efil	e Pu	ıblic Visı	al Render	ObjectId:	202301329	9349303245 - S	ubmissio	n: 2023-0	5-12	T.	IN: 85-1501210
,	00	20	Re	turn of C	Drganiza	tion Exemp	t From	Incom	e Tax	(	OMB No. 1545-0047
Form	93	<b>J</b> U			•	) of the Internal Rev				ions)	2022
						numbers on this for				ons)	2022
Departr	nent of	f the Treasury	•	Go to <u>www.ir</u> s	s.gov/Form9	90 for instructions	and the l	atest inforn	nation.		Open to Public Inspection
		nue Service									Inspection
A F	or th	ne 2022 ca	·	<i>.</i>	eginning 01-0	01-2022 , and end	ding 12-31	-2022	-		
		applicable:	C Name of organ Invest in Wash	ization ington Now Camp	paign				D Employe	r identi	fication number
_		change hange							85-1501	210	
O Ini		-	Doing business Invest in Wash								
_		rn/terminated		-	if mail is mat dali			_	E Telephone	e number	
		ed return ion pending	PO Box 21961	reet (or P.O. box	ir mail is not dell	vered to street address	) Room/suit	e	(206) 38	82-5552	
			City or town, s	tate or province,	country, and ZIP	or foreign postal code			-		
			Seattle, WA 9	8111					G Gross rec	eipts \$ <mark>5</mark>	89,050
		ſ	F Name and Treasure Mack	address of prin	cipal officer:			H(a) Is thi	s a group ret	urn for	
			PO Box 21961						rdinates? Ill subordinate	20	Yes No
I Tax	(-exe	mpt status:	Seattle, WA 9			0	0	inclu	ded?		Ses No
		·		501(c) ( 4	) ◀ (insert no.)	4947(a)(1) or	527		o," attach a li p exemption		
JW	edsi	te: Minve	estinwanow.org						pexemption	number	-
K Forr	n of o	organization:	Corporation		Association	Other 🕨		L Year of form	ation: 2020		of legal domicile:
		-	-							WA	
Pa	art I	Sumi Briefly dec		ization's missis	n or most sign	nificant activities:					
æ			or tax policy in			inicant activities.					
anc											
Ë		Check this box ► □ Number of voting members of the governing body (Part VI, line 1a)									
Governance						3	1				
	4		-	-		ning body (Part VI, li				4	4
Activities &	5		•	-	-	r 2021 (Part V, line 2				5	2
tivit	6	Total num	ber of voluntee	ers (estimate if	necessary)					6	25
Ac	7a	Total unre	elated business	revenue from l	Part VIII, colum	nn (C), line 12 .				7a	0
	b	Net unrela	ated business t	axable income	from Form 990	0-T, Part I, line 11				7b	0
								Pr	ior Year		Current Year
9				. ,	•		•		1,021,5	95	589,050
Revenue		5	service revenue	· ,	57	• • • • • •					0
Re			-			and 7d)	•				0
			. ,			9c, 10c, and 11e) art VIII, column (A), I	ine 12)		1,021,5	95	589,050
						, lines 1–3 )	,				0
						line 4)					0
\$2	15	Salaries,	other compensa	ation, employee	e benefits (Par	t IX, column (A), line	es 5-10)		176,2	04	219,569
Exp enses	16a	a Professio	nal fundraising	fees (Part IX, c	olumn (A), line	e 11e)					0
xpe	b	Total fundra	aising expenses ( <b>F</b>	Part IX, column (	D), line 25) 🕨 21	,957					
(1)						11f-24e)			581,5	82	604,642
						column (A), line 25)			757,7		824,211
- 00	19	Revenue	less expenses.	Subtract line 1	8 from line 12		•••	Desimilar	263,8		-235,161
Net Assets or Fund Balances								ьeginning	of Current Ye	d	End of Year
sse Bala	20	Total asse	ets (Part X, line	16)					599,5	30	364,370
et A ind	21	Total liabi	lities (Part X, lin	ne 26)			• •				0
Z	22	Net asset	s or fund balan	ces. Subtract li	ne 21 from line	e 20	•		599,5	30	364,370
Pa	rt II	Signa	ature 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.

	I.				2023-05-05	
Sign	Sig	gnature of officer			Date	
Here		assure Mackley, Executive Director				
	III	easure Mackley Executive Director pe or print name and title				
	,	Print/Type preparer's name	Preparer's signature	Date		PTIN
Paie	d			2023-05-12	Check if self-employed	P01598099
Pre	parer	Firm's name		-	Firm's EIN 🕨 4	47-2810714
	Only	Firm's address ▶ 603 Stewart St Ste 81	9		Phone no. (206	5) 382-5552
	-				1110110-110. (200	5/ 502 5552
		Seattle, WA 98101				
		cuss this return with the preparer sho	. ,			. 🗹 Yes 🗌 No
For F	Paperwork	Reduction Act Notice, see the se	parate instructions.	Cat. I	No. 11282Y	Form <b>990</b> (2021)
			Page 2			
Form	990 (2021)	)				Page 2
Pa	rt III St	atement of Program Service	Accomplishments			
		eck if Schedule O contains a respons	-	tIII		
1		scribe the organization's mission:				
Advo	cate for tax	policy in Washington State				
2		ganization undertake any significant		ear which were not lis	sted on	
	•	Form 990 or 990-EZ?				🗆 Yes 🛛 No
-		escribe these new services on Sched				
3		ganization cease conducting, or mak	5 5	conducts, any progra	m	. 🗌 Yes 🔽 No
		escribe these changes on Schedule C				. Tes Mino
4		he organization's program service ac		bree largest program	sorvicos as r	measured by expenses
-	Section 50	01(c)(3) and 501(c)(4) organizations ue, if any, for each program service i	are required to report the amo			
4a	(Code:	) (Expenses \$	768,797 including grants of	\$ (	) (Revenue \$	0)
14		r progressive revenue measures in Washin	, 55		, (	,
	5	ed and conducted advertising programs, co Washington's new tax on capital gains.	nducted opinion research and devel	oped communication and	l social media str	ategies. Also assisted with legal
4b	(Code:	) (Expenses \$	including grants of	\$	) (Revenue \$	)
			55			,
4c	(Code:	) (Expenses \$	including grants of	\$	) (Revenue \$	)
	(	)(		T	) (	,
4d	Other are	arom convices (Deservice in Cohedule	0)			
÷u	(Expenses	gram services (Describe in Schedule s \$ includi	O.) ng grants of \$	) (Revenue	\$	)
4e		gram service expenses	768,797	, (terende i	1	,
-10	istai più	Juin Service expenses	100,101			

Page 3	3
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	990 (2021) t IV Checklist of Required Schedules			Page <b>3</b>
Fal			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions. 🗐	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		No
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III .	5		No
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? <i>If "Yes," complete Schedule D</i> ,Part I.			No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		<u> </u>
,	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III	8		No
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? <i>If "Yes," complete Schedule D, Part IV</i>	9		No
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		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
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		No
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? <i>If "Yes," complete Schedule D, Part VII</i>	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		No
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? <i>If "Yes," complete Schedule D, Part IX</i>	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b		No
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		No
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		No
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		No
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		No
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		No
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		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic	21		No

#### government on Fatta, countin (A), me 1: 11 res, complete Scheude 1, Parts 1 and 11 . .

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#### Form 990 (2021)

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
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? <i>If "Yes," complete Schedule J</i>	23	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? <i>If</i> " <i>Yes</i> ," <i>answer lines 24b through 24d and complete Schedule K. If</i> " <i>No</i> ," <i>go to line 25a</i>	24a		No
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? $\ldots$ .	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
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		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L</i> ,Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
с	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than $25,000$ in non-cash contributions? If "Yes," complete Schedule M .	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		No
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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		
36	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, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	Yes	
Pa	rt 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			

1a Er	nter the n	number rep	orted in box	3 of Form	1096.	Enter -0-	if not applicable	
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 ${f b}$  Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable .

		Yes	No
1a	10		
1b	0		
	0		

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

Form 990 (2021)

1c

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1

	990 (2021) t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			Page <b>5</b>
	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       2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	Зb		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes." enter the name of the foreign country:	4a		No
-	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
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
с	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	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	Yes	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
	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		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? $\ldots$ .	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 <b>10a</b>			
b 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities <b>10b</b>			
11 a	Section 501(c)(12) organizations. Enter:         Gross income from members or shareholders         Image: Comparison of the state			
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. <b>12b</b>			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			

14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No	
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O $\ldots$	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17			
	Form <b>990</b> (2021)				

	Page 6			
Form	990 (2021)			Daga 6
	<ul> <li>Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI</li> </ul>		oonse to	Page <b>6</b>
Se	ction A. Governing Body and Management			1
1-	Enter the number of voting members of the governing body at the end of the tax year <b>1a</b>	4	Yes	No
14	If there are material differences in voting rights among members of the governing	4		
	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 <b>1b</b>	4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervisor of officers, directors or trustees, or key employees to a management company or other person?	sion 3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? $\$ .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or momembers of the governing body?	ore <b>7a</b>		No
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		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year l the following:	у		
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Reve	nue Cod	e.)	·
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates and branches to ensure their operations are consistent with the organization's exempt purposes?	′ <b>10</b> b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing th form?	e 11a	Yes	
b	Describe on 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		No
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 on Schedule O how this was done	12c			
13	Did the organization have a written whistleblower policy?	13			
14	Did the organization have a written document retention and destruction policy?	14			
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
а	The organization's CEO, Executive Director, or top management official	15a			
b	Other officers or key employees of the organization	15b			
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.				

No No

No

No

Yes

16a

16a	Did th	e org	Janizat	ion ir	nves	st in,	con	tribu	te as	ssets	s to,	or	oarti	cipat	te in	a joir	it ve	nture	e or	simi	lar	arrai	nger	nent	t wit	h a	
	taxabl	e ent	ity du	ring t	he y	/ear	?.	•	•	•	•	•	•	•	•		•	•	•	•	•	•	•	•	•	•	·
						. ,																					

b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt
	status with respect to such arrangements?

Se	ction C. Disclosure	
17	List the states with which a copy of this Form 990 is required to be filed	
18	Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	
	🗌 Own website 🛛 Another's website 🛛 Upon request 🗍 Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.	
20	State the name, address, and telephone number of the person who possesses the organization's books and records: Seattle CFO LLC PO Box 21961 Seattle, WA 98111 (206) 382-5552	
		Form <b>990</b> (2021)
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Form	990 (2021)	Page <b>7</b>
Pa	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Empl and Independent Contractors	oyees,
	Check if Schedule O contains a response or note to any line in this Part VII	🗆
Se	ction A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	
year.	omplete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the List all of the organization's <b>current</b> officers, directors, trustees (whether individuals or organizations), regardless of amou	
	npensation. 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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and title	(B) Average hours per week (list any hours for related	(C) Position (do not check more than one box, unless persor is both an officer and a director/trustee)					son	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(Ŵ-2/1099- MISC/1099- NEC)	(W-2/1099- MISC/1099- NEC)	organization and related organizations	
(1) Dennis Eagle Treasurer	1.00	х		x				0	0	0	
(2) Dijibril Diop Vice Chair	1.00	х		x				0	0	0	
(3) Jasmin Weaver Chair	1.00	x						0	0	0	
(4) Joan Jones Secretary	1.00	x		x				0	0	0	
(5) Treasure Mackley Executive Director	40.00			x				161,231	0	4,954	
			I		L		I				

16b

•	•				Form <b>990</b> (2021)

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

(A) Name and title	(B) Average hours per week (list any hours for related		ne b	ox, ι In of	t che inles ficer	ss pers and a	son	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	employee Key employee Officer Institutional Trustee Individual trustee or director	Highest compensated employee	Former	2/1099- MISC/1099-NEC)	MISC/1099-NEC)	organization and related organizations			
1b Sub-Total									<u> </u>	
c Total from continuation sheets to Pa d Total (add lines 1b and 1c)						•		161,231	0	4,954

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 ► 1

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

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Section B.	Inde	pendent	Contractors
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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.

Name and business address	Description of services	Compensation
	Communications/Social Media/Advertising	225,556
2 Total number of independent contractors (including but not limited to those listed above) who is compensation from the organization ▶ 1	received more than \$100,000 of	
		E 000 (2021)

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rm 990 (20		_					Page
Part VIII	Statement of						
	Check if Schedul	le O contains a res	sponse or note to an	y line in this Part VIII (A)	(B)	<u></u> (C)	U
				(A) Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under section 512 - 514
derate	ed campaigns .	. 1a					
mber	ship dues	1b					
ndrais	ing events	1c					
structure imbers	organizations	1d					
Per vernme	ent grants (contributio	ons) <b>1e</b>					
All other o	contributions, gifts, gra ar amounts not include	ants, ed <b>1f</b>					
	9,050 contributions included	. 1					
h Total. A	dd lines 1a-1f						
			589,050 Business Code				
2a							
0							
ne –							
8							
gram Service Revenue							
Prog							
	ther program servio						
_	al. Add lines 2a-2f.						
	tment income (inclu amounts)		nterest, and other				
	e from investment		ond proceeds				
	ties						
, and		(i) Real	(ii) Personal				
	'ı İ	(1) 1001	(,	1			
6a Gross	s rents 6a		I	I			

Т					I		I	I	1
b	Less: rental expenses	6b							
с	Rental income or (loss)	6c							
d	Net rental income	or (I	loss)		►				
	Γ		(i) Securi	ties	(ii) Other				
7a	Gross amount from sales of assets other than inventory	7a							
Ь	Less: cost or other basis and sales expenses	7b				_			
	Gain or (loss)	7c							
d	Net gain or (loss)	•	• • •	· ·					
evenue	Gross income from fur (not including \$ contributions reported See Part IV, line 18	on li •	of ne 1c).	8a					
<u>с</u> в	Less: direct expens			8b					
Other	Net income or (loss	s) fro	om fundraisir	ng eve	ents 🕨				
L.	Gross income from g See Part IV, line 19 Less: direct expens Net income or (loss	ses	· · · · ·	9a 9b ctiviti	es				
	aGross sales of inver returns and allowar Less: cost of goods	nces	• •	10a 10b					
	Net income or (loss			wont					
	Miscellaneo			wente	Business Code				
11									
b									
C									
d	All other revenue	•		I		0	0	C	0
e	<b>Total.</b> Add lines 11	a-1	1d		· · •	0			
12	<b>Total revenue.</b> Se	e in	structions .	•	• • •	589,050		C	0

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Part IX	Statement of Functional Expenses				
	Section 501(c)(3) and 501(c)(4) organizations must	complete all columns	. All other organization	ons must complete co	olumn (A).
	Check if Schedule O contains a response or note to a	ny line in this Part IX			🗆
	clude amounts reported on lines 6b, b, and 10b of Part VIII.	<b>(A)</b> Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	s and other assistance to domestic organizations and stic governments. See Part IV, line 21				
	s and other assistance to domestic individuals. See V, line 22				
gover	s and other assistance to foreign organizations, foreign ments, and foreign individuals. See Part IV, lines 15 6.				
4 Benef	its paid to or for members				
5 Comp	ensation of current officers, directors, trustees, and	161,231	128,985	16,123	16,123

	key employees				
	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	32,076	25,662	3,207	3,207
	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	5,553	4,443	555	555
9	Other employee benefits	3,859	3,087	386	386
10	Payroll taxes	16,850	13,480	1,685	1,685
11	Fees for services (non-employees):				
а	Management				
b	Legal	144,923	144,923	0	0
С	Accounting	11,500	0	11,500	0
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	180,500	180,500	0	0
12	Advertising and promotion	207,616	207,616	0	0
13	Office expenses				
14	Information technology	4,265	4,265	0	0
15	Royalties				
16	Occupancy				
17	Travel				
	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
	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	Opinion Research	42,400	42,400	0	0
b					
c					
d					
e	All other expenses	13,438	13,436	1	1
25	Total functional expenses. Add lines 1 through 24e	824,211	768,797	33,457	21,957
	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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Form 990 (2021) Page **11** Part X **Balance Sheet**  $\Box$ Check if Schedule O contains a response or note to any line in this Part  $\ensuremath{\mathsf{IX}}$  . **(B)** End of year **(A)** Beginning of year Cash-non-interest-bearing 1 599,530 1 364,370 . . 2 2 Savings and temporary cash investments . . . . **3** Pledges and grants receivable, net . . . 3 • . . 4 4 Loans and other receivables from any current or former officer, director, 5 trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons . . , .

	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			
ssets	_			6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
Ÿ	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D <b>10a</b>			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities .		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	599,530	16	364,370
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
s	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
Fund Balances	27	Organizations that follow FASB ASC 958, check here <b>Solution</b> and complete lines 27, 28, 32, and 33. Net assets without donor restrictions	599,530	27	364,370
Ba	28	Net assets with donor restrictions		28	
or Fund	29	Organizations that do not follow FASB ASC 958, check here ► □ and complete lines 29 through 33. Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building or equipment fund		30	
Assets	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	599,530	32	364.370
Net	33	Total liabilities and net assets/fund balances	599,530	33	364,370
-			,000		Form <b>990</b> (2021)

\_\_\_\_\_ Page 12 \_\_\_\_\_

Form 990 (2021)       Page         Part XI       Reconcilliation of Net Assets         Check if Schedule O contains a response or note to any line in this Part XI       Check if Schedule O contains a response or note to any line in this Part XI		Page <b>12</b>	
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>	🛛
1	Total revenue (must equal Part VIII, column (A), line 12)	1	589,050
2	Total expenses (must equal Part IX, column (A), line 25)	2	824,211
3	Revenue less expenses. Subtract line 2 from line 1	3	-235,161
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	599,530
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	1
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	364,370
Pa	rt XII Financial Statements and Reporting		
	Check if Schedule O contains a response or note to any line in this Part XII		🛛

Vec No

			103	
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," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			
	□ Separate basis □ Consolidated basis □ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
	□ Separate basis □ Consolidated basis □ Both consolidated and separate basis			
с	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		No
	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 Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	Зb		

**Additional Data** 

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