) Underdistributions

9 Distributable amount for 2017 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			_
d From 2015			

e From 2016. f Total of lines 3a through e

d Excess from 2016. . . . e Excess from 2017.

instructions)

g Applied to underdistributions of prior years h Applied to 2017 distributable amount i Carryover from 2012 not applied (see

j Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2017 from Section D, line 7

a Applied to underdistributions of prior years **b** Applied to 2017 distributable amount

c Remainder Subtract lines 4a and 4b from 4		
5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions		
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions		
7 Excess distributions carryover to 2018. Add lines 3 ₁ and 4c		

lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions		
7 Excess distributions carryover to 2018. Add lines 3 ₁ and 4c		
8 Breakdown of line 7		
a Excess from 2013		
b Excess from 2014		
c Excess from 2015		

Schedule A (Form 990 or 990-EZ) (2017)

Additional Data

Software ID: Software Version:

EIN: 13-3191113

Name: NEO PHILANTHROPY INC

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

Facts And Circumstances Test

SCHEDULE C

(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

DLN: 93493270002018

Open to Public Inspection

separate political

Department of the Treasury ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at Internal Revenue Service www.irs.gov/form990. 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) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B

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

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

 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 the organization **Employer identification number** NEO PHILANTHROPY INC. 13-3191113 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A 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) Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 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 Was a correction made? 4a ☐ Yes ☐ No If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 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 (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a

				organization If none, enter -0-
1				
2				
3				
4				
5				
5				
or Paperwork Reduction Act Notice, see t	he instructions for Form 990 or 990-EZ.	Cat	No 500845 Schedule C	(Form 990 or 990-EZ) 2017

2a Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e)) Grassroots lobbying expenditures

	Form 5768 (election under section !		(a	<u>.</u>	(b)
	each "Yes" response on lines 1a through 11 below, provide vity	in Part IV a detailed description of the lobbying	Yes	No	Amo	unt
1	During the year, did the filing organization attempt to in including any attempt to influence public opinion on a le					
а	Volunteers?			No		
b	Paid staff or management (include compensation in exp	enses reported on lines 1c through 1i)?	Yes			
C	: Media advertisements?		Yes			100
d	Mailings to members, legislators, or the public?		Yes			13,78
е	Publications, or published or broadcast statements?		Yes			12
f	Grants to other organizations for lobbying purposes?			No		
g	Direct contact with legislators, their staffs, government	officials, or a legislative body?	Yes			41,64
h	n Rallies, demonstrations, seminars, conventions, speech	es, lectures, or any similar means?	Yes			2,500
i	Other activities?			No		
j						58,14
2a		· · · · ·		No		
b	•					
С	, , ,	-				
d		•				
Pa		npt under section 501(c)(4), section 501(c)	(5), o	r sectio	n	
	501(c)(6).				Yes	No
1	Were substantially all (90% or more) dues received non	deductible by members?			ι	
2	Did the organization make only in-house lobbying exper	•			2	
3	Did the organization agree to carry over lobbying and p	• •			3	
Pai		npt under section 501(c)(4), section 501(c)	(5), o	r sectio	n 501(d	(6)
		nes 1 and 2, are answered "No" OR (b) Part				, ,
	answered "Yes."					
1	Dues, assessments and similar amounts from members		1			
2	expenses for which the section 527(f) tax was pai		2a			
a b	Current year Carryover from last year		2b			
c	:		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) no	tices of nondeductible section 162(e) dues	3			
4		the amount on line 3, what portion of the excess does				
	expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			
P	Part IV Supplemental Information					
	ovide the descriptions required for Part I-A, line 1, Part I-B structions), and Part II-B, line 1 Also, complete this part fo		Part II-	-A, lines 1	and 2 (s	ee
	Return Reference	Explanation				
Part	t II-B, Line 1 Part II-B Line 1(c) So	cial media advertisements Part II-B Line 1(d) Emailed	or mar	led to		
	Congress/legislators t blasts and media cam statements regarding	o advance and advocate immigrants' rights and justice paigns. A portion of the work involved lobbying activitie alien minors and immigrants. Part II-B, Line 1(g). Direc ongressional staff, and offices regarding various legislat	Hired c s Part ct conta	onsultant II-B, Line icts and a	1(e) Me dvocates	dıa wıth

and immigrants, as well as issues on Vietnam war ordnance. Also hired consultants to conduct policy and advocacy work in global children's issues. A portion of the work involved lobbying activities. Part II-B, Line 1.

(h) Staff participated in a community event. A portion of the event involved lobbying activities

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

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

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. OMB No 1545-0047

DLN: 93493270002018

Open to Public

(Form 990)

▶ Attach to Form 990. Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Inspection Name of the organization **Employer identification number** NEO PHILANTHROPY INC 13-3191113 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Cat No 52283D

Schedule D (Form 990) 2017

Par	t III	Organizations Maintaining Co	llections of	Art, Histo	orical Ti	reası	ires, or	Other	Similar A	ssets (co.	ntınued)	
3		the organization's acquisition, accessic (check all that apply)	n, and other	records, che	ck any of	the fo	llowing t	hat are a	significant	use of its c	ollection	
а		Public exhibition		(ı 🗆	Loan	or excha	ange prog	rams			
b		Scholarly research		•		Othe	r					
С		Preservation for future generations										
4	Provid Part >	de a description of the organization's co	llections and	explain how	they furth	ner the	e organız	ation's ex	empt purp	ose in		
5		g the year, did the organization solicit o s to be sold to raise funds rather than t							ular	☐ Yes	□ r	No
Pa	rt IV	Escrow and Custodial Arrange Complete if the organization ans X, line 21.		on Form 9	90, Part	IV, lı	ne 9, or	reporte	ed an amo	unt on Fo	rm 990	, Part
1a		e organization an agent, trustee, custod ded on Form 990, Part X?	an or other ir	ntermediary	for contril	bution	s or othe	er assets	not	☐ Yes		No
ь	If "Ye	es," explain the arrangement in Part XII	I and complet	e the follow	ng table		[Amount		_
c		ining balance					İ	1c				
d	_	ions during the year					İ	1d				
е		butions during the year					Ì	1e				_
f		g balance					İ	1f				
2a		ne organization include an amount on Fi	orm 990 Part	Y line 21 f	or ecrow	or cu	J a labotei	ccount lis	hility2			_
b		s," explain the arrangement in Part XII.	•						,	Yes	ı ⊔ □	No
Pā	rt V	Endowment Funds. Complete										
		·	(a)Current		Prior yea				(d)Three ye		e)Four yea	ars back
1 a	Beginn	ing of year balance										
b	Contrib	outions										
c	Net inv	estment earnings, gains, and losses										
d	Grants	or scholarships										
e		expenditures for facilities ograms										
f	Admını	strative expenses										
g	End of	year balance										
2	Provid	de the estimated percentage of the curr	ent year end	balance (line	1g, colu	mn (a)) held a:	s				
а	Board	d designated or quasi-endowment 🕨										
Ь	Perma	anent endowment 🟲										
С	Temp	orarily restricted endowment >										
_	The p	ercentages on lines 2a, 2b, and 2c show	ıld equal 100	%								
3а		nere endowment funds not in the posse nization by	ssion of the o	rganization t	hat are h	eld an	d admını	stered fo	r the		Yes	No
	(i) ur	nrelated organizations								3a(i)	
b		elated organizations	 ns listed as re	· · · · equired on So	 chedule R	· ·				3a(i . 3b		
4	Descr	ribe in Part XIII the intended uses of the	organization	's endowme	nt funds						•	
Pa	rt VI	Land, Buildings, and Equipme										
		Complete if the organization ansi										
	Descri	ption of property (a) Cost or ot (investm		(b) Cost or ot	ner basis (d	otner)	(c) Acci	umulated c	lepreciation	(a)	Book val	ue
1a	Land											
b	Buildin	gs										
С	Leaseh	old improvements			13	37,361			69,914			67,447
d	Equipm	nent			18	30,400	1		132,737			47,663
	Other						1					
Tak	-I Add	lines 12 through 10 (Column (d) must a	aual Form OC	0 Davit V	Luman (D)	1	10/-))			1		445 440

Part VII	Saa Form GGII Darf Y lina 17				
	See Form 990, Part X, line 12. (a) Description of security or category (including name of security)		(b) Book value		Method of valuation end-of-year market value
	al derivatives				
	Tied equity interests				
A)					
(B)					
(C)					
(D)					
(E)					
F)					
(G)					
(H)					
	nn (b) must equal Form 990, Part X, col (B) line 12)	•			
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on (a) Description of investment		art IV, line		990, Part X, line 13. Method of valuation
4.	(a) bescription of investment	(0) 50	ok value		end-of-year market value
(1)					
(2)					
(3)					
4)					
5)					
6)					
(7)					
(8)					
(9) 「otal. (Colum	on (b) must equal Form 990, Part X, col (B) line 13) Other Assets. Complete if the organization answere	ed 'Yes' on Forr	n 990, Part	IV, line 11d See	Form 990, Part X, line 15
9) Total. (Column Part IX			n 990, Part	IV, line 11d See	Form 990, Part X, line 15 (b) Book value
9) Total. (Column Part IX 1)	Other Assets. Complete if the organization answere		m 990, Part	IV, line 11d See	
Fotal. (Column Part IX 1)	Other Assets. Complete if the organization answere		m 990, Part	IV, line 11d See	
Part IX 1) 2)	Other Assets. Complete if the organization answere		m 990, Part	IV, line 11d See	
(9) Fotal. (Column Part IX 1) 2) 3)	Other Assets. Complete if the organization answere		m 990, Part	IV, line 11d See	
(9) Fotal. (Column Part IX 1) 2) 3) 4)	Other Assets. Complete if the organization answere		n 990, Part	IV, line 11d See	
9) Total. (Column Part IX 1) 2) 3) 4) 5)	Other Assets. Complete if the organization answere		m 990, Part	IV, line 11d See	
(9) Fotal. (Column Part IX 1) 2) 3) 4) 5) 6)	Other Assets. Complete if the organization answere		m 990, Part	IV, line 11d See	
9) Fotal. (Column Part IX 1) 2) 3) 4) 5) 6) 7)	Other Assets. Complete if the organization answere		m 990, Part	IV, line 11d See	
9) Part IX 1) 2) 3) 4) 5) 6) 7) 8)	Other Assets. Complete if the organization answere (a) Description		m 990, Part	IV, line 11d See	(b) Book value
9) Fotal. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8)	Other Assets. Complete if the organization answere (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization	on .			(b) Book value
9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Total. (Column Part X	Other Assets. Complete if the organization answere (a) Description (b) must equal Form 990, Part X, col (B) line 15	on .			(b) Book value
(9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Total. (Column Part X	Other Assets. Complete if the organization answere (a) Description (a) Description (b) Must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization See Form 990, Part X, line 25.	on .	es' on Form		(b) Book value
9) Fotal. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X 1) Federal (Other Assets. Complete if the organization answere (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability	on .	es' on Form		(b) Book value
9) Fotal. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X 1) Federal (1)	Other Assets. Complete if the organization answere (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability	on .	es' on Form		(b) Book value
9) Fotal. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) Fotal. (Column Part X 1) Federal (1) 2) 3)	Other Assets. Complete if the organization answere (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability	on .	es' on Form		(b) Book value
9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Total. (Column Part X 1) Federal (1) 2) 3)	Other Assets. Complete if the organization answere (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability	on .	es' on Form		(b) Book value
9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Total. (Column Part X 1) Federal (1) 2) 3) 4)	Other Assets. Complete if the organization answere (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability	on .	es' on Form		(b) Book value
9) Total. (Column Part IX 1) 2) 3) 4) 5) 6) 7) 8) 9) Total. (Column Part X 1) Federal (2) 3) 4) 5)	Other Assets. Complete if the organization answere (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability	on .	es' on Form		(b) Book value
Fotal. (Column Part IX 1) 1) 2) 3) 4) 5) 66) 7) 88) 9) Fotal. (Column Part X 1) Federal (1) Federal (2) 3) 4) 5) 6)	Other Assets. Complete if the organization answere (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability	on .	es' on Form		(b) Book value
Fotal. (Column Part IX 1) 1) 2) 3) 4) 5) 6) 7) Part X 1. 1) Federal (1) 2) 3) 4) 5) 6) 7) 7) 7) 7) 7) 7) 7) 7) 7) 7) 7) 7) 7)	Other Assets. Complete if the organization answere (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability	on .	es' on Form		(b) Book value
(9) Fotal. (Column Part IX (1) (2) (3) (4) (5) (6) (7) (8) Fotal. (Column Part X 1.	Other Assets. Complete if the organization answere (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization See Form 990, Part X, line 25. (a) Description of liability	on .	es' on Form		(b) Book value

Page 4

58.068.414

58,068,414

58,068,414

45,086,138

45,086,138

45,086,138

Schedule D (Form 990) 2017

3

4c

1

2e

3

4c

5

2 Amounts included on line 1 but not on Form 990. Part VIII, line 12 Net unrealized gains (losses) on investments 2a

4a

4b

2a

2h

2c

2h h 2c

2d 2e

3

Amounts included on Form 990, Part VIII, line 12, but not on line 1 4

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

Add lines 4a and 4b

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

5 Part XII Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1

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

3

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

Explanation

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

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

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

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

Return Reference

Schedule D (Form 990) 2017

Part XI

4

b

5

Schedule D (Fo	orm 990) 2017	Page 5	
Part XIII	Supplemental Info	rmation (continued)	
Return Reference		Explanation	
			Schedule D (Form 990) 2017

efi	le GRAPHIC print - DO NO	T PROCESS	As Filed Data	-		DLN:	93493270002018	
	HEDULE F Sta	tement of	Activities	ies Outside the United States				
(FO	rm 990) ► Coi	mplete if the organ	lete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990.					
-	rtment of the Treasury	mation about Sche		and its instructions is at wi	vw.irs.gov	/form990.	Open to Public Inspection	
Nam	e of the organization					Employer iden	tification number	
NEO	PHILANTHROPY INC					13-3191113		
Pa	General Informatio Form 990, Part IV, II		s Outside the l	Jnited States. Comple	ete if the	organization a	nswered "Yes" to	
1	For grantmakers. Does the other assistance, the grantee to award the grants or assist	es' eligibility for t			_		✓ Yes □ No	
2	For grantmakers. Describe outside the United States		ganızatıon's proce	dures for monitoring the	use of it	s grants and oth	_ res _ ne	
3	Activites per Region (The follo	wing Part I, line 3	table can be dupli	cated if additional space is	needed))		
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	program spe	vity listed in (d) is a service, describe ecific type of ce(s) in region	(f) Total expenditures for and investments in region	
(1)	Europe (Including Iceland & Greenland) - Albania, Andorra, Austria, Belgium		0 0	PROGRAM GRANT			180,850	
(2)								
(3)								
(4)								
(5)								
	Sub-total Total from continuation sheets t Part I	to	0 0				180,850 0	
	Totals (add lines 3a and 3b)		0 0)			180,850	

Page 2

Schedule F (Form 990) 2017

Schedule F (Form 990) 2017

_	and EIN (ıf applıcable)		-	-	disbursement	assistance	assistance	(book, FMV, appraisal, other)
(1)		Europe (Including Iceland & Greenland) - Albania, Andorra, Austria, Belgium	Program grant	154,850	Wire			

(2)	Europe (Including	Program grant	26,000	Wire		
	Iceland & Greenland) -					
	Albania, Andorra,					
	Austria, Belgium					
1						

				1
(3)				
				1
				1
(4)				
				1

(3)				
(4)				

(4)	

exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-

(13) (14) (15) (16) (17) (18) Page **3**

Schedule F (Form 990) 2017

Part III can be	duplicated if addition	<u>onal space is r</u>	needed.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

(4) (5) (6) (7) (8) (9) (10)

(11) (12)

Sche	dule F (Form 990) 2017		Page 4
Pai	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)	Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	□Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)	Yes	✓ No
	Schedul	e F (Form 9	990) 2017

Schedule F (For	m 990) 2017 Page 5
Pi ai m	upplemental Information rovide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; mounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting ethod); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide my additional information (see instructions).
Return Reference	Explanation
Part I, Line 2	The Organization must submit a report detailing the program accomplishments and financial expenditures at the end of the grant period

efile GRAPHIC pr	int - DO	NOT PROCESS	As Filed Data -					DL	N: 934932700	002018	
Schedule I (Form 990) Department of the Treasury Internal Revenue Service	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. ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.									OMB No 1545-0047 2017 Open to Public Inspection	
Name of the organization NEO PHILANTHROPY IN	NC.							•	ation number		
		ation on Grants	and Assistance				13-3	191113			
Does the organize the selection crit Describe in Part Part II Grants at	zation mair teria used t IV the orga nd Other A	ntain records to sub to award the grants anization's procedur Assistance to Dom	stantiate the amount of or assistance? res for monitoring the u- nestic Organizations a	se of grant funds in the Ui	nited States	for the grants or assistant		Part IV, line	✓ Yes 21, for any recip	□ No	
that recei (a) Name and add organization or governmen	lress of	(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) Descr noncash as		(h) Purpose o or assistance	f grant	
(1) See Additional Dat	a										
(2)											
(3)											
(4)											
(5)											
(6)											
(7)											
(8)											
(9)											
(10)											
(11)											
(12)											
3 Enter total numb	ber of othe		d in the line 1 table .	s listed in the line 1 table				. >	edule I (Form 990	164 4	

(a) Type of grant or assista	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
)					
)					
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·)					
Part IV Supplemental 1	Information. Provide the i	information required in	n Part I, line 2; Part II!	I, column (b); and any other add	ditional information.
eturn Reference	Explanation				

NEO

Schedule I (Form 990) 2017

Additional Data

FUND

634 S SPRING STREET LOS ANGELES, CA 90065

Software ID:
Software Version:
EIN: 13-3191113

Name: NEO PHILANTHROPY INC

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

(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
CASA DE MARYLAND 8151 15TH AVENUE LANGLEY PARK, MD 20783	52-1372972	С3	1,619,000				Program Grant
MEXICAN AMERICAN LEGAL DEFENSE AND EDUCATIONAL	74-1563270	C3	1,150,000				Program Grant

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 37-1782220 867.030 Program Grant

 One Arizona
 37-1782220
 C3
 867,030
 Program Grant

 530 McDowell Rd Phoenix, AZ 85006
 VINITED WE DREAM NETWORK
 46-2216565
 C3
 745.250
 Program Grant

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

1900 L STREET NW WASHINGTON, DC 20036

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 20-1115618 546.313 STATE VOICES Program Grant 1225 I Street NW WASHINGTON, DC 20005

1225 I Street NW
WASHINGTON, DC 20005

EQUALITY ALLIANCE OF SAN 26-1712580 C3 545,000

Program Grant
DIEGO COUNTY

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

PO BOX 12266 SAN DIEGO, CA 92112

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 95-4539765 460.000 NATIONAL IMMIGRATION LAW Program Grant CENTER 3435 WILSHIRE BOULEVARD LOS ANGELES, CA 90010

450,000

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

Rethink Media Inc.

309 Shattuck Avenue Berkelev, CA 94704

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance FUND FOR THE CITY OF NEW 13-2612524 425.000 Program Grant YORK 121 Avenue of the Americas

416.600

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

NEW YORK, NY 10013

NEW YORK IMMIGRATION
COALITION

131 West 33rd Street NEW YORK, NY 10001

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Church World Service 13-4080201 400.000 Program Grant 475 Riverside Drive NEW YORK, NY 10115 ProGeorgia State Table Inc 46-1064042 385,949 Program Grant

1530 DeKalb Avenue Atlanta, GA 30307

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 27-1705920 380.000 Program Grant New Virgina Majority Education

Fund 3801 Mount Vernon Avenue Alexandria, VA 22305 FLORIDA IMMIGRANT 20-2123833 354.000 Program Grant COALITION

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

2800 BISCAYNE BLVD Miami, FL 33165

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

NEW VENTURE FUND	20-5806345	C3	325,000		Program Grant
Project Right Side 409 7th Street NW Washington, DC 20004	45-2450969	C4	350,000		Program Grant

1201 Connecticut Ave NW WASHINGTON, DC 20036

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 20-0121100 321.750 Program Grant TENNESSEE IMMIGRANT & REFUGEE RIGHTS COALITION 2195 NOLENSVILLE PIKE

315.000

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

NASHVILLE, TN 37211

COLORADO IMMIGRANT
RIGHTS COALITION

2525 W ALAMEDA AVENUE DENVER, CO 80219

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 94-3213100 303.000 TIDES CENTER Program Grant PO Box 29198 SAN FRANCISCO, CA 94129

IMMIGRANT LEGAL RESOURCE 94-2939540 300,000 Program Grant CENTER

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

1663 MISSION STREET SAN FRANCISCO, CA 94103

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance NATIONAL ECONOMIC & 73-1714118 300.000 Program Grant SOCIAL RIGHTS INITIATIVE 90 JOHN STREET NEW YORK, NY 10038

300.000

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

The Fair Food Standards

Council Inc 330 S Pineapple Ave Sarasota, FL 34236

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 11-3303986 298.500 NATIONAL Korean American Program Grant Service & Ed Consortium 4300 N California Avenue Chicago, IL 60618

293.000

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

BLUEPRINT NORTH CAROLINA

3739 National Drive Raleigh, NC 27612

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 47-5589196 292.794 End Rape On Campus Program Grant 1440 G Street NW WASHINGTON, DC 20005 Program Grant

THE NEW FLORIDA MAJORITY 45-3956785 275,000 EDUCATION FUND 8330 BISCAYNE BLVD

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

Miami, FL 33138

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 74-2493012 255.500 Program Grant BORDER NETWORK FOR HUMAN RIGHTS 2115 N PIEDRAS STREET EL PASO, TX 79930 38-3058190 252.500 Program Grant MICHIGAN ORGANIZING PROJECT

2227 Medford Road Ann Arbor, MI 48104

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance COLORADO CIVIC 02-0758897 240.588 Program Grant ENGAGEMENT ROUNDTABLE Program Grant

PO BOX 1620 DENVER, CO 80201 45-3697690 233.000 Puente Human Rights Movement

PO Box 21837 Phoenix, AZ 85036

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 35-2420942 225.800 Program Grant NATIONAL DOMESTIC WORKERS ALLIANCE 243 5th Avenue

223,500

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

NEW YORK, NY 10016

WESTERN ORGANIZATION OF RESOURCE COUNCILS EDUCATION PROJECT 220 S 27TH STREET

BILLINGS, MT 59101

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 23-7444497 220.000 Program Grant ARAB COMMUNITY CENTER FOR ECONOMIC AND SOCIAL SERVICES 2651 SAULINO COURT

215,600

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

DEARBORN, MI 48120

American Heart Association

7272 Greenville Avenue Dallas, TX 75231

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 20-4157357 208.000 Program Grant PROYECTO INMIGRANTE THANKS OF A TROME COLUMN OF THE

Grant EDUCATION FUND

PO Box 22063 Alexandria, VA 22304

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 88-0318655 206.000 Program Grant PROGRESSIVE LEADERSHIP ALLIANCE OF NEVADA

230 South Arlington Avenue RENO, NV 89501					
ASIAN AMERICANS ADVANCING JUSTICE-ASIAN LAW CAUCUS	94-2176139	C3	204,000		Program Grant

55 COLUMBUS AVENUE

SAN FRANCISCO, CA 94111

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Ethics Watch 81-1035738 201,421 Program Grant

Ethics Watch 81-1035738 C3 201,421 Program Grant 1630 Welton Street DENVER, CO 80206

ALLIANCE FOR JUSTICE 52-1009973 C3 200,000 Program Grant

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

11 DUPONT CIRCLE NW WASHINGTON, DC 20036

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 10-0008533 200.000 Program Grant Coalition To Abolish Slavery And Trafficking

5042 Wilshire Blvd LOS ANGELES, CA 90036

Pennsylvania Voice 81-1141448 200,000 Program Grant 1211 Chestnut Street Philadelphia, PA 19107

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 26-0688375 200.000 SOUTHERN COALITION FOR Program Grant SOCIAL JUSTICE 1415 WEST HIGHWAY 54 DURHAM, NC 27707

200,000

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

VOCES DE LA FRONTERA

1027 SOUTH 5TH STREET Milwaukee, WI 53204

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 27-3183754 200.000 WISCONSIN VOICES Program Grant 47-4352872 Program Grant

633 S Hawley Rd Milwaukee, WI 53214 ALABAMA COALITION FOR 195,000 IMMIGRANT JUSTICE UNITED

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

PO Box 19972 Birmingham, AL 35219

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 58-1581743 192.187 Program Grant 27-2577567 175,000 Program Grant

Grassroots Leadership Inc
2301 E Cesar Chavez St
Austin, TX 78702
Asian Americans Advancing

Justice Atlanta 6040 Unity Drive Norcross, GA 30071

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 47-0928008 169,754 Program Grant

MEDIA MATTERS FOR AMERICAL 455 Massachusetts Avenue NW WASHINGTON, DC 20001

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

SEATTLE, WA 98144

ONEAMERICA 20-0384893 168,000 Program Grant 1225 S WELLER STREET

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance La Union Del Pueblo Entero 93-1029197 C3 164.000 Program Grant

PO Box 188 San Juan, TX 78589			·		-
AMERICAN CIVIL LIBERTIES UNION FOUNDATION INC	13-6213516	C3	150,000		Program Grant

125 BROAD STREET

NEW YORK, NY 10004

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 13-3619000 150.000 Program Grant ASIAN AMERICANS ADVANCING JUSTICE -AAJCInc 1620 L Street NW Suite 1050 WASHINGTON, DC 20036 52-0888113 150.000 Program Grant CENTER FOR COMMUNITY

CHANGE

1536 U STREET NW Washington, DC 20009

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 20-3798596 150.000 FAITH IN PUBLIC LIFE INC Program Grant 1990 M Street NW WASHINGTON, DC 20036 Program Grant

63-0577439 150,000 GREATER BIRMINGHAM MINISTRIES 2304 12TH AVENUE NORTH

Birmingham, AL 35234

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 13-2722664 150.000 LATINOJUSTICE PRLDEF Program Grant 99 HUDSON STREET

99 HUDSON STREET
NEW YORK, NY 10013

OHIO ORGANIZING
COLLABORATIVE
25 E BOARDMAN ST

OHIO ORGANIZING
26-1601472
C3
150,000

Program Grant

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

YOUNGSTOWN, OH 44503

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 05-0544006 150.000 Program Grant TRANSGENDER LAW CENTER PO Box 70976 Oakland, CA 94612

150,000

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

86-0212873

Unidosus

1126 16th Street NW WASHINGTON, DC 20036

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

COMMUNITY INITIATIVES 354 Pine Street SAN FRANCISCO, CA 94104	94-3255070	C3	140,000		Program Grant
CAUSA Of OREGON	61-1590160	C3	132,700		Program Grant

700 MARION STREET NE SALEM, OR 97301

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 76-0809155 131.000 Program Grant GEORGIA LATINO ALLIANCE FOR HUMAN RIGHTS

7 Dunwoody Park Atlanta, GA 30338					
COALITION FOR HUMANE IMMIGRANT RIGHTS OF LOS ANGELES 2533 WEST 3RD STREET	95-4421521	СЗ	130,800		Program Grant

LOS ANGELES, CA 90057

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance ACLU Foundation Of Texas Inc 76-0343171 125.000 Program Grant PO Box 8306 Houston, TX 77288 DEMOCRACY NORTH 56-2271150 125,000 Program Grant

CAROLINA 1821 Green Street DURHAM, NC 27705

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance GLSEN INC 04-3234202 125.000 Program Grant 110 William Street

NEW YORK, NY 10038

NATIONAL DAY LABORER
ORGANIZING NETWORK
674 S La Fayette Park Place

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

LOS ANGELES, CA 90057

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 01-0869701 115.000 CENTER FOR CIVIC POLICY Program Grant PO BOX 27616 ALBUQUERQUE, NM 87125 81-0670151 115,000 Program Grant

EOUALITY FEDERATION INSTITUTE 818 SW 3rd Ave

PORTLAND, OR 97204

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 20-2798922 115.000 Program Grant FAMILIES FOR FREEDOM INC. 35 WEST 31ST STREET

Program Grant

112,035

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

NEW YORK, NY 10001

GetEOUAL Education Fund

1040 NW 3rd Avenue Miami, FL 33136 46-1708361

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 52-2216665 110.000 Program Grant South Asian American Leading Together 6930 Carroll Avenue Takoma Park, MD 20912 9 TO 5 NATIONAL ASSOC OF 34-1246311 100.000 Program Grant

WORKING WOMEN 501 Pulliman Street SW Atlanta, GA 30312

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 46-2465621 100.000 Program Grant Alliance For Youth Organizing 810 7th Street Program Grant

WASHINGTON, DC 20002

AMERICAN CIVIL LIBERTIES 85-0275276 C3 100,000

UNION OF NEW MEXICO FOUNDATION PO BOX 566

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

ALBUQUERQUE, NM 87103

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Asian American Legal Defense 13-2855641 100.000 Program Grant And Education Fund 99 HUDSON STREET NEW YORK, NY 10013 Asian Americans Advancing 95-3854152 100.000 Program Grant

Justice - LA 1145 Wilshire Blvd LOS ANGELES, CA 90017

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 04-3454684 100.000 Program Grant BALLOT INITIATIVE STRATEGY CENTER FOUNDATION 1815 Adams Mill Road WASHINGTON, DC 20009 Central Arizonans For A 26-1689914 100.000 Program Grant

Sustainable Economy 2401 N Central Ave Phoenix, AZ 85004

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Centro De Los Derechos Del 20-2588279 100.000 Program Grant Migrante Inc

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

221 S 2ND STREET Milwaukee, WI 53204

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance ColorofChangeorg Education 45-5569879 C3 100.000 Program Grant am Grant

Fund 1714 Franklın Street Oakland, CA 94612			·		
Florida Institute For Reform And Empowerment	27-4384675	C3	100,000		Program

PO Box 533732 Orlando, FL 32853

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Global Workers Justice Alliance 72-1597864 100.000 Program Grant 789 Washington Ave Brooklyn, NY 11238 TILLINOIS COALITION FOR 36-3783551 100,000 Program Grant IMMIGRANT AND REFUGEE RIGHT

55 EAST JACKSON BLVD Chicago, IL 60604

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 52-0799246 100.000 Program Grant LAWYERS' COMMITTEE FOR CIVIL RIGHTS UNDER LAW 1401 NEW YORK AVENUE NW WASHINGTON, DC 20005

Program Grant

100,000

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

WASHINGTON, DC 20005
NEBRASKA APPLESEED
CENTER FOR LAW IN THE
PUBLIC INTEREST
941 SOUTH O STREET

LINCOLN, NE 68508

47-0798343

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

New Era Colorado Foundation	26-1389272	C3	100,000		Program
PO Box 181153					
DENVER, CO 80218					

Cambridge, MA 02140

NONPROFIT VOTE 20-4568862 100,000 Program Grant 2464 Massachusetts Avenue

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance OLF Education Fund 27-1275857 100.000 Program Grant 45-3858268 100,000 Program Grant

OLL Education Fana					
411 Bellamah Avenue NW					
ALBUQUERQUE, NM 87102					
Participatory Budgeting Project Inc	4				

540 President Street Brooklyn, NY 11215

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

PICO Action Fund 110 Maryland Avenue WASHINGTON, DC 20002	45-4434103	C4	100,000		Program Grant
ROCK THE VOTE	02-0767157	C3	100,000		Program Grant

1001 Connecticut Avenue NW WASHINGTON, DC 20036

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance 46-1349584 C3 100.000 Program Grant The Human Trafficking Pro Bono Legal Center 1030 15th Street NW Washington, DC 20005 University Of California 95-6006143 C3 100,000 Program Grant Williams Institute UCLA School of Law

385 Charles E Young Drive East

Los Angeles, CA 90095

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 13-3442022 100.000 Program Grant URBAN JUSTICE CENTER

Program Grant

100,000

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

40 RECTOR STREET
NEW YORK, NY 10006
VIDA Legal Assistance Inc

27112 S Dixie Hwy Naranja, FL 33032 27-5325859

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 47-5354509 100.000 Program Grant Virginia Civic Engagement

Table PO Box 8586 Richmond, VA 23226 WORKING AMERICA 20-2035052 100.000 Program Grant EDUCATION FUND

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

815 16TH STREET NW WASHINGTON, DC 20006

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance NEW ORLEANS WORKERS' 33-1167415 85.000 Program Grant CENTER FOR RACIAL JUSTICE 217 N PRIEUR STREET New Orleans, LA 70112 81-0865943 85.000 Program Grant State Engagement Fund

1575 Eye Street NW WASHINGTON, DC 20005

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 06-1521179 82.000 Program Grant PRO BONO NET INC 151 W 30TH STREET NEW YORK, NY 10001 MASSACHUSETTS IMMIGRANT 22-3115048 81.000 Program Grant & REFUGEE ADVOCACY

COALITION INC 105 CHAUNCY STREET BOSTON, MA 02111

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 23-1352010 78.700 Program Grant AMERICAN FRIENDS SERVICE COMMITTEE 89 Market Street Newark, NJ 07102 Regents Of The University Of 94-3067788 77.000 Program Grant

California

9500 Gilman Drive 0934 La Jolla, CA 92093

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 52-2313694 75.000 Program Grant American Constitution Society For Law And Policy 1333 H STREET NW WASHINGTON, DC 20005

Program Grant

75.000

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

ARKANSAS UNITED

PO BOX 9296

COMMUNITY COALITION

FAYETTEVILLE, AR 72703

27-5271968

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Campaign Legal Center Inc 04-3608387 75.000 Program Grant 1411 K Street NW WASHINGTON, DC 20005 74-2898197 75,000 Program Grant

Center For Public Policy Priorities 7020 Easy Wind Drive

Austin, TX 78752

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 93-1181863 75.000 Program Grant COMMUNITIES UNITED FOR

PEOPLE PO BOX 33167 PORTLAND, OR 97292 38-3652741 75.000 Drum-Desis Rising Up And

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

Jackson Heights, NY 11372

Program Grant Moving Inc 72-18 Roosevelt Avenue

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Equality California Institute 68-0438008 75.000 Program Grant 202 W 1st Street LOS ANGELES, CA 90012 MISSISSIPPI IMMIGRANTS 94-3425290 75,000 Program Grant

RIGHTS ALLIANCE PO BOX 1104

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

JACKSON, MS 39215

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 84-0611876 75.000 Native American Rights Fund Program Grant 1506 Broadway Boulder, CO 80302 Program Grant

PENNSYLVANIA IMMIGRATION 83-0379943 75,000 & CITIZENSHIP COALITION

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

2100 ARCH STREET Philadelphia, PA 19103

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 52-1161473 75.000 SOUTHEAST ASIA RESOURCE Program Grant

ACTION CENTER 1628 16TH STREET NW WASHINGTON, DC 2000930991 THE MANAGEMENT CENTER 20-5197607 75,000 Program Grant

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

1920 L Street NW WASHINGTON, DC 20036

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance MICA Group Inc 82-1503506 72.909 Program Grant 5301 Springlake Way Balitmore, MD 21212 GRANTMAKERS CONCERNED 20-2559651 70,000 Program Grant WITH IMMIGRANTS &

REFUGEES PO Box 1100 Sebastopol, CA 95473

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Central American Resource 95-3867724 65.000 Program Grant Center CARECEN of California 2845 W 7th Street Los Angeles, CA 90005 13-1776711 65.000 Program Grant NATIONAL IMMIGRATION

FORUM 50 F STREET NW WASHINGTON, DC 20001

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 81-0472423 60.000 MONTANA HUMAN RIGHTS Program Grant NETWORK

Program Grant

60.000

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

PO Box 1509	
HELENA, MT	59624
Urban Affairs	Coalition

1207 Chestnut Street Philadelphia, PA 19107 23-7046393

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 30-0044814 59.445 The Praxis Project Program Grant 1001 Connecticut Ave NW

WASHINGTON, DC 20036 Committee Against Anti Asian 13-3526938 55,000 Program Grant Violence

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

55 Hester Street NEW YORK, NY 10002

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 02-0565840 50.000 Program Grant ARIZONA ADVOCACY FOUNDATION INC 1 N 1st Street Phoenix, AZ 85004 CENTER FOR AMERICAN 30-0126510 50.000 Program Grant

PROGRESS 1333 H STREET NW WASHINGTON, DC 20005

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Forward Montana Foundation 26-2075145 50.000 Program Grant 1535 Wyoming Street Missoula, MT 59801

Program Grant

50,000

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

GAY & LESBIAN VICTORY INSTITUTE

1133 15TH STREET NW WASHINGTON, DC 20005 52-1835268

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Texas Association Of Business 74-3021673 50,000 Program Grant

& Chambers of Commerce Foundation 1209 Nueces Street Austin, TX 78701					
ASIAN PACIFIC ENVIRONMENTAL NETWORK	94-3261846	C3	45,000		Program Grant

426 17TH STREET Oakland, CA 94612

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 11-3580935 45,000 Program Grant Chhaya Community

Development Corporation 37-43 77th Street Jackson Heights, NY 11372					
Chinese Progressive Association 1042 Grant Avenue	23-7404756	C3	45,000		Program Grant

SAN FRANCISCO, CA 941335025

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance EMGAGE Foundation Inc. 26-1441032 45.000 Program Grant

1250 I Street NW WASHINGTON, DC 20005

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

LOS ANGELES, CA 90019

KOREAN RESOURCE CENTER 95-3879699 45,000 Program Grant 900 Crenshaw Blvd

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 11-3344389 45.000 Program Grant

Program Grant

MAKE THE ROAD NEW YORK 11-3344389 C3 45,000 Prog 301 GROVE STREET Brooklyn, NY 11237

45,000

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

32-0419998

Win Win Network

1402 Third Avenue SEATTLE, WA 98101

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 74-3238362 44.160 WIN Minnesota Program Grant 1600 University Avenue W

St Paul, MN 55104

Campaign For Tobacco-Free Kids Program Grant Kids 1400 I Street NW

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

WASHINGTON, DC 20005

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 20-8720291 35.000 PROGRESSNOW EDUCATION Program Grant 215 S Washington Square Lansing, MI 48933 Social And Environmental 95-4116679 33,386 Program Grant Entrepreneurs 23532 Calabasas Road

Calabasas, CA 91302

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Asian And Pacific Islander 26-4514751 30.000 Program Grant American Vote-Michigan Program Grant

PO Box 44613 Detroit, MI 48244 Asian Community Development 47-2438087 30.000 Council

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

2610 S Jones Blvd Las Vegas, NV 89146

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Filipino Advocates For Justice 94-2218907 30.000 Program Grant 310 8th Street

30,000

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

Oakland, CA 94607 Freedom Inc

1810 South Park Street Madison, WI 53711 43-2023570

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 52-1306678 30.000 Organization Of Chinese-Program Grant Americans Of Greater Houston 9800 Town Park Houston, TX 77036

30.000

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

Southeast Asian Coalition

4520 N Tryon Street Charlotte, NC 28213 46-0786773

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 48-1126805 30.000 SUNFLOWER COMMUNITY Program Grant ACTION INC 1407 N TOPEKA STREET WICHITA, KS 67214 The Hana Center 36-2746468 30.000 Program Grant

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

4300 N California Avenue Chicago, IL 60618

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 87-0556679 30.000 Program Grant The National Tongan American Society Inc 3007 South West Temple Salt Lake City, UT 84115

30.000

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

33-1143213

Vietnamese American Young Leaders Assoc of New Orleans 13235 Chef Menteur Hwy New Orleans, LA 70129

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

Chinese For Affirmative Action 17 Walter U Lum Place SAN FRANCISCO, CA 94108	94-2161304	C3	29,872		Program Grant
NONPROFIT FINANCE FUND	13-3238657	C3	27,000		Program Grant

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

5 Hanover Square NEW YORK, NY 10004

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 81-5447067 25.000 Fair Elections Center Program Grant 1825 K Street NW WASHINGTON, DC 20006 Massachusetts Institute Of 04-2103594 25,000 Program Grant Technology

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

77 Massachusetts Avenue Cambridge, MA 02139

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance National Partnership For New 45-3419142 25.000 Program Grant Americans 1818 S Paulina Street Chicago, IL 60608 Nebraska Civic Engagement 81-2233379 25.000 Program Grant Table

211 N 14th Street LINCOLN, NE 68508

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 47-4101801 21.900 Program Grant

Fund For A Healthier Colorado 1536 Wynkoop Street DENVER, CO 80202

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

WASHINGTON, DC 20045

AMERICAN FORUM 52-1281134 20,000 Program Grant 954 National Press Building

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 99-0335935 17.225 FAITH ACTION FOR Program Grant COMMUNITY EQUITY PO BOX 235950 Honolulu, HI 96823

15.000

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

Neighborhood Funders Group

436 14th Street Oakland, CA 94612 06-1368627

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 94-3214166 10.000 COMMON COUNSEL Program Grant FOUNDATION 1624 Franklin Street Oakland, CA 94612 New Voices Pittsburgh Inc 27-0570462 10.000 Program Grant

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

234 N Whitefield Street Pittsburgh, PA 15206

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance other) or government assistance Asylum Access 20-3642040 5.000 Program Grant 1611 Telegraph Avenue

5,000

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

Oakland, CA 94612

2439 Maryland Avenue Baltimore, MD 21218 52-1120778

BUILD Inc

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Forum For Equality Foundation 72-1269734 5.000 Program Grant 4035 Washington Ave

163,433

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

New Orleans, LA 70125

MEDIA MATTERS FOR AMERICA

455 Massachusetts Avenue NW WASHINGTON, DC 20001

47-0928008

Compensation Information Compensation Information
Part I Questions Regarding Compensation 1a Check the appropiate box(es) if the organization provided any of the following to or for a personal residence Travel for companions Part III to provide any relevant information and gross-up payments Health or social club dues or initiation fees Discretionary spending account Part III to explain or provision of all of the expenses described above? If "No," complete Part III to explain or provision of all of the expenses described above? If "No," complete Part III to explain or provision of all of the expenses described above? If "No," complete Part III to explain or provision of all of the expenses described above? If "No," complete Part III to explain a line tax or provision of all of the expenses described above? If "No," complete Part III to explain or provision of all of the expenses described above? If "No," complete Part III to explain and increase including the CEO/Executive Director, regarding the items checked in line 1a? 3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization in Part III to Part III to explain in Part III to Part III to explain in Part III to Part III to explain in Part III to Part III to explain in Part III to Part III to explain in Part III to Part III to explain in Part III to Part III to explain in Part III to Part III to explain in Part III to Part III to explain in Part III to Part III to explain in Part III to Part III to explain in Part III to Part III II III III III III III III III II
Part I Questions Regarding Compensation Name of the organization NEO PHILANTHROPY INC Part I Questions Regarding Compensation 1a 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 First-class or charter travel
Part I Questions Regarding Compensation Name of the organization NEO PHILANTHROPY INC Part I Questions Regarding Compensation 1a 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 First-class or charter travel
Name of the organization NEO PHILANTHROPY INC Name of the organization NEO PHILANTHROPY INC Section Regarding Compensation
Name of the organization NEO PHILANTHROPY INC Part I Questions Regarding Compensation
Part I Questions Regarding Compensation Yes No 1a 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 First-class or charter travel
Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Personal services (e.g., maid, chauffeur, chef) If any of the boxes in 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 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? Yes No Yes No Yes No Yes No Yes No Yes No Payments or a personal issendence or residence or personal use Payments for business use of personal residence or personal residence or personal residence or personal services (e.g., maid, chauffeur, chef) If any of the boxes in 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 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? Indicate which, if any, of the following the filing 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
Check the appropiate 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 First-class or charter travel
990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel
Travel for companions Travel for companions Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e g , maid, chauffeur, chef) If any of the boxes in 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 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? Indicate which, if any, of the following the filing 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
Tax idemnification and gross-up payments
Discretionary spending account Personal services (e g , maid, chauffeur, chef) b If any of the boxes in 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 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? Indicate which, if any, of the following the filing 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
b If any of the boxes in 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, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 3 Indicate which, if any, of the following the filing 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
or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? Indicate which, if any, of the following the filing 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
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Indicate which, if any, of the following the filing 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
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
used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III
☐ Compensation committee ☐ Written employment contract
☐ Compensation committee ☐ Written employment contract ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
☐ Independent compensation consultant ☑ Compensation survey or study
Form 990 of other organizations Approval by the board or compensation committee
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? 4b No
c Participate in, or receive payment from, an equity-based compensation arrangement? 4c No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III
Only 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? 5b No
If "Yes," on line 5a or 5b, describe in Part III
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
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 No
Were any amounts reported on Form 990, Part VII, paid or accured 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)? For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50053T Schedule 1 (Form 990) 201

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

For each individual whose instructions, on row (ii) I Note. The sum of column	Do no	ot list any individuals that	ted on Schedule J, report are not listed on Form 9 dividual must equal the to	90, Part VII				t individual
(A) Name and Title		,,,,	of W-2 and/or 1099-MIS (ii) Bonus & Incentive 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
1 MICHELE LORD PRESIDENT	(i)	209,310	0	0	6,411	21,316	237,037	0
1123122111	(ii)	34,095	0	0	1,131	3,762	38,988	0
2 ERIN BALLARD CHIEF OPERATING OFFICER	(i)	152,490	0	0	1,579	1,849	155,918	0
CHIEF OF EIGHTING OFFICER	(ii)	27,450	0	0	279	326	28,055	0
3 ANITA KHASHU PROGRAM DIRECTOR	(i)	179,057	0	0	5,457	8,816	193,330	0
TROGRAM BIRECTOR	(ii)	0	0	0	0	0	0	0
4 LISA VERSACI PROGRAM DIRECTOR	(i)	171,379	0	0	1,268	19,314	191,961	0
TROOKAN DIRECTOR	(ii)	0	0	0	0	0	0	0
5 ROBERT BRAY COMMUNICATIONS	(i)	187,103	0	0	5,714	8,761	201,578	0
DIRECTOR	(ii)	0	0	0	0	0	0	0
6 HENRY DER SR PROGRAM OFFICER	(i)	192,717	0	0	5,818	693	199,228	0
SK PROGRAM OFFICER	(ii)	0	0	0	0	0	0	0
7 RINI CHAKRABORTY SR PROGRAM OFFICER	(i)	178,593	0	0	5,358	779	184,730	0
SK PROGRAM OFFICER	(ii)	0	0	0	0	0	0	0
8 KUNG LI DIRECTOR OF RESEARCH	(i)	178,685	0	0	3,150	6,001	187,836	0
DIRECTOR OF RESEARCH	(ii)	0	0	0	0	0	0	0
9 ERIC MARSHALL PROGRAM DIRECTOR	(i)	146,359	0	0	4,425	9,723	160,507	0
PROGRAM DIRECTOR	(ii)	0	0	0	0	0	0	0
							Schedule	J (Form 990) 2017

Schedule J (Form 990) 2017 Page 3 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 Return Reference Explanation

Schedule 1 (Form 990) 2017

(11)

(1)

(1)

(11)

178,593

178,685

146,359

Additional Data	3													
			Software ID:											
			Software Version:											
			EIN:	13-3191113										
			Name:	NEO PHILANTHROPY	INC									
Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees														
(A) Name and Title		• ,	of W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in						
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990						
1MICHELE LORD PRESIDENT	(1)	209,310	0	0	6,411	21,316	237,037	0						
	(11)	34,095	0	0	1,131	3,762	38,988	0						
1ERIN BALLARD CHIEF OPERATING OFFICER	(1)	152,490	0	0	1,579	1,849	155,918	0						
	(11)	27,450	0	0	279	326	28,055	0						
2ANITA KHASHU PROGRAM DIRECTOR	(1)	179,057	0	0	5,457	8,816	193,330	0						
	(11)	0	0	0	0	0	0	0						
3 LISA VERSACI PROGRAM DIRECTOR	(1)	171,379	0	0	1,268	19,314	191,961	0						
	(11)	0	0	0	0	0	0	0						
4ROBERT BRAY COMMUNICATIONS	(1)	187,103	0	0	5,714	8,761	201,578	0						
DIRECTOR	(11)	0	0	0	0	0	0	0						
5HENRY DER SR PROGRAM OFFICER	(1)	192,717	0	0	5,818	693	199,228	0						
4														

779

6,001

9,723

184,730

187,836

160,507

5,358

3,150

4,425

6RINI CHAKRABORTY

SR PROGRAM OFFICER

7KUNG LI DIRECTOR OF RESEARCH

8ERIC MARSHALL PROGRAM DIRECTOR

efil	e GRAPHIC pr	int - DO NOT PR	OCESS	As Filed Data -		DLN:	9349327	0002	018
	EDULE M			loncash Contri	hutions		OMB No 1	.545-0	047
(For	m 990)		1	ioncasii contin	Dutions		20	17	7
		▶Complete if the	organizati	ons answered "Yes" on Fo	orm 990, Part IV, lines 2	9 or 30.	20	1/	,
		► Attach to Form							
•	ment of the Treasury	▶Information abo	ut Schedu	le M (Form 990) and its in	nstructions is at <u>www.irs</u>	s.gov/form990	Open to		
	of the organizat	lon				Employer identi			
	HILANTHROPY INC								
Pa	rt I Types	of Property				13-3191113			
Fa	Types (or Property	(2)	(b)	(c)		(d)		
			(a) Check if applicable	Number of contributions or	Noncash contribution amounts reported on	Method noncash cor	of determi		-c
			uppsubs		Form 990, Part VIII, line 1g	1101124511 551			
1	Art—Works of ar	t			,				
2	Art—Historical tr	easures .							
	Art—Fractional in								
	Books and public								
5	Clothing and hou goods								
6	Cars and other v								
7	Boats and planes								
8	Intellectual prope	erty							
9	Securities—Publi	cly traded .	Х	13	4,932,627	Fair Value			
10	Securities—Close	ely held stock .							
11	Securities—Partr	1 ' '							
12	Securities—Misce								
13	Qualified conserv								
	contribution—Hi structures .	istoric							
14	Qualified conserv								
	contribution—Of								
	Real estate—Res								
16	Real estate—Cor								
17	Real estate—Oth								
18 19	Collectibles . Food inventory								
20	Drugs and medic								
21	Taxidermy .								
	Historical artifact	ts							
23	Scientific specim	ens							
	Archeological art								
25	Other ▶ ()							
	Other ▶ (
	Other ► (•							
28	Other ▶ ()				ļ.,			
29				ition during the tax year for 3, Part IV, Donee Acknowled		29			
								Yes	No
30a				contribution any property r					
				e of the initial contribution, a		be used for exem	.		ļ <u>.</u> .
b	If "Yes," describ	e the arrangement II	n Part II				30a		No
31	Does the organi	zation have a gift ac	ceptance p	olicy that requires the reviev	v of any nonstandard contri	butions?	31		No
32a		zation hire or use th		or related organizations to so	olicit, process, or sell nonca	sh	32a		
b	If "Yes," describ						32d		No_
	•		amount in	column (c) for a type of pro	perty for which column (a)	ıs checked,			
	describe in Part			, , , , , , , , , , , , , , , , , , ,		,			
For D		on Act Notice, see the	Instruction	s for Form 990	Cat No 512271	Schadi	le M (Form	000)	(2017)

Schedule M (Fo	rm 990) (2017)	Page 2						
Part II	Supplemental Info	rmation.						
	Provide the informat	ion required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part						
	I, column (b), the nu	mber of contributions, the number of items received, or a combination of both. Also complet						
	this part for any add	itional information.						
Ret	urn Reference	Explanation						
		Schedule M (Form 990) (2017)						

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SCHEDUL	I .	Supplemental Information to Form 9		OMB № 1545-0047 2017					
EZ)	► Attach to Form 990 or 990-EZ. ► Information about Schedule O (Form 990 or 990-EZ) and its instructions is a www.irs.gov/form990.								
Internal Revenue Sa Name of the org NEO PHILANTHRO		www.msigov/,tormssor	Employer ider	Inspection number					
Return	e O, Sup	plemental Information Explanation							
Form 990, Part VI, Section B, line 11b	A copy of	f the 990 is sent to the Board for review prior to filing							

Return Explanation
Reference

990 Schedule O, Supplemental Information

Form 990,
Part VI,
Section B,
Inne 12c

The Board regularly monitors and enforces the Conflict of Interest Policy Directors, offi
cers and key personnel are required to disclose all possible conflicts immediately in writ
ing to the Board The Board reviews such matters and acts in accordance with the policy

Return Explanation
Reference

990 Schedule O, Supplemental Information

by the Board

Form 990,
Part VI,
Section B,
Inne 15

The Board of Directors hires the President, sets executive compensation and annually revie
ws the reasonableness of the President's compensation and the compensation of other manage
ment and key employees of the organization through comparison to executives of similar org
anizations. The President approves the salaries of all other employees, which is ratified.

Return Explanation
Reference

990 Schedule O, Supplemental Information

Form 990,
Part VI,
Section C,
line 19

Return Explanation
Reference

Form 990,
Part IX, line
11g
Consultants Program service expenses 8,607,286 Management and general expenses 175,625
Fundraising expenses 0 Total expenses 8,782,911 Public relations and website Program se
rvice expenses 3,486 Management and general expenses 872 Fundraising expenses 0 Total e
xpenses 4,358

990 Schedule O, Supplemental Information

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493270002018 OMB No 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships** (Form 990) ► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** NEO PHILANTHROPY INC 13-3191113 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I (c) Legal domicile (state (f) Direct controlling (a)
Name, address, and EIN (if applicable) of disregarded entity Primary activity Total income End-of-year assets

		, ,	or foreigr	country)			,		ent	city	
Part II Identification of Related Tax-Exempt Organization related tax-exempt organizations during the tax year.	s Complete if the o	rganızatıon	answered	"Yes" on Fo	orm 990	, Part IV,	line 34 bed	cause it ha	ad one or	more	
(a) Name, address, and EIN of related organization	(b) Primary activity	Legal dor	(c) nicile (state in country)	(d) Exempt Code	e section	Public cha	e) arity status 501(c)(3))	Direct c	(f) controlling ntity	Section (13) co ent	512(b)
										Yes	No
(1)NEO Philanthropy Action Fund Inc 45 West 36th Street New York, NY 10018 80-0444461	Promote social welfare advance social justice and advocate policy reform		NY	501(c)(4)							No

(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		Disprop alloca	tions?	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gener mana partr	ral or Figing ((k) Percent owners
								Yes	No		Yes	No	
												\perp	
												\top	
												+	
												\perp	
Identification of Related Organizates because it had one or more related o						ation answ	vered "Yes	" on Fo	orm 99	90, Part IV,	line .	34	
(a) Name, address, and EIN of related organization	(b) Primary activity	L	(c) egal micile or foreign	Direct	(d) controlling Type entity (C co	(e) e of entity rp, S corp, r trust)	(f) Share of total Income		(g) of end-o year assets	of- Percei owne	ntage	[(13	(ı) tion 5) cont entity
												l v	es
		со	untry)									<u>_</u>	
		Со	untry)										
		со	untry)									+	
		со	untry)									<u>+</u>	
		со	untry)										
		со	untry)									 - - -	
		со	untry)									 - - -	

Schedule R (Form 990) 2017			Pa	ge 3
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			Yes	No
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?			\neg	
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity		1a	\neg	No
b Gift, grant, or capital contribution to related organization(s)	. •	1b	\neg	No
c Gift, grant, or capital contribution from related organization(s)		1c		No
d Loans or loan guarantees to or for related organization(s)		1d	\neg	No
e Loans or loan guarantees by related organization(s)		1e		No
f Dividends from related organization(s)		1f		No
g Sale of assets to related organization(s)		1g	\dashv	No
h Purchase of assets from related organization(s)		1h	\dashv	No
i Exchange of assets with related organization(s)		1i	\dashv	No
j Lease of facilities, equipment, or other assets to related organization(s)		1j	Yes	
k Lease of facilities, equipment, or other assets from related organization(s)		1k		No
Performance of services or membership or fundraising solicitations for related organization(s)		11	\dashv	No
m Performance of services or membership or fundraising solicitations by related organization(s)		1m	\dashv	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		1n	\dashv	No
Sharing of paid employees with related organization(s)		10	Yes	
p Reimbursement paid to related organization(s) for expenses		1p		No
q Reimbursement paid by related organization(s) for expenses			Yes	
r Other transfer of cash or property to related organization(s)		1r		No
s Other transfer of cash or property from related organization(s)		1s	\dashv	No

k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No
1	Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
О	Sharing of paid employees with related organization(s)	10	Yes	
р	Reimbursement paid to related organization(s) for expenses	1 p		No
q	Reimbursement paid by related organization(s) for expenses	1 q	Yes	
r	Other transfer of cash or property to related organization(s)	1r		No
s	Other transfer of cash or property from related organization(s)	1s		No
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			

(b) Transaction type (a-s) (c) Amount involved (a) Name of related organization (d) Method of determining amount involved 188,272 (1)NEO Philanthropy Action Fund Inc 0 (2)NEO Philanthropy Action Fund Inc 19,261

(3)NEO Philanthropy Action Fund Inc Q 34,111

Schedule R (Form 990) 2017

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, unrelated, excluded from tax under sections 512-	01	(e) re all partners section 501(c)(3) rganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General d managin partner	g l	(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
													_
	•		•			•				Schedul	e R (Forn	າ 99	0) 2017

Schedule R (Form 990) 2017 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2017