Return of Organization Exempt From Income Tax

OMB No 1545-0047

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

2017

Department of the Treasury Internal Revenue Service

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▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection For the 2017 calendar year, or tax year beginning 2017, and ending 20 C Name of organization NetChoice, LLC D Employer identification number Check if applicable 27-1716101 Doing business as NetChoice Address change Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Name change \Box 502 202-331-2130 Initial return City or town, state or province, country, and ZIP or foreign postal code Final return/terminated G Gross receipts \$ 1,671, 582 Washington, DC 20005 Amended return F Name and address of principal officer Application pending H(a) is this a group return for subordinates? Yes Vino 1401 K St, NW, Ste 502, Washington, DC 20005 H(b) Are all subordinates included? Yes / No if "No," attach a list (see instructions) √ 501(c) (Tax-exempt status 501(c)(3) www.netchoice.org H(c) Group exemption number ▶ Form of organization Corporation Trust Association L Year of formation M State of legal domicile Part I Summary Briefly describe the organization's mission or most significant activities: to engage in fast developing policy issues that are critical to internet commerce, including policy, local internet governance, child safety, data security & taxation Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 Activities & Number of independent voting members of the governing body (Part VI, line 1b) 4 2 5 Total number of individuals employed in calendar year 2017 (Part V. line 2a) 5 2 6 Total number of volunteers (estimate if necessary) 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990 Trline 341 / = 5 0 **Current Year** S-0.30 Contributions and grants (Part VIII, line 1h) . 1,286,333 1,548,550 MAY 0 2 2018 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4; and 7d) 151 135 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 98,036 122,867 Total revenue - add lines 8 through 11 (must equal-Part-VIII,-column-(A),-line=12) 12 1,384,520 1,671,552 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 640,202 734,280 Professional fundraising fees (Part IX, column (A), line 11e) 16a Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 560.903 939,375 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 1,201,105 1,673,655 19 Revenue less expenses. Subtract line 18 from line 12 -2,103 183,415 End of Year Beginning of Current Year 20 Total assets (Part X, line 16) 731.139 758.350 21 Total liabilities (Part X, line 26) . 76,212 105,526 22 Net assets or fund balances Subtract line 21 from line 20 654,927 652,824 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 1-May-2018 Sign Signature of office Here STEVEN Type or print name and title Print/Type preparer's name Preparer's signature Paid Preparer

May the IRS discuss this return with the preparer shown above? (se For Paperwork Reduction Act Notice, see the separate instructions.

Firm's name

Firm's address >

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Part		
	Check if Schedule O contains a response or note to any line in this Part III	🛚
1	Briefly describe the organization's mission.	
	to engage in fast developing policy issues that are critical to internet commerce, including policy, local internet governance, child safety, data security & taxation	
	local internet governance, child Salety, data Security & taxation	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	☑ No
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	✓ No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as meas expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to the total expenses, and revenue, if any, for each program service reported.	ured by others,
4a	(Code.) (Expenses \$ including grants of \$) (Revenue \$	1
		_
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$	1
	/(// // // // // // // // // // // //	. /
		·
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
		. ′
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	<u></u>	
	·····	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
40	Total program service expenses	

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Part	Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	No _/
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	2		√ √
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	1	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		√
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		√
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		√
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V .	10		√
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.	生物		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		~
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		√
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		√
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11e	✓	√
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		√
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓_
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		✓
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		√
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		✓
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Part	Checklist of Required Schedules (continued)	••		
			Yes	No
_	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b		
~ '	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			<u> </u>
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J			
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23	√	-
2 4 a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		✓
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24d		
<u> L</u> Ja	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior		-	
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	. 45	✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV .	28a		✓
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		_
_	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		✓
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
31	conservation contributions? <i>If "Yes," complete Schedule M</i>	30		✓
01	Part I	31		1
32	Did the organization self, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		✓
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		_	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
30	Part VI	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	✓	

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Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
	Check if Schedule O contains a response of flote to any line in this Part V	<u> </u>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . 1a 2	,		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	1	{	ļ
·	reportable gaming (gambling) winnings to prize winners?	1c		<u> </u>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	"		-
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 2	,		ĺ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	 -
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	-	-	-
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	 	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	-		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial		ļ	
	account)?	4a		1
b	If "Yes," enter the name of the foreign country: ▶		<u> </u>	_
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	})
	(FBAR).			ļ
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		1
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			i
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b)
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			1
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		l	
	required to file Form 8282?	7c	<u> </u>	
d	If "Yes," indicate the number of Forms 8282 filed during the year	<u> </u>		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<u>7е</u>	<u> </u>	ļ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	_7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g_	ļ	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	<u> </u>	ļ
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	- <u>-</u>		
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.		ļ	
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	 	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:		ĺ	ĺ
a	Initiation fees and capital contributions included on Part VIII, line 12	┨		}
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b Section 501(c)(12) organizations. Enter	-	ļ	}
11	Gross income from members or shareholders			
a b	Gross income from other sources (Do not net amounts due or paid to other sources	{		
_	against amounts due or received from them.)	-		}
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . 12b	, 20	 	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1	Ì	ĺ
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	
ű	Note. See the instructions for additional information the organization must report on Schedule O	100	<u> </u>	-
b	Enter the amount of reserves the organization is required to maintain by the states in which	Ì		
	the organization is licensed to issue qualified health plans	1	ĺ	ĺ
С	Enter the amount of reserves on hand	1	}	1
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
	If "Yes" has it filed a Form 720 to report these payments? If "No" provide an explanation in Schedule O	14h		T

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Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S.			
	Check if Schedule O contains a response or note to any line in this Part VI		, i doi	
Secti	on 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 3			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O	()		
b	Enter the number of voting members included in line 1a, above, who are independent . 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	į į		
	any other officer, director, trustee, or key employee?	2		1
3	Did the organization delegate control over management duties customarily performed by or under the direct	[.		
	supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3_		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5 6	Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders?	5 6		1
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	-		
	one or more members of the governing body?	7a		1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	İ		
_	the year by the following:		√	لــــا
a b	The governing body?	8a 8b	∀	 -
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	0.5	Ť	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C		
40.	Dilling and the book of the bo	40	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		-
•	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	<u> </u>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	√	ļ
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		├
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12c	./	
13	Did the organization have a written whistleblower policy?	13		1
14	Did the organization have a written document retention and destruction policy?	14	1	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	ļ	l	
а	The organization's CEO, Executive Director, or top management official	15a	√	<u> </u>
b	Other officers or key employees of the organization	15b	✓	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
<u> </u>	organization's exempt status with respect to such arrangements?	16b		<u>L</u>
Secti 17	on C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ n/a			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	5010	c)(3)s	onlv)
. =	available for public inspection. Indicate how you made these available. Check all that apply.	(
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	polic	y, and
00	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 re	cords		

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Hig	hest Compensated Employees, and
,	Independent Contractors	
<u> </u>	Check if Schedule O contains a response or note to any line in this Part VII	<u></u> <u></u> [

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

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

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

compensated employees; and former such pers										
Check this box if neither the organization no	r any relate	d org	aniz			ompe	nsa	ted any currer	t officer, director	, or trustee.
					C)					
(A) Name and Title	(B) Average hours per	box,	unles	neck ss pe	rson	than on the than of the the than the	an	(D) Reportable compensation	(E) Reportable compensation from	(F) Estimated amount of
	week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Steve DelBlanco	50									
Executive Director/Board Member	 	,			1	"		400,000	o	0
(2) Jonathan Zuck	5									
Board Member		~						0	0	0
(3) Rene Adam	5									
Board Member		~			ļ			0	0	0
(4) Carl Szabo Employee	50				,	~		230,000	0	0
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										-
(12)										
(13)										
(14)										

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Part	VII Section A. Officers, Directors, Trust	tees, Key E	mploy	yees	s, ar	nd F	lighe	st C	ompensated E	mployees (conti	nued)	
					•	C)						
	(A)	(B)	(do n	ot ch		ition	e than o	one	(D)	(E)	(F)
	Name and title	Average hours per	box,	unles	s pe	rson	ıs both	n an	Reportable compensation	Reportable compensation from	Estim	
		week (list any		1	_	т —	or/trus	<u> </u>	from	related	oth	er
		hours for related	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization	organizations (W-2/1099-MISC)	compen	
		organizations	ecto	l tio	4	Jame 1	st c	ğ	(W-2/1099-MISC)	(11 27 1000 11007	organiz	ation
		below dotted line)	~ tz	nal tr		oye	omp				and re organiz	
		,	stee	uste		"	ensa					
				ō			l ted					
(15)												
			ļ									
(16)		ļ										
(4 =)												
(17)		<u> </u>										
(10)					\vdash							
(18)												
(19)												
3.7.77		†										
(20)												
(21)												
70.01				_	<u> </u>		ļ					
(22)		 										
(23)						1						
(20)												
(24)						 						
37		†										
(25)												
								L		_		
1b	Sub-total			•	•			>	630,000	0		0
C	Total from continuation sheets to Part	VII, Sectio	n A		•				630,000	0		0
d	Total (add lines 1b and 1c)			•			_1	<u> </u>			1	
2	Total number of individuals (including but reportable compensation from the organization)		to tr	1056	e IIS1	tea	above	e) w	no receivea m	ore than \$100,0	UU OT	
	reportable compensation from the organ	Zation									Ι,	Yes No
3	Did the organization list any former of	ficer, direc	tor, c	or tr	rust	ee,	key e	emp	oloyee, or high	est compensat		103 10
	employee on line 1a? If "Yes," complete										3	~
4	For any individual listed on line 1a, is the	sum of re	portal	ble	con	npe	nsatio	n a	and other comp	ensation from t	he	ŀ
	organization and related organizations	greater th	an \$	150,	,000)? [f "Ye	s, "	complete Sch	edule J for su	ch	
	individual		•	•	•		•				h	v
5	Did any person listed on line 1a receive of									ation or individi		
	for services rendered to the organization	en res, c	отрі	ete	SCI	ieat	ile J i	Or s	such person		5	
Section 1	on B. Independent Contractors Complete this table for your five highest	component	od in	don	and	ont	contr	act	ore that receive	od more than \$1	00.000 of	
1	compensation from the organization. Rep											ı's tax
	year.	Joir Joinpo	· iouii	J	O		-C10110	· ,	your onamig mit		or garmeanor	
	(A)							Π	(B)		(C)	***
	Name and business add	Iress							Description of s	ervices	Compensat	tion
_	1155 15th St, NW, Ste 700, Washington, DC 2							1 *	ıblic relations			150,337
Morga	an Lewis, P.O. Box 8500 S-6050, Philadelphia	, PA 19178						co	ntracted service	es		180,000
								<u> </u>				
			_					_				
	Total number of independent contracts	va (vaaludu				limi	to d +	\	ann listad ab	ava) wha		
2	Total number of independent contractor received more than \$100,000 of compens							J LI	2	OVE) WIIO		

Part	VIII	Statement of Reve							_
j		Check if Schedule C) contains :	a res _l	oonse or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts its	1a	Federated campaigns	s	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .		1b	1,548,550				
ğ,	С	Fundraising events		1c					
ar /	d	Related organizations	s	1d					
S, E	e	Government grants (cor		1e					
<u>is</u>	f	All other contributions, g							
the		and similar amounts not inc		1f	,]			
اتان	g	Noncash contributions include	ded in lines 1a-						
and	h	Total. Add lines 1a-1			•	1,548,550			
		<u> </u>		_	Business Code				
'eu	2a								
Pe.	ь						· · · · · · ·		
ည	С		·						
er.	d								
E S	е						· ·		
Program Service Revenue	f	All other program ser							
Pro	g	Total. Add lines 2a-2			▶				
	3	Investment income and other similar amo	(including		ends, interest,	135			
	4	Income from investmen	t of tax-exer	nnt bo	and proceeds ▶				
	5	Royalties			•				
		•	(ı) Real		(II) Personal				
	6a	Gross rents							
	b	Less rental expenses							
	С	Rental income or (loss)							
	d	Net rental income or	(loss) .		•				
	7a	Gross amount from sales of	(ı) Securiti	es	(II) Other		·		
		assets other than inventory							
	b	Less: cost or other basis							
		and sales expenses	1		ì	}			
	C	Gain or (loss) .							
	d	Net gain or (loss) .	·		▶				
nue	8a	Gross income from fu	undraisina						
le l		events (not including \$	Ü						
Other Reve		of contributions reporte	ed on line 1						
- L		See Part IV, line 18 .		a					
Ĕ	ь	Less: direct expenses	3	. b		}			
O		Net income or (loss) f		1	events . ►				
		Gross income from ga							
				а	1				
-	b	Less: direct expenses	s	. b	*				
		Net income or (loss) f		g acti	vities .				
		Gross sales of in		_					
		returns and allowance	es	а					
	b	Less [,] cost of goods s	sold	. b		}			
	С	Net income or (loss) f			entory ►				
		Miscellaneous F			Business Code				
	11a	reimbursable expense	 \$		541611	122,867			
	b				 	-,			
	c								
	ď	All other revenue .							
	e	Total. Add lines 11a-			•				
	12	Total revenue. See u			•	1 671 552			

	<u></u>	
Part IX	Statement of Functional Expenses	
Section 50	1(c)(3) and 501(c)(4) organizations must complete all columns	All other organizations must complete column (A)

	Check if Schedule O contains a respon-			<u> </u>	<u> </u>
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 .				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	635,749			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 8	Other salaries and wages Pension plan accruals and contributions (include				
Ü	section 401(k) and 403(b) employer contributions)	33,000			
9	Other employee benefits	40,082			
10	Payroll taxes	25,449			
11 a	Fees for services (non-employees): Management				
b	Legal	5,000			
С	Accounting				
d	Lobbying	374,600			
e f	Professional fundraising services See Part IV, line 17 Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column				
_	(A) amount, list line 11g expenses on Schedule O)	104,112			
12	Advertising and promotion	113,657			
13	Office expenses	44,281			
14	Information technology	1,866			
15 16	Royalties	29,777			
17	Travel	122,478			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	2,390			
20	Interest				
21	Payments to affiliates				
22 23	Depreciation, depletion, and amortization Insurance	3,412			
24	Other expenses. Itemize expenses not covered	0,412			
	above (List miscellaneous expenses in line 24e If				ļ
	line 24e amount exceeds 10% of line 25, column				
_	(A) amount, list line 24e expenses on Schedule O.)	22.005	·		
a b	auto sponsorships	22,995 24,520			
c	dues	53,980			
d	bank fees	550			
е	All other expenses taxes	35,757			
25	Total functional expenses. Add lines 1 through 24e	1,673,655		<u> </u>	<u></u>
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)				<u></u>

Total liabilities and net assets/fund balances .

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) End of year Beginning of year 637,177 1 503,933 Cash—non-interest-bearing 2 2 Savings and temporary cash investments . 0 0 3 0 3 Pledges and grants receivable, net . . . 93,962 254,417 4 Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 Assets 7 Notes and loans receivable, net Inventories for sale or use 8 Prepaid expenses and deferred charges . 9 9 Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a Less accumulated depreciation . . . b 10b 6,610 10c 11 Investments—publicly traded securities 11 12 Investments—other securities. See Part IV, line 11 12 13 Investments-program-related See Part IV, line 11. 13 14 14 15 15 Other assets See Part IV, line 11 . . . Total assets. Add lines 1 through 15 (must equal line 34) . 16 731.139 16 758.350 39,886 17 91,748 17 Accounts payable and accrued expenses 18 Grants payable . 18 19 Deferred revenue . 19 20 20 Tax-exempt bond liabilities . . . 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, 22 trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties . . . Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 36,326 25 13,778 76,212 26 26 Total liabilities. Add lines 17 through 25 . . 105,526 Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 27 28 28 Temporarily restricted net assets . 29 Permanently restricted net assets. 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds . . . 31 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 32 32 Retained earnings, endowment, accumulated income, or other funds . 33 Total net assets or fund balances 654,927 33 652,824 731,139 34

758,350

Form 9	90 (2017)			Pa	age 12
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				V
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,67	71,552
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,67	73,655
3	Revenue less expenses. Subtract line 2 from line 1	3			-2,103
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		65	54,927
5	Net unrealized gains (losses) on investments	5			0
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		65	52,824
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990. ☐ Cash ☑ Accrual ☐ Other				
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plaın ın			-
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled or			
	reviewed on a separate basis, consolidated basis, or both.				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on a	i		
	separate basis, consolidated basis, or both.				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o		:		
	of the audit, review, or compilation of its financial statements and selection of an independent account	ıntant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, ex	kplaın ın			
	Schedule O.				ļ
За	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in	. "		
	the Single Audit Act and OMB Circular A-133?		3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo		;		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits	3b		<u> </u>
			Forr	n 990	(2017

SCHEDULE C (Form 990 or 990-EZ)

140 mg

Political Campaign and Lobbying Activities

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

2017

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No 1545-0047

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

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

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

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

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-F7, Part V, line 35c (Proxy

Tax) (s	see separate instructions), the ection 501(c)(4), (5), or (6) orga		Taxy (See Separate	s mandationa, or room add	-LL, I art V, ime ooc (i loxy
Name	of organization	inizations Complete Lait III		Employer ide	ntification number 27-1716101
Part	-A Complete if the	e organization is exempt und	er section 501(c	c) or is a section 527	organization.
1 2 3	Provide a description of definition of "political car Political campaign activit	the organization's direct and in	direct political ca	·	
Part		e organization is exempt und			
1 2 3 4a b Part 1 2 3 4 5	Enter the amount of any of the organization incurred Was a correction made? If "Yes," describe in Part I-C Complete if the Enter the amount direct activities Enter the amount of the 527 exempt function activities Did the filing organization Enter the names, address organization made payment the amount of political control of the state of	IV. e organization is exempt und by expended by the filing organization. filing organization's funds contribution.	er section 501(contains a managers under rm 4720 for this year at the section 501(contains a managers under	section 4955	Yes No izations to which the filing ization's funds. Also enterpolitical organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Schedule C (Form 990 or 990-EZ) 2017

	- (200 0, 000 122, 2017					rage z			
Par	t II-A	Complete if the organization section 501(h)).	n is exempt u	under section 50	01(c)(3) and file	d Form 5768 (elec	tion under			
A C	heck ►	k ► ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).								
B (Check ►	If the filing organization check								
		Limits on Lobi				(a) Filing	(b) Affiliated			
		(The term "expenditures" m			<u> </u>	organization's totals	group totals			
1a		obbying expenditures to influence	•	,	•					
b		obbying expenditures to influence	-	ody (direct lobbying	g)					
C		obbying expenditures (add lines 1	a and 1b)							
d		exempt purpose expenditures					·			
е		xempt purpose expenditures (add		•						
f	Lobbyi columr	ng nontaxable amount. Enter	the amount fr	rom the following	table in both					
	If the ar	nount on line 1e, column (a) or (b) is	: The lobbying	nontaxable amoun	t is:					
	Not ove	r \$500,000	20% of the an	nount on line 1e						
	Over \$5	00,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000					
	Over \$1	,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess	over \$1,000,000		ľ			
	Over \$1	,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess o	ver \$1,500,000		1			
		7,000,000	\$1,000,000							
g		oots nontaxable amount (enter 25	-							
h		ct line 1g from line 1a. If zero or le								
i		ct line 1f from line 1c. If zero or le								
j		e is an amount other than zero ng section 4911 tax for this year?			the organization	n file Form 4720	Yes No			
	(Som	e organizations that made a se See the	ction 501(h) ele separate instr	ructions for lines	e to complete all 2a through 2f.)	of the five columns	s below.			
		Lobbying	Expenditures	During 4-Year Av	eraging Period					
	Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total			
2a	Lobbyi	ng nontaxable amount								
b		ng ceiling amount of line 2a, column (e))								
С	Total id	obbying expenditures								
d	Grassr	oots nontaxable amount								
е		oots ceiling amount of line 2d, column (e))								
f	Grassr	oots lobbying expenditures								

8-6-6-64

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed (election under section 501(h)).	Forn	1 5768	
For e	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(a)		(b)
	iption of the lobbying activity.	No	Ar	mount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of.			
а	Volunteers?	1	1	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	T	l	
С	Media advertisements?			
d	Mailings to members, legislators, or the public?			
е	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?	<u> </u>		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	<u> </u>		
i	Other activities?	ļ		
j	Total Add lines 1c through 1i		ļ	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .		L	
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	<u> </u>	L	
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6).	or se	ction	
				Yes No
1	Were substantially all (90% or more) dues received nondeductible by members?		1	1
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior			
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b answered "Yes."			line 3, is
1	Dues, assessments and similar amounts from members	1		1,548,550
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).			
а	Current year	2a		374,600
b	Carryover from last year	2b		
С	Total	2c		374,600
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3		374,600
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		1	
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying	ļ	1	
_	and political expenditure next year?	4		
5	Taxable amount of lobbying and political expenditures (see instructions)	5	L	
Par	• • • • • • • • • • • • • • • • •			
	le the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated group list instructions), and Part II-B, line 1. Also, complete this part for any additional information.	st), Pa	τ II-A, I	ines 1 and
•				
_				

Schedule C (Fo	m 990 or 990-EZ) 2017	Page 4
∘Part IV	Supplemental Information (continued)	
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	-	
		~
		^
		~
·		~
		·

SCHEDULE D (Form 990)

210 110

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection

		ganization		Employer identification number
	iolce, L			27-1716101
Par	t I	Organizations Maintaining Donor Adv Complete of the organization answered	"Yes" on Form 990, Part IV, line 6.	
			(a) Donor advised funds	(b) Funds and other accounts
1		number at end of year		
2		egate value of contributions to (during year)		
3		egate value of grants from (during year) .		
4		egate value at end of year		
5		he organization inform all donors and donors are the organization's property, subject to the		
6	only t	he organization inform all grantees, donors, a for charitable purposes and not for the bene erring impermissible private benefit?	fit of the donor or donor advisor, or f	or any other purpose
Par	t II	Conservation Easements.		
		Complete if the organization answered		
1		ose(s) of conservation easements held by the		_
		reservation of land for public use (e.g., recrea		
		rotection of natural habitat	☐ Preservation o	f a certified historic structure
_		reservation of open space		
2		plete lines 2a through 2d if the organization he	eld a qualified conservation contribution	
		ment on the last day of the tax year.		Held at the End of the Tax Year
a		number of conservation easements		2a
þ		acreage restricted by conservation easement		
c d		per of conservation easements on a certified hoer of conservation easements included in		2c
u		ric structure listed in the National Register .		l I
3		per of conservation easements modified, trans		rinated by the organization during the
J	tax ye		sierred, released, extinguished, or terr	Timated by the organization during the
4	-	per of states where property subject to conse	rvation easement is located ▶	
5	Does	the organization have a written policy regions, and enforcement of the conservation ea	garding the periodic monitoring, ins	pection, handling of
6		and volunteer hours devoted to monitoring, inspect		
7	Amou	 int of expenses incurred in monitoring, inspectin	as handling of violations, and enforcing	consequence occamente during the year
•	► \$	int of expenses incurred in monitoring, inspecting	ig, nationing of violations, and emorcing	conservation easements during the year
8	Does and s	each conservation easement reported on line ection 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of	section 170(h)(4)(B)(i)
9		rt XIII, describe how the organization reports of		
		ce sheet, and include, if applicable, the text of		
		nization's accounting for conservation easeme		
Part		Organizations Maintaining Collection	s of Art, Historical Treasures, or	Other Similar Assets.
		Complete if the organization answered '		
1a	If the	organization elected, as permitted under SF	AS 116 (ASC 958), not to report in its	revenue statement and balance sheet
	works	s of art, historical treasures, or other similar	assets held for public exhibition, ec	ducation, or research in furtherance of
	public	c service, provide, in Part XIII, the text of the f	ootnote to its financial statements tha	t describes these items.
b	works	organization elected, as permitted under S s of art, historical treasures, or other similar c service, provide the following amounts relati	assets held for public exhibition, ed	
	(i) Re	evenue included on Form 990, Part VIII, line 1		▶ \$
	(ii) As	sets included in Form 990, Part X		> \$
2	If the follow	evenue included on Form 990, Part VIII, line 1 sets included in Form 990, Part X organization received or held works of art, ving amounts required to be reported under S	historical treasures, or other similar FAS 116 (ASC 958) relating to these it	assets for financial gain, provide the tems:
а	Reve	nue included on Form 990, Part VIII, line 1 .		▶ \$
b		s included in Form 990. Part X		S

448 Beach

. Part	Organizations Maintaining	Collections of /	Art, His	torical 7	Treasures, d	or Other Similar A	Assets (continued)
3	Using the organization's acquisition, collection items (check all that apply):	accession, and oth					
а	☐ Public exhibition		d	☐ Loan	or exchange	programs	
b	☐ Scholarly research		е	Othe	r 		
С	☐ Preservation for future generations						
4	Provide a description of the organizat XIII	ion's collections a	and expla	ain how t	hey further th	ne organization's exe	empt purpose in Part
5	During the year, did the organization						ilar
	assets to be sold to raise funds rather		ined as I	oart of the	e organizatioi	n's collection? .	☐ Yes ☐ No
Part	IV Escrow and Custodial Arra	•					
	Complete if the organization	answered "Yes"	on For	m 990, i	art IV, line	9, or reported an a	imount on Form
12	990, Part X, line 21. Is the organization an agent, trustee,	custodian or oth	er intern	odiany fo	or contributio	ne or other accete	not
1a				-			· Yes No
b	If "Yes," explain the arrangement in Pa						162 NO
b	in res, explain the analigement in re	art Am and comple	te the ic	mowning to	able.		Amount
С	Beginning balance					1c	
d	Additions during the year .					1d	
e	Distributions during the year					1e	
f	Ending balance					1f	
2a	Did the organization include an amour	nt on Form 990, Pa	art X, line	21, for e	scrow or cus	todial account liabili	ty? 🗌 Yes 🗌 No
b	If "Yes," explain the arrangement in Pa	art XIII. Check here	e if the e	xplanatio	n has been p	rovided on Part XIII	. <u>.</u>
Par	t V Endowment Funds.						
	Complete if the organization						
	Ì	(a) Current year	(b) Pn	or year	(c) Two years	back (d) Three years ba	ick (e) Four years back
1a	Beginning of year balance						
b	Contributions						
С	Net investment earnings, gains, and						
	losses						
d	Grants or scholarships						
е	Other expenditures for facilities and programs						
f	Administrative expenses						
g	End of year balance						
2	Provide the estimated percentage of t	he current vear en	d haland	e (line 10	Column (a))	held as	
- а	Board designated or quasi-endowmer				, σσιαππ (α),	110.0 001	
b	Permanent endowment ▶						
С	Temporarily restricted endowment ▶	-					
	The percentages on lines 2a, 2b, and	2c should equal 10	00%.				
3a	Are there endowment funds not in the	possession of the	e organı	zation tha	at are held ar	nd administered for	the
	organization by						Yes No
	(i) unrelated organizations		•				3a(i)
	(ii) related organizations						. 3a(ii)
b	If "Yes" on line 3a(II), are the related of	•					. 3b
4	Describe in Part XIII the intended uses		n's end	owment for	unas.		
Part			' on Fe	000 -	7amt IV - Jim = 1	110 Con Farm 000	Dart V line 40
	Complete if the organization						
	Description of property	(a) Cost or oth		, ,	or other basis ther)	(c) Accumulated depreciation	(d) Book value
1a	Land	- 	<u> </u>	 	-	·	
b	Buildings						
C	Leasehold improvements						
d	Equipment		6,610	 	0	6,610	
e	Other						
otal.	Add lines 1a through 1e. (Column (d) n	nust equal Form 99	90. Part	X. columr	(B), line 10c	.)	0

	(a) Description of security or category (including name of security)	(b) Book value		(c) Method of Cost or end-of-yea	
. 			`		Thanket value
I) Financial der					 _
•	equity interests	· · · · · · · · · · · · · · · · · · ·			
Other					
(A)					-
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
tal. (Column (b) mu:	st equal Form 990, Part X, col (B) line 12) ▶				
art VIII In	vestments-Program Related.			,	
Cc	omplete if the organization answered "Yes" on F	orm 990, Part IV	, line 11c. Se	ee Form 990,	Part X, line 13
	(a) Description of investment	(b) Book value		(c) Method of Cost or end-of-yea	
)					
2)					
3)					
1)					
5)					
; ;)					
)					
3)			-		
- / -					
			ł		
9)	st equal Form 990, Part X, col (B) line 13) ▶				
9) Ital. (Column (b) mu	st equal Form 990, Part X, col. (B) line 13) ►				
9) tal. (Column (b) mu: Part IX Ot	ther Assets.	orm 990, Part IV	, line 11d. Se	ee Form 990,	Part X, line 1
e) tal. (Column (b) mu: Part IX Ot		orm 990, Part IV	, line 11d. Se	ee Form 990,	Part X, line 1
e) tal. (Column (b) mu: Part IX Ot Co	ther Assets. omplete if the organization answered "Yes" on F	orm 990, Part IV	, line 11d. So	ee Form 990,	
e) tal. (Column (b) mus Part IX Ot Co	ther Assets. omplete if the organization answered "Yes" on F	orm 990, Part IV	, line 11d. Se	ee Form 990,	
e) tal. (Column (b) mus Part IX Ot Co	ther Assets. omplete if the organization answered "Yes" on F	orm 990, Part IV	, line 11d. Se	ee Form 990,	
2) tal. (Column (b) must Part IX Ot Co	ther Assets. omplete if the organization answered "Yes" on F	orm 990, Part IV	, line 11d. Se	ee Form 990,	
Part IX Oi Co	ther Assets. omplete if the organization answered "Yes" on F	orm 990, Part IV	, line 11d. Se	ee Form 990,	
Part IX Ot Column (b) must Col	ther Assets. omplete if the organization answered "Yes" on F	orm 990, Part IV	, line 11d. Se	ee Form 990,	
Part IX Ot Column (b) must Col	ther Assets. omplete if the organization answered "Yes" on F	orm 990, Part IV	, line 11d. Se	ee Form 990,	
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Part IX OI Co	ther Assets. omplete if the organization answered "Yes" on F	orm 990, Part IV	, line 11d. Se	ee Form 990,	
2) 2) 2) 21 21 21 31 41 55 66 77 33 90	ther Assets. complete if the organization answered "Yes" on F (a) Description	orm 990, Part IV	, line 11d. Se		
2) tal. (Column (b) must Part IX Ot Col 1) 2) 3) 4) 5) 6) 7) 3) btal. (Column (colum	ther Assets. Important of the organization answered "Yes" on F (a) Description (b) must equal Form 990, Part X, col. (B) line 15.)	orm 990, Part IV	, line 11d. Se	ee Form 990,	
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.Part			Return.
····	Complete if the organization answered "Yes" on Form 990,	Part IV, line 12a.	
1 `	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
C	Recoveries of prior year grants	2c	
	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d		2e
	Subtract line 2e from line 1		3
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
	Other (Describe in Part XIII.)	4b	
			4c
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5
Part			er Return.
	Complete if the organization answered "Yes" on Form 990, I	Part IV, line 12a.	, -,
	Total expenses and losses per audited financial statements		1
	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 1	
	Donated services and use of facilities	2a	4
	Prior year adjustments	2b	4 1
	Other losses	2c	4]
	Other (Describe in Part XIII)	2d	
	Add lines 2a through 2d	• • • • • • •	2e
	Subtract line 2e from line 1		3
	Amounts included on Form 990, Part IX, line 25, but not on line 1	4-	Į į
а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a	4
	Other (Describe in Best VIII.)	4 4 4	
b	Other (Describe in Part XIII)	4b	40
b c	Add lines 4a and 4b		4c
b c 5	Add lines 4a and 4b		40 5
b c 5 Part 2	Add lines 4a and 4b	e 18.)	5
b c 5 Part)	Add lines 4a and 4b	e 18.)	5 o, Part V, line 4; Part X, line
b c 5 Part)	Add lines 4a and 4b	e 18.)	5 o, Part V, line 4; Part X, line
b c 5 Part)	Add lines 4a and 4b	e 18.)	5 o, Part V, line 4; Part X, line
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b c 5 Part)	Add lines 4a and 4b	e 18.)	5 o, Part V, line 4; Part X, line
b c 5 Part)	Add lines 4a and 4b	e 18.)	5 o, Part V, line 4; Part X, line
b c 5 Part)	Add lines 4a and 4b	e 18.)	5 o, Part V, line 4; Part X, line
b c 5 Part)	Add lines 4a and 4b	e 18.)	5 o, Part V, line 4; Part X, line
b c 5 Part)	Add lines 4a and 4b	e 18.)	5 o, Part V, line 4; Part X, line
b c 5 Part)	Add lines 4a and 4b	e 18.)	5 o, Part V, line 4; Part X, line
b c 5 Part)	Add lines 4a and 4b	e 18.)	5 o, Part V, line 4; Part X, line
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b c 5 Part)	Add lines 4a and 4b	e 18.)	5 o, Part V, line 4; Part X, line
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b c 5 Part)	Add lines 4a and 4b	e 18.)	5 o, Part V, line 4; Part X, line
b c 5 Part)	Add lines 4a and 4b	e 18.)	5 o, Part V, line 4; Part X, line
b c 5 Part)	Add lines 4a and 4b	e 18.)	5 o, Part V, line 4; Part X, line
b c 5 Part)	Add lines 4a and 4b	e 18.)	5 o, Part V, line 4; Part X, line

Schedule D (Form 990) 2017							
Part XIII	Supplemental Information (continued)						
•							
		·					
							
		- -					
		- 					
·	,						
·		-					
		-					
							
		 .					
	,						

SCHEDULE J (Form 990)

· .

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

NetChoice, LLC

Employer identification number 27-1716101

Part	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 ☐ Housing allowance or residence for personal use			
	☐ Travel for companions ☐ Payments for business use of personal residence			
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (such as, maid, chauffeur, chef)		İ	1
				l
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			ļ
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to	'	}	
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2	-	
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.			
	Compensation committee Written employment contract			1
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			l
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.			
а	Receive a severance payment or change-of-control payment?	4a		1
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		V
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		V
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
5	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9. 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.			
а	The organization?	5a		
b	Any related organization?	5b		
	If "Yes" on line 5a or 5b, describe in Part III			
]
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
а	The organization?	6a		
b	Any related organization?	6b		
	If "Yes" on line 6a or 6b, describe in Part III.			
_	E CONTRACTOR OF THE CONTRACTOR			ļ
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	_		
	• •	7	<u> </u>	-
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	In Part III	8		
		├ ─		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

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

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

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

THO COLUMNIS (D)(I)	<u> </u>	(B) Breakdown of	W-2 and/or 1099-MIS	C compensation	(C) Retirement and			(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(I)–(D)	in column (B) reported as deferred on prior Form 990
Steve DelBlano	(i)	285,000	115,000	3,529	17,100	26,719	447,348	0
Executive Director	(ii)				·			
Carl Szabo	(i)	165,000	65,000	2,220	15,900	26,719	274,839	0
V-P, Legal Counsel	(ii)							
	(1)							
3	(ii)							
	(i)							
4	(ii)				·····			
	(i)							
5	(ii)	_						
	(i)							
6	(ii) [
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(iı)							
	(1)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)				<u> </u>			
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Part III	Supplemental Informati	on				•	
Provide t	he information, explanation	, or descriptions required f	or Part I, lines 1a,	1b, 3, 4a, 4b, 4c, 5a,	5b, 6a, 6b, 7, and 8, and fo	or Part II. Also complete th	is part
or anv a	dditional information.				, , , , ,	•	•
							
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

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

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

27-1716101 NetChoice, LLC Part VI, line 8a/8b - the notes of all Board and Executive Committee meetings are documented Part VI, line 11b - forms are completed by the CFO and reviewed by the Executive Director and at least one Board Member prior to filing with the IRS Part VI, line 12C - monitoring of compliance with conflict of interest policy is done through discussions with officers, directors and key employees Part VI, Line 15a/15b - in order to determine compensation of all employees, research is performed on current employees salaries for comparison in the non-profit industry. In addition, research of various non-profit industry associations is performed, reviewed and salaries are recommended to the Board. Part VI, line 19 - the organization makes its governing documents, conflict of interest policy and financial statements available upon to the public upon request.

Schedule O (Form 990 or 990-EZ) (2017)	Page 2
Name of the organization	Employer identification number
	<u> </u>