WEGNER CPAS LLP 230 PARK AVE FL 3 NEW YORK, NY 10169-0005

UNITED TO PROTECT DEMOCRACY 2020 PENNSYLVANIA AVE NW, 163 WASHINGTON, DC 20006-1811

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** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. В

<u>A I</u>	or the	e 2022 calendar year, or tax year beginning ar	ia enaing						
В	Check if applicabl	C Name of organization		D Employer identified	cation number				
	Addre								
	Name chang	Doing business as		81-48272	60				
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number					
	□Final return	2020 PENNSYLVANIA AVE NW	163	202-695-					
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$ 13,280,811.					
	Amen return	WASHINGTON, DC 20000-1811		H(a) Is this a group re	eturn				
	Application	F Name and address of principal officer: UUSIIN FLORENCE		for subordinates	? Yes X No				
_	pendi	SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No				
<u>1</u>	Гах-ех	empt status: $\boxed{}$ 501(c)(3) $\boxed{\mathbf{X}}$ 501(c)($\boxed{4}$) (insert no.) $\boxed{}$ 4947(a)(1) or 527	If "No," attach a	list. See instructions				
	Vebsi			H(c) Group exemption					
		organization: X Corporation Trust Association Other	L Year	of formation: 2016 N	1 State of legal domicile: DC				
Pa	art I	Summary							
a)	1	Briefly describe the organization's mission or most significant activities: $\underline{\text{THE}}$							
ŭ		DEMOCRACY IS TO PREVENT OUR DEMOCRACY FR	OM DEC	LINING INTO	A MORE				
rna	2	Check this box if the organization discontinued its operations or disp	osed of more	than 25% of its net ass	ets.				
ove	3	Number of voting members of the governing body (Part VI, line 1a)		3	4				
<u>ن</u> «	4	Number of independent voting members of the governing body (Part VI, line 1b)			3				
es &	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)			0				
Ϋ́	6	Total number of volunteers (estimate if necessary)			3				
Activities & Governance	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.				
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u></u>		0.				
				Prior Year	Current Year				
Revenue	8	Contributions and grants (Part VIII, line 1h)		1,538,676.	13,192,018.				
	9	Program service revenue (Part VIII, line 2g)		0.	0.				
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		72,904.	88,793.				
ш	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.				
_	_	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,611,580.	13,280,811.				
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		446,230.	820,000.				
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.				
Se	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10		702,137.	827,451.				
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		5,739.	5,705.				
ďx	. b		855.	225 551					
ш	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		226,564.	2,328,687.				
	1	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,380,670.	3,981,843.				
	19	Revenue less expenses. Subtract line 18 from line 12		230,910.	9,298,968.				
Net Assets or			Be	eginning of Current Year	End of Year				
Sset	20	Total assets (Part X, line 16)		6,620,897.	15,192,937.				
H. A.	21	Total liabilities (Part X, line 26)		404,416.	402,469.				
		Net assets or fund balances. Subtract line 21 from line 20		6,216,481.	14,790,468.				
	art II								
		Ities of perjury, I declare that I have examined this return, including accompanying schedu			knowledge and belief, it is				
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of	wnich preparer	nas any knowledge.					
٠.		Signature of officer		I Date					
Sig				Date					
Her	e	JUSTIN FLORENCE, SECRETARY Type or print name and title							
				Date Check	PTIN				
Dale		Print/Type preparer's name Preparer's signature YIGIT UCTUM, CPA YIGIT UCTUM, CI							
Paid			r A		9-0974031				
	Darer			Firm's EIN 3	9-0314031				
use	Only	Firm's address 230 PARK AVE FL 3 NEW YORK, NY 10169-0005		Dhana - / 2	12) 551-1724				
N 4 = -	, +la = "	· · · · · · · · · · · · · · · · · · ·		Priorie no. (Z					
ivia	y une II	RS discuss this return with the preparer shown above? See instructions			X Yes No				

Га	Obselvi Oshadala Osaatsiga ayaa ayaa ayaada ta ayaaliga igabii Badiii	X
_	Check if Schedule O contains a response or note to any line in this Part III	A
1	Briefly describe the organization's mission: THE MISSION OF UNITED TO PROTECT DEMOCRACY IS TO PREVENT OUR DEMOCRACY.	CDACV
	FROM DECLINING INTO A MORE AUTHORITARIAN FORM OF GOVERNMENT. WE DO	
	THIS BY WORKING TO STRENGTHEN THE CHECKS AND BALANCES THAT HAVE HE	תחק
	THE EXECUTIVE BRANCH ACCOUNTABLE TO THE LAWS AND LONGSTANDING	
2	Did the organization undertake any significant program services during the year which were not listed on the] (37)
		Yes X No
	If "Yes," describe these new services on Schedule O.	
3		Yes X 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 measured by expe	nses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expens	es, and
	revenue, if any, for each program service reported.	
4a		<u> </u>
	UNITED TO PROTECT DEMOCRACY CONFRONTS THREATS TO OUR DEMOCRACY BY	
	ENGAGING IN LITIGATION, ADVOCATING FOR POLICY SOLUTIONS, AND	
	PARTICIPATING IN PUBLIC COMMUNICATIONS AND ORGANIZING EFFORTS.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$	
40	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	,
	·	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)	
-ru		
40	2 591 609	
4e		orm 990 (2022)
	- F	OHH 333 (2022)

Part IV | Checklist of Required Schedules

			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		X
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
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		X
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		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
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		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		<u> </u>
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	X	
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	X	
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		X
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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		37	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			٦,
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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	441		x
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b		
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	4.5		x
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
16		16		x
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		
17		17		x
18	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	-''-		 ^
10		18		x
19	1c and 8a? If "Yes," complete Schedule G, Part II	10		 ^
13	·	19		x
20a	complete Schedule G, Part III	20a		X
		20a		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
4 I	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
	Gordon Gordon Corractor, Gordon (79), mile 1: 11 165. Complete Gorleuule I, Faits I aliu II			L

Form	1990 (2022) UNITED TO PROTECT DEMOCRACY 01-402	7260	P	age
Pa	rt IV Checklist of Required Schedules (continued)		Yes	Na
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		res	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
	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		├
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		\vdash
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	050		x
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
Ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L. Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	. 27		Х
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		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M			Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			- v
24	contributions? If "Yes," complete Schedule M			X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Schedule N, Part I</i>	. 31		
32		32		X
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	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	<u> </u>	<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			l
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	. 37	-	X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
Pa	Note: All Form 990 filers are required to complete Schedule O	38	X	
га				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
12	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1	162	140
h		o l		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

232004 12-13-22

Form **990** (2022)

(gambling) winnings to prize winners?

Form 990 (2022) UNITED TO PROTECT DEMOCRACY

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

					Yes	No			
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	0						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	L	2b					
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		L	За		X			
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line $3b$, provide an explanation on Schedule	O		3b					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthority over, a							
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	L	4a		X			
b	If "Yes," enter the name of the foreign country		- 1						
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Action 114, Report of Financial Action	ccounts (FBAR).				.,,			
				5a		X			
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction.		···· ⊢	5b		X			
	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 th				v				
	any contributions that were not tax deductible as charitable contributions?		··· ├	6a	Х				
D	If "Yes," did the organization include with every solicitation an express statement that such contributi			CI-	Х				
7	were not tax deductible?			6b	Λ				
7	Organizations that may receive deductible contributions under section 170(c).	vices provided to the pay	012	70					
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser If "Yes." did the organization notify the donor of the value of the goods or services provided?		Г	7a 7b					
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	ne roquirod	··· ├	7.0					
C	to file Form 8282?			7c					
ч		7d	.	70					
e									
_	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?								
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		···	7f 7g					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	·	···	7h					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained								
	sponsoring organization have excess business holdings at any time during the year?		L	8					
9	9 Sponsoring organizations maintaining donor advised funds.								
а	a Did the sponsoring organization make any taxable distributions under section 4966?								
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		L	9b					
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	_						
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	-						
11	Section 501(c)(12) organizations. Enter:	1 1							
	Gross income from members or shareholders	11a	-						
b	Gross income from other sources. (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)	11b	-	40					
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1 1	-	12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	\dashv						
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?			13a					
a	Note: See the instructions for additional information the organization must report on Schedule O.			IJa					
h	Enter the amount of reserves the organization is required to maintain by the states in which the								
-	organization is licensed to issue qualified health plans	13b							
С	Enter the amount of reserves on hand	13c							
				14a		Х			
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul			14b					
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or									
	[15		Х					
16	If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	L	16		Х			
	If "Yes," complete Form 4720, Schedule O.								
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivities							
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		L	17					
	If "Yes," complete Form 6069.								

232005 12-13-22

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion 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			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent	3		
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		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
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		Х
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		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b		Х
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	(This coston is requested in contact of the cost of th		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	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?	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	Х	
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	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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	Х	
	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
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		х
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?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filedCA,CT,IL,MA,NJ,NY,OH,PA,RI			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)		availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.	,,		
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finan	cial	
	statements available to the public during the tax year.	rai N		
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	LAURA GOLDSTEIN - 202-695-6590			
	2020 PENNSYLVANIA AVE NW, 163, WASHINGTON, DC 20006-1811			

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

Employees, and Independent Contractors

Form 990 (2022)

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

X

Page 7

81-4827260

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 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEĆ) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A)	(B)					Jack	(D)	(E)	(F)	
Name and title	Average	(do	(C) Position (do not check more than one			l than c	one	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	rson i	s both	n an	compensation	compensation	amount of
	week (list any							from the	from related organizations	other compensation
	hours for	or dire	a l			ted		organization	(W-2/1099-MISC/	from the
	related	istee (truste		gy.	beusa		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	ual tr.	ional		ploye	t com	١.	1099-NEC)		and related organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) JUSTIN FLORENCE	1.50									
SECRETARY & LEGAL DIRECTOR		Х		Х				9,335.	0.	1,390.
(2) IAN BASSIN	0.70									
EXECUTIVE DIRECTOR				Х				6,378.	0.	442.
(3) JEFF BERMAN	1.00									
PRESIDENT		Х		Х				0.	0.	0.
(4) JERRY HAUSER	1.00									
TREASURER		Х		Х				0.	0.	0.
(5) RICHARD R. BUERY JR.	1.00									
DIRECTOR		Х						0.	0.	0.
		-								
		-								

Part	Section A. Officers, Directors, Trust	ees, Key Emp	loye	ees,			ghes	t C	ompensated Employee	s (continued)				
	(A)	(B)			_ (((D)	(E)			(F)	
	Name and title	Average	(do		Pos		l than d	one	Reportable	Reportable	,	Est	imate	b
		hours per	box,	, unles	ss per	son i	s both	n an	compensation	compensation	on	am	ount c)f
		week		Jer an	uau	recto	i / ii us	lee)	from	from related	I		other	
		(list any hours for	irecto						the	organization			ensat	
		related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MIS 1099-NEC)			m the Inizatio	
		organizations	ruste	l trus		99	npen		1099-NEC)	1099-1120)	' I	•	relate	
		below	dual t	rtiona	L	nploy	st cor	-	10001420)				nizatio	
		line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				9		
				_	_	_								
1b St	ubtotal								15,713.		0.	1	.,83	2.
с То	otal from continuation sheets to Part VII	, Section A							0.		0.			0.
	otal (add lines 1b and 1c)								15,713.		0.	1	.,83	2.
	otal number of individuals (including but n								eceived more than \$100,	000 of reportable	е			
cc	ompensation from the organization									·				0
												,	Yes	No
3 Di	d the organization list any former officer,	director, truste	ee, k	ey e	mpl	oye	e, or	hig	hest compensated empl	loyee on				
lin	ne 1a? If "Yes," complete Schedule J for si	uch individual		•		•		Ū		•		3		Х
	or any individual listed on line 1a, is the su										····			
ar	nd related organizations greater than \$150	0,000? If "Yes	" co	mple	ete S	Sche	dule	. <i>J f</i>	or such individual	Ü		4		Х
	d any person listed on line 1a receive or a													
	ndered to the organization? If "Yes." com	•				•			· ·		Г	5		Х
	n B. Independent Contractors											•		
1 Co	omplete this table for your five highest cor	mpensated ind	epe	nder	nt co	ontra	acto	rs th	nat received more than \$	100.000 of com	pensatio	on froi	m	
	e organization. Report compensation for t													
	(A)	<u>,</u>			<u> </u>				(B)			(C))	
	Name and business	address							Description of s	ervices	Co		, sation	I
REPU	BLICAN ACCOUNTABILITY	PROJEC	Т,	9	25				RESEARCH AND					
	ST NW, 5TH FLOOR, WA							- 1	COMMUNICATIO	NS SERVI	1.	500	,00	0.
	EYE CREATIVE, LLC							$\overline{}$	WEBSITE DESI				•	
	POPLAR AVE, TAKOMA P	ARK, MD	2	09	12				SERVICES			255	, 45	55.
	ESHIFT LLC	,						T					, = 0	
	N NIRVANA PL, TUCSON	, AZ 85	75	0				ŀ	POLLING RESE	ARCH		160	,00	0.

Form **990** (2022)

106,175.

IL 60674-0242

Total number of independent contractors (including but not limited to those listed above) who received more than

JENSEN HUGHES, INC.

P.O. BOX 7410242, CHICAGO,

\$100,000 of compensation from the organization

SECURITY SERVICES

Form 990 (2022) UNITED
Part VIII Statement of Revenue

			Check if Schedule O contains	a response o	or note to anv lin	e in this Part VIII			
						(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenuè excluded from tax under
							function revenue	business revenue	sections 512 - 514
SS	1	_	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues						
S S			Fundraising events						
fts,			Related organizations						
ij gi									
ons,			Government grants (contributions)	1e					
utic		T	All other contributions, gifts, grants, an		13 102 019				
ĕ			similar amounts not included above		13,192,018.				
ont		-	Noncash contributions included in lines 1a-1f	1g \$		12 102 010			
O g		n	Total. Add lines 1a-1f		Bustone Onda	13,192,018.			
					Business Code				
ce	2	а							
ervi		b							
S		С							
ran Sev		d							
Program Service Revenue		е							
<u>a</u>		f	All other program service revenue						
		g	Total. Add lines 2a-2f						
	3		Investment income (including divid	ends, intere	st, and				
			other similar amounts)			88,793.			88,793.
	4		Income from investment of tax-exe						
	5		Royalties						
				(i) Real	(ii) Personal				
	6	а	Gross rents 6a						
			Less: rental expenses 6b						
		С	Rental income or (loss) 6c						
			` '	Securities	(ii) Other				
			assets other than inventory 7a						
		b	Less: cost or other basis						
<u>o</u>		_	and sales expenses						
her Revenue		c	Gain or (loss) 7c						
ě			Net gain or (loss)		l				
푸			Gross income from fundraising events	I .	<u> </u>				
Oth	0	а	including \$						
١			contributions reported on line 1c).	_					
			•	I					
		L	Part IV, line 18						
			Less: direct expenses						
			Net income or (loss) from fundraisir						
	9	а	Gross income from gaming activities	I					
			Part IV, line 19						
			Less: direct expenses						
			Net income or (loss) from gaming a						
	10	а	Gross sales of inventory, less return	I					
			and allowances						
			Less: cost of goods sold						
-		С	Net income or (loss) from sales of in	nventory					
က္					Business Code				
Miscellaneous Revenue	11	а							
lan		b							
cell Sev		С							
Ais		d	All other revenue						
		е	Total. Add lines 11a-11d						
	12		Total revenue. See instructions			13,280,811.	0.	0.	88,793.

Form 990 (2022) UNITED TO PROTECT DEMOCRACY Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons				X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	820,000.	820,000.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
-	trustees, and key employees	17,545.	12,770.	3,069.	1,706
6	Compensation not included above to disqualified	•	,	•	•
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	655,933.	529,719.	96,060.	30,154
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	35,854.	28,880.	5,278.	<u>1,69</u> 6
9	Other employee benefits	70,113.	56,476.	10,320.	1,696 3,317 2,271
10	Payroll taxes	48,006.	38,669.	7,066.	2,271
11	Fees for services (nonemployees):				
а	Management				
b	Legal	30,075.		30,075.	
С	Accounting	59,663.		59,663.	
d	Lobbying	48,250.	48,250.		
е	Professional fundraising services. See Part IV, line 17	5,705.			5,705
f	Investment management fees				
g	,	444 040		445 000	
	column (A), amount, list line 11g expenses on Sch 0.)	441,048.	322,944.	116,080.	2,024
12	Advertising and promotion	10 105	5 050	2 560	205
13	Office expenses	10,125.	5,970.	3,760.	395 963
14	Information technology	34,889.	30,927.	2,999.	963
15	Royalties	42 220	24 024	6 217	1 000
16	Occupancy	42,239. 12,903.	34,024. 12,903.	6,217.	1,998
17	Travel	14,903.	12,903.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20 21	Payments to affiliates				
21 22	Depreciation, depletion, and amortization	34,377.	27,691.	5,060.	1,626
23	Insurance	14,653.	2,009.	12,644.	1,020
24 24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A).	, , , , ,	_,,,,,,	, 311	
_	amount, list line 24e expenses on Schedule 0.) COMMUNICATIONS	1,600,465.	1,600,465.		
a h		1,000,403.	1,000,403.		
b					
c d					
	All other expenses				
е 25	Total functional expenses. Add lines 1 through 24e	3,981,843.	3,571,697.	358,291.	51,855
<u>25</u> 26	Joint costs. Complete this line only if the organization	2,202,020	-,-,-,-,-,-		32,000
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2022)
Part X Balance Sheet

Par	t A	Balance Sneet					
		Check if Schedule O contains a response or no	te to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			171,221.	1	230,240
	2	Savings and temporary cash investments			847,622.	2	1,052,803
	3	Pledges and grants receivable, net			300,000.	3	8,717,287
	4	Accounts receivable, net		4			
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, sub-	stantial o	contributor, or 35%			
		controlled entity or family member of any of the	ese pers	ons		5	
	6	Loans and other receivables from other disqua					
		under section 4958(f)(1)), and persons describe	ed in sec	tion 4958(c)(3)(B)		6	
2	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
₹	9	Prepaid expenses and deferred charges			1,836.	9	11,075
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		255,350.	_		
	b	Less: accumulated depreciation		34,377.	0.		220,973
	11	Investments - publicly traded securities	5,292,158.	11	2,309,210		
	12	Investments - other securities. See Part IV, line		12	2,643,289		
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets	0.060	14	0.060		
	15	Other assets. See Part IV, line 11		8,060.	15	8,060	
_	16	Total assets. Add lines 1 through 15 (must eq			6,620,897.	16	15,192,937
	17	Accounts payable and accrued expenses		66,674.	17	65,316	
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
es	22	Loans and other payables to any current or for					
Liabilities		trustee, key employee, creator or founder, sub-				00	
E E	00	controlled entity or family member of any of the				22	
	23 24	Secured mortgages and notes payable to unre Unsecured notes and loans payable to unrelate		· · · · · · · · · · · · · · · · · · ·		23 24	
	2 4 25	Other liabilities (including federal income tax, p				24	
	23	parties, and other liabilities not included on line					
		of Schedule D	•		337,742.	25	337,153
	26				404,416.)	402,469
1		Organizations that follow FASB ASC 958, ch					
es		and complete lines 27, 28, 32, and 33.					
<u>ا ۾</u>	27				5,916,481.	27	6,073,181
gal!	28	Net assets with donor restrictions			300,000.	28	8,717,287
힏		Organizations that do not follow FASB ASC			·		
- ₽		and complete lines 29 through 33.	ŕ	_			
ğ	29	Capital stock or trust principal, or current fund	S			29	
Sets	30	Paid-in or capital surplus, or land, building, or				30	
As	31	Retained earnings, endowment, accumulated i				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			6,216,481.	32	14,790,468
_	33				6,620,897.	33	15,192,937

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1 2 3 4 5 6 7 8 9 10	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain on Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,	1 2 3 4 5 6 7 8	3,9 9,2 6,2 -4	80,8 81,8 98,9 16,4 24,9	843. 968. 81.
	column (B))	10	14,7	90,4	68.
Pa	rt 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:		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a			2	a	<u> </u>
h	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?		2	ь Х	
-	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate				
	consolidated basis, or both: X 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				_v
	review, or compilation of its financial statements and selection of an independent accountant?		2	c.	<u> </u>
٥-	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.			
за	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				x
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3	a	+^-
a	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, and like audit or audits.	ed audit	_		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			b rm 990	(0000)
			Fo	rm 330	(2022) י

232012 12-13-22

Schedule B

Schedule of Contributors

Attach to Form 990 or Form 990-PF.

OMB No. 1545-0047

Schedule B (Form 990) (2022)

Department of the Treasury Internal Revenue Service

Name of the organization

(Form 990)

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

Employer identification number

U1	NITED TO PROTECT DEMOCRACY	81-4827260					
Organization type (check of	one):						
Filers of:	Section:						
Form 990 or 990-EZ	X 501(c)(4) (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
• •	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le. See instructions.					
General Rule							
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor						
Special Rules							
sections 509(a)(1) contributor, during	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) I, line 1. Complete Parts I and II.	d that received from any one					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.							
year, contributions is checked, enter l purpose. Don't co	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
answer "No" on Part IV, line	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fe 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, g requirements of Schedule B (Form 990).	• •					

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization Employer identification number

UNITED TO PROTECT DEMOCRACY

81-4827260

Page 2

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a)	(b)	(c)	(d)
	Name, address, and ZIP + 4	\$ 10,367,289.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Name, address, und 2n + 4	\$ 800,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4_		\$ 250,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 200,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$\$85,000.	Person X Payroll

Name of organization Employer identification number

UNITED TO PROTECT DEMOCRACY

81-4827260

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$150,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$ <u>100,000.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	Name, address, and ZIF + 4	\$35,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12		\$ 25,000.	Person X Payroll

Name of organization Employer identification number

UNITED TO PROTECT DEMOCRACY

81-4827260

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16	Name, address, and ZIF + 4	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
17		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
18		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

UNITED TO PROTECT DEMOCRACY

81-4827260

Part I	Contributors (see instructions). Use duplicate copies of Part I if add	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19		\$5,000 .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
20		\$5,000 .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

UNITED TO PROTECT DEMOCRACY

81-4827260

Part II	Noncash Property (see instructions). Use duplicate copies of Part	Il if additional space is needed.	1 402/200
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		<u> </u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
223453 11-15	-22		Schedule B (Form 990) (2022)

Name of organization **Employer identification number** UNITED TO PROTECT DEMOCRACY 81-4827260 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

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 Inspection

Name of the organization

UNITED TO PROTECT DEMOCRACY

Employer identification number 81-4827260

Par	t I Organizations Maintaining Donor Advised F	unds or Other Similar	r Funds or Ac	counts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line 6			·
		(a) Donor advised fund:	s (b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writ	ing that the assets held in do	onor advised fund	ds
	are the organization's property, subject to the organization's exc	clusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor advis	sors in writing that grant fund	ds can be used o	nly
	for charitable purposes and not for the benefit of the donor or do	onor advisor, or for any other	purpose conferr	ing
	impermissible private benefit?			
Par	t II Conservation Easements. Complete if the organ	ization answered "Yes" on F	orm 990, Part IV,	line 7.
1	Purpose(s) of conservation easements held by the organization (`		
	Preservation of land for public use (for example, recreation	n or education) Prese	ervation of a histo	orically important land area
	Protection of natural habitat	Prese	ervation of a certi	fied historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified	conservation contribution in	the form of a co	
	day of the tax year.			Held at the End of the Tax Year
_				2a
b				2b
С.	Number of conservation easements on a certified historic structu	. ,		2c
d	Number of conservation easements included in (c) acquired afte			
•		and an elementary delication and an elementary		2d
3	Number of conservation easements modified, transferred, release	sed, extinguished, or termina	ted by the organi	zation during the tax
	year	and to be about		
4	Number of states where property subject to conservation easem	•		
5	Does the organization have a written policy regarding the period		-	Yes No
6	violations, and enforcement of the conservation easements it ho Staff and volunteer hours devoted to monitoring, inspecting, har			
U	Stall and volunteer hours devoted to monitoring, inspecting, har	iding of violations, and emo	reing conservatio	in easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling	n of violations, and enforcing	conservation eas	sements during the year
•	7 thount of expenses mounted in monitoring, inspecting, harding	g or violations, and emoroting	CONSCIVATION CA	sements daming the year
8	Does each conservation easement reported on line 2(d) above so	atisfy the requirements of se	ction 170(h)(4)(B)	(i)
_	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation			
	balance sheet, and include, if applicable, the text of the footnote		•	
	organization's accounting for conservation easements.	3		
Par		rt, Historical Treasure	s, or Other S	imilar Assets.
	Complete if the organization answered "Yes" on Form 99	0, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958, r	not to report in its revenue st	atement and bala	ance sheet works
	of art, historical treasures, or other similar assets held for public	exhibition, education, or res	earch in furtherar	ice of public
	service, provide in Part XIII the text of the footnote to its financia	al statements that describes	these items.	
b	If the organization elected, as permitted under FASB ASC 958, t	o report in its revenue stater	nent and balance	sheet works of
	art, historical treasures, or other similar assets held for public ex	hibition, education, or resear	ch in furtherance	of public service,
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
	(ii) Assets included in Form 990, Part X			\$
2	If the organization received or held works of art, historical treasures			
	the following amounts required to be reported under FASB ASC	958 relating to these items:		
а	Revenue included on Form 990, Part VIII, line 1			\$
b	Assets included in Form 990, Part X			\$
LHA	For Paperwork Reduction Act Notice, see the Instructions fo	r Form 990.		Schedule D (Form 990) 2022

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection frems (check all that apply): a	Par	t III Organizations Maintaining C	ollections of Ar	t, Histo	orical Tre	asures, or	Other	Simila	Assets	(contin	ued)	
a Public exhibition d	3	Using the organization's acquisition, accession	on, and other record	s, check	any of the t	following that i	make sig	nificant u	ise of its			
b Scholarly research e Other Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. Provide a description of the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds arteriated as part of the organizations. Organization answered "Yes" on Form 990, Part IX, line 9, or reported an amount on Form 990, Part X, Line 21. Tall is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No If "Yes," explain the arrangement in Part XIII and complete the following table: Complete Part Yes, Par		collection items (check all that apply):										
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Excrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Ia is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Ia is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Ia is the organization and part A amount C Beginning balance C Beginning balance G Bistributions during the year 1 Ending balance Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No If Yes, explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part X, line 10. Ia Beginning of year balance C Not investment earnings, gains, and losses If Administrative expenses G Policy or contributions C Not investment earnings, gains, and losses If Administrative expenses G Policy or quasi-endowment 96 C Term endowment funds not in the possession of the organization that are held and administered for the organization by: If Part W I Cand, Buildings, and Equipment. Complete if the organizations B Permanent endowment funds not in the possession of the organization that are held and administered for the organization by: If Part W I Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.	а	Public exhibition	d	ı 🔲	Loan or exc	hange prograr	m					
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part YI	b											
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part V Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 11 d. 1 if "Yes," explain the arrangement in Part XIII and complete the following table: 2 Beginning balance 1 if	С	Preservation for future generations										
To be sold to raise funds rather than to be maintained as part of the organization's collection?	4	Provide a description of the organization's co	ollections and explain	n how th	ey further th	ne organizatior	n's exem	pt purpos	se in Part	XIII.		
Part W Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	5	During the year, did the organization solicit o	r receive donations o	of art, his	storical treas	sures, or other	similar a	assets				
reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount 1c		to be sold to raise funds rather than to be ma	aintained as part of t	he organ	nization's co	llection?				Yes		No
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	Par	t IV Escrow and Custodial Arrang	gements. Comple	ete if the	organizatio	n answered "\	Yes" on F	orm 990	, Part IV, I	ine 9, or		
on Form 990, Part X? b if "Yes," explain the arrangement in Part XIII and complete the following table: Amount 1c Beginning balance 1d		reported an amount on Form 990, Par	rt X, line 21.									
b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance	1a	Is the organization an agent, trustee, custodi	an or other intermed	iary for c	contribution	s or other asse	ets not in	cluded				
b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance		on Form 990, Part X?								Yes		No
c Beginning balance d Additions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No If 'Yes'; explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. [a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (e) Four years back (e) Four years back (f) Three years back (f)	b											
d Additions during the year 1d 1e 1f 1d 1e 1f 1e 1f 1f 1f 1f 1f										Amount		
d Additions during the year 1d 1e 1f 1	С	Beginning balance						1c				
e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. [a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (fo) Three years (fo) Three years (fo) Three years (1d				
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IX, line 11. See Form 990, Part IX, line 10. Complete if the organization and Form 990, Part IX, line 11. See Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IX, line 11. See Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IX, line 11. See Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11. See Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11. See Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11. See Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11. See Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11. See Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11. See Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11. See Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11. See Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 99								1e				
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IX, line 11. See Form 990, Part IX, line 10. Complete if the organization and Form 990, Part IX, line 11. See Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IX, line 11. See Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IX, line 11. See Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11. See Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11. See Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11. See Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11. See Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11. See Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11. See Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11. See Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11. See Form 990, Part IX, line 10. Complete if the organization answered "Yes" on Form 99	_							1f				
Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (d) Three years back (e) Four years back	2a							y?	\square	Yes		No
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four years	b											
Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment 96 b Permanent endowment 96 The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations (iii) Related organizations b If "Yes" on line 3a(ii), are the related organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment E Casehold improvements d Equipment C Equip	Pai	t V Endowment Funds. Complete i	f the organization an	swered	"Yes" on Fo	rm 990, Part I	V, line 10).				
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships c Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment 9% b Permanent endowment 9% The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) basis (other) depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other 255,350. 34,377. 220,973.			(a) Current year	(b) P	rior year	(c) Two years	s back (d) Three y	ears back	(e) Four	years	back
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	1a	Beginning of year balance										
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	b	Contributions										
e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	С											
e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	d	Grants or scholarships										
g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	е											
g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment		and programs										
g End of year balance	f											
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	g											
b Permanent endowment	2		ent year end balance	e (line 1g	, column (a)) held as:						
c Term endowment	а	Board designated or quasi-endowment		%								
The percentages on lines 2a, 2b, and 2c should equal 100%. 3a	b	Permanent endowment	%	_								
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment e Other Other 255,350. 34,377. 220,973.	С	Term endowment	%									
organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations (iv)		The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.									
organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations (iv)	За	Are there endowment funds not in the posse	ssion of the organiza	tion that	t are held ar	nd administere	ed for the					
(ii) Unrelated organizations (iii) Related organizations (·	· ·							ſ	Yes	No
(ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value b Buildings c Leasehold improvements d Equipment e Other 255,350. 34,377. 220,973.										3a(i)		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment e Other 255,350. 34,377. 220,973.										3a(ii)		
4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other 255,350. 34,377. 220,973.	b	If "Yes" on line 3a(ii), are the related organiza	itions listed as requir	ed on So	chedule R?					3b		
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other 255,350. 34,377. 220,973.												
Description of property (a) Cost or other basis (investment) 1a Land b Buildings c Leasehold improvements d Equipment e Other Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 255,350. 34,377. 220,973.	Par											
basis (investment) basis (other) depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other 255,350. 34,377. 220,973.		Complete if the organization answered	d "Yes" on Form 990), Part IV	', line 11a. S	See Form 990,	Part X, li	ne 10.				
b Buildings C Leasehold improvements c Leasehold improvements C Leasehold improvements d Equipment C Leasehold improvements e Other 255,350. 34,377. 220,973.		Description of property	1 ' '			I			ed	(d) Book	valu	ie
b Buildings C Leasehold improvements c Leasehold improvements C Leasehold improvements d Equipment C Leasehold improvements e Other 255,350. 34,377. 220,973.	1a	Land										
c Leasehold improvements d Equipment d Equipment 255,350. 34,377. 220,973.												
d Equipment												
e Other 255,350. 34,377. 220,973.			I									
			I		25	5,350.		34,3	77.	220	, 9	73.
Total: Add lines to through te. (Column to) must equal Form 990. Part X. Column (B). line 10c.)				X. colum								

Schedule D (Form 990) 2022

	ROTECT DEMOCRA	ACY 81	-4827260 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" o			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other	0 642 000		
(A) MONEY MARKET FUNDS	2,643,289.	END-OF-YEAR MARKET	VALUE
(B)			
(C)			
(D)			
(E)			
(G) (H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	2,643,289.		
Part VIII Investments - Program Related.	2,013,203		
Complete if the organization answered "Yes" of	on Form 990. Part IV. line 1	1c. See Form 990. Part X. line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1)	.,	•	
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" or	n Form 990, Part IV, line 1	1d. See Form 990, Part X, line 15.	
(a) [Description		(b) Book value
<u>(1)</u>			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	<u>15.)</u>		
Part X Other Liabilities.	5 000 B 1 W 11 4	14 446 D D 000 D 1 V II 0 D	
Complete if the organization answered "Yes" o	on Form 990, Part IV, line 1	11e or 11f. See Form 990, Part X, line 25	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes	DO TECE		227 152
(2) DUE TO PROTECT DEMOCRACY P	KOJECT		337,153.
(3)			
(4)			
(5)			
<u>(6)</u>			
(7)			I

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2022

337,153.

(8) (9)

	dule D (Form 990) 2022 UNITED TO PROTECT DEMOCI				4827260 Page 4
Part	·		Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, lin	e 12a.		Ι	10 055 000
				1	12,855,830.
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 - 1	121 001		
	Net unrealized gains (losses) on investments		-424,981.		
	Donated services and use of facilities	l I			
	Recoveries of prior year grants				
	Other (Describe in Part XIII.)				121 001
	Add lines 2a through 2d			2e	-424,981. 13,280,811.
	Subtract line 2e from line 1			3	13,200,011.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1.1			
	Investment expenses not included on Form 990, Part VIII, line 7b				
	Other (Describe in Part XIII.)				^
	Add lines 4a and 4b			4c	0.
Part	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) **TAIL Reconciliation of Expenses per Audited Financial Sta	tomonte With	Evnoncos por E	5 Potur	13,280,811.
Pari	·		Expenses per r	tetur	11.
	Complete if the organization answered "Yes" on Form 990, Part IV, lin				2 001 042
	Total expenses and losses per audited financial statements			1	3,981,843.
	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1			
	Donated services and use of facilities	l I			
	Prior year adjustments	_			
	Other losses				
	Other (Describe in Part XIII.)				^
	Add lines 2a through 2d			2e	0. 3,981,843.
	Subtract line 2e from line 1			3	3,301,043.
	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1			
	Investment expenses not included on Form 990, Part VIII, line 7b				
	Other (Describe in Part XIII.)			_	^
	Add lines 4a and 4b			4c	0. 3,981,843.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 t XIII Supplemental Information.	<u>3.)</u>		5	3,901,043.
		. Dart IV lines dh	and Oh. Dart V. line. 4	. D4	V line Or Dord VI
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4			; Part .	x, line 2; Part XI,
ines 2	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide an	y additional inforn	nation.		

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization UNITED TO	PROTECT	DEMOCRACY					Employer identification number $81-4827260$
Part I General Information on Grants a							
Does the organization maintain records to criteria used to award the grants or assistance. Describe in Part IV the organization's properties.	tance?ocedures for monit	oring the use of grant	funds in the United	States.			X Yes No
Part II Grants and Other Assistance to I recipient that received more than \$\frac{1}{2}\$					anization answered "1	res" on Form 990, Part	Tiv, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
AMERICAN UNITY FUND P.O. BOX 833	46-1707548	E01/G)/A)	610,000	0.			TO SUPPORT PROGRAM ACTIVITIES UNDER SECTION 501(C)(4) OF THE IRS TAX CODE
ANNANDALE, VA 22003 NORTH FUND 1101 CONNECTICUT AVE NW STE 450 WASHINGTON, DC 20036	83-4011547		50,000.	0.			TO SUPPORT PROGRAM ACTIVITIES UNDER SECTION 501(C)(4) OF THE IRS TAX CODE
LEADERSHIP NOW PROJECT 1401 K STREET NW WASHINGTON, DC 20005	82-1780610		50,000.	0.			TO SUPPORT PROGRAM ACTIVITIES UNDER SECTION 501(C)(4) OF THE IRS TAX CODE
BLACK ECONOMIC ALLIANCE 700 13TH STREET NW WASHINGTON, DC 20005	82-4578595	501(C)(4)	50,000.	0.			TO SUPPORT PROGRAM ACTIVITIES UNDER SECTION 501(C)(4) OF THE IRS TAX CODE
KEYSTONE RESEARCH CENTER 412 N 3RD ST HARRISBURG, PA 17101	25-1776998	501(C)(3)	25,000.	0.			TO SUPPORT PROGRAM ACTIVITIES UNDER SECTION 501(C)(3) OF THE IRS TAX CODE
MORMON WOMEN FOR ETHICAL GOVERNMENT - 1878 W. 12600 STE. 321 - RIVERTON, UT 84065	82-1803803		20,000.	0.			TO SUPPORT PROGRAM ACTIVITIES UNDER SECTION 501(C)(4) OF THE IRS TAX CODE
Enter total number of section 501(c)(3) andEnter total number of other organizations	•	•					

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

Schedule I (Form 990) 2022

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RAINEY CENTER FREEDOM PROJECT 317 A STREET SE WASHINGTON, DC 20003	85-2354103	501(C)(4)	15,000.	0.			TO SUPPORT PROGRAM ACTIVITIES UNDER SECTION 501(C)(4) OF THE IRS TAX CODE
		<u> </u>	I				L

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information	on required in Part I, lin	e 2; Part III, columr	i (b); and any other ac	Iditional information.	
ART I, LINE 2:					
RIOR TO MAKING A GRANT, UNITED	TO PROTECT	DEMOCRACY	(UPD) IDEN	TIFIES	
RANTEES THAT ARE CONDUCTING WOF	RK THAT IS C	ONSISTENT	WITH UPD'S	MISSION.	
RANT RECOMMENDATIONS ARE THEN S	SUBMITTED BY	STAFF TO	A MANAGER	FOR INITIAL	
PPROVAL. ONCE INITIALLY APPROVE	ED, THE REQU	EST IS TH	EN FORWARDE	D TO THE	
PERATIONS TEAM FOR FINAL LEGAL	AND FINANCI	AL REVIEW	. UPD REQUI	RES GRANTEES	
O SIGN A GRANT AGREEMENT (MAINT					
ECIPIENT IS A BONA FIDE 501(C)(
VLY TO SUPPORT 501(C)(4)-PERMIS	(=) WIN IIIVI	TILL GIAIN	T THOUGHT WITH	- 70 ODD	

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

UNITED TO PROTECT DEMOCRACY 81-4827260 FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: AUTHORITARIAN FORM OF GOVERNMENT. WE DO THIS BY WORKING TO STRENGTHEN THE CHECKS AND BALANCES THAT HAVE HELD THE EXECUTIVE BRANCH ACCOUNTABLE TO THE LAWS AND LONGSTANDING PRACTICES THAT HAVE PROTECTED OUR DEMOCRACY THROUGH BOTH DEMOCRATIC AND REPUBLICAN ADMINISTRATIONS. LINE 1, DESCRIPTION OF ORGANIZATION MISSION: PART III, PRACTICES THAT HAVE PROTECTED OUR DEMOCRACY THROUGH BOTH DEMOCRATIC AND REPUBLICAN ADMINISTRATIONS. FORM 990, PART VI, SECTION A, LINE 8B: THE ORGANIZATION DOES NOT HAVE ANY COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS REVIEWED BY THE EXECUTIVE DIRECTOR ALONG WITH THE MANAGING DIRECTORS, THE FINANCE TEAM, OUR ACCOUNTING PARTNER, AND LEGAL COUNSEL BEFORE THE RETURN IS FILED WITH THE IRS. A COPY OF THE RETURN IS ALSO PROVIDED TO THE MEMBERS OF THE GOVERNING BODY BEFORE THE RETURN IS FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

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

ANNUALLY ALL DIRECTORS AND OFFICERS COMPLETE AND SIGN A STATEMENT THAT PROVIDES INFORMATION REGARDING THEIR INTERESTS AND THOSE OF THEIR FAMILY MEMBERS THAT COULD GIVE RISE TO CONFLICTS. THE MEMBERS OF THE GOVERNING BODY MAKE DETERMINATIONS OF WHETHER A CONFLICT EXISTS AND REVIEW ACTUAL

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Schedule O (Form 990) 2022

Schedule O (Form 990) 2022 Page 2

Name of the organization UNITED TO PROTECT DEMOCRACY

Employer identification number 81-4827260

CONFLICTS. ANY PERSON WITH A CONFLICT IS PROHIBITED FROM PARTICIPATING IN THE GOVERNING BODY'S DELIBERATIONS AND DECISIONS IN THE TRANSACTION.

FORM 990, PART VI, SECTION B, LINE 15:

COMPENSATION OF THE EXECUTIVE DIRECTOR AND OFFICERS IS DETERMINED BY THE

BOARD OF DIRECTORS BASED ON A MARKET ANALYSIS OF COMPARABLE POSITIONS AND

VALUATION OF SKILL SETS. COMPENSATION WAS LAST REVIEWED BY THE BOARD IN

MARCH 2023.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

ADDITIONAL INFORMATION REGARDING PART VII

THE PROTECT DEMOCRACY PROJECT AND UNITED TO PROTECT DEMOCRACY ARE NOT

"RELATED ORGANIZATIONS" AS THAT TERM IS DEFINED IN THE FORM 990,

GLOSSARY.

UNITED TO PROTECT DEMOCRACY HAS A COST SHARING AGREEMENT WITH PROTECT

DEMOCRACY PROJECT, A 501(C)(3) THAT SHARES UNITED TO PROTECT

DEMOCRACY'S MISSION. UNDER THE AGREEMENT, UNITED TO PROTECT DEMOCRACY

PAYS PROTECT DEMOCRACY PROJECT FOR ITS ALLOCABLE SHARE OF PERSONNEL,

EQUIPMENT, FACILITIES AND OTHER RESOURCES.

PURSUANT TO THEIR AGREEMENT, UNITED TO PROTECT DEMOCRACY REIMBURSED

PROTECT DEMOCRACY PROJECT FOR ITS SHARE OF COMPENSATION OF THE

FOLLOWING INDIVIDUALS LISTED IN PART VII. FOR THE SAKE OF CLARITY, EACH

COMPENSATED INDIVIDUAL LISTED IN PART VII ON EITHER PDP'S OR UPD'S FORM

Schedule O (Form 990) 2022

Schedule O (Form 990) 2022 Page 2

Name of the organization
UNITED TO PROTECT DEMOCRACY
Employer identification number 81-4827260

990 IS LISTED BELOW.

DURING THE CALENDAR YEAR 2022, IAN BASSIN SPENT, EACH WEEK, AN AVERAGE

OF 0.7 HOURS WORKING EACH WEEK FOR UNITED TO PROTECT DEMOCRACY AND 39.3

HOURS WORKING FOR PROTECT DEMOCRACY PROJECT. TOTAL COMPENSATION ON THE

W2 WAS \$364,483 (\$358,105 ALLOCATED TO PROTECT DEMOCRACY PROJECT AND

\$6,378 ALLOCATED TO UNITED TO PROTECT DEMOCRACY) AND THE TOTAL

ESTIMATED AMOUNT OF OTHER COMPENSATION WAS \$25,258 (\$24,816 ALLOCATED

TO PROTECT DEMOCRACY PROJECT AND \$442 ALLOCATED TO UNITED TO PROTECT

DEMOCRACY).

DURING THE CALENDAR YEAR 2022, JUSTIN FLORENCE SPENT, EACH WEEK, AN AVERAGE OF 1.5 HOURS WORKING FOR UNITED TO PROTECT DEMOCRACY AND 38.5 HOURS WORKING FOR PROTECT DEMOCRACY PROJECT. TOTAL COMPENSATION ON THE W2 WAS \$248,944 (\$239,609 ALLOCATED TO PROTECT DEMOCRACY PROJECT AND \$9,335 ALLOCATED TO UNITED TO PROTECT DEMOCRACY) AND THE TOTAL ESTIMATED AMOUNT OF OTHER COMPENSATION WAS \$37,071 (\$35,681 ALLOCATED TO PROTECT DEMOCRACY).

DURING THE CALENDAR YEAR 2022, VICTORIA CANAVOR SPENT, EACH WEEK, AN

AVERAGE OF 40.0 HOURS WORKING FOR PROTECT DEMOCRACY PROJECT. TOTAL

COMPENSATION ON THE W2 WAS \$239,350 AND THE TOTAL ESTIMATED AMOUNT OF

OTHER COMPENSATION WAS \$11,746.

DURING THE CALENDAR YEAR 2022, BENJAMIN BERWICK SPENT, EACH WEEK, AN

AVERAGE OF 0.8 HOURS WORKING EACH WEEK FOR UNITED TO PROTECT DEMOCRACY

AND 39.2 HOURS WORKING FOR PROTECT DEMOCRACY PROJECT. TOTAL

Schedule O (Form 990) 2022 Page 2

Employer identification number

Name of the organization UNITED TO PROTECT DEMOCRACY 81-4827260 COMPENSATION ON THE W2 WAS \$221,826 (\$217,389 ALLOCATED TO PROTECT DEMOCRACY PROJECT AND \$4,437 ALLOCATED TO UNITED TO PROTECT DEMOCRACY) AND THE TOTAL ESTIMATED AMOUNT OF OTHER COMPENSATION WAS \$13,582 (\$13,310 ALLOCATED TO PROTECT DEMOCRACY PROJECT AND \$272 ALLOCATED TO UNITED TO PROTECT DEMOCRACY).

DURING THE CALENDAR YEAR 2022, ANNE TINDALL SPENT, EACH WEEK, AN AVERAGE OF 0.5 HOURS WORKING EACH WEEK FOR UNITED TO PROTECT DEMOCRACY AND 39.5 HOURS WORKING FOR PROTECT DEMOCRACY PROJECT. TOTAL COMPENSATION ON THE W2 WAS \$219,176 (\$216,436 ALLOCATED TO PROTECT DEMOCRACY PROJECT AND \$2,740 ALLOCATED TO UNITED TO PROTECT DEMOCRACY) AND THE TOTAL ESTIMATED AMOUNT OF OTHER COMPENSATION WAS \$12,978 (\$12,816 ALLOCATED TO PROTECT DEMOCRACY PROJECT AND \$162 ALLOCATED TO UNITED TO PROTECT DEMOCRACY).

DURING THE CALENDAR YEAR 2022, KRISTY PARKER SPENT, EACH WEEK, AN AVERAGE OF 1.5 HOURS WORKING EACH WEEK FOR UNITED TO PROTECT DEMOCRACY AND 38.5 HOURS WORKING FOR PROTECT DEMOCRACY PROJECT. TOTAL COMPENSATION ON THE W2 WAS \$223,116 (\$214,749 ALLOCATED TO PROTECT DEMOCRACY PROJECT AND \$8,367 ALLOCATED TO UNITED TO PROTECT DEMOCRACY) AND THE TOTAL ESTIMATED AMOUNT OF OTHER COMPENSATION WAS \$12,464 (\$11,997 ALLOCATED TO PROTECT DEMOCRACY PROJECT AND \$467 ALLOCATED TO UNITED TO PROTECT DEMOCRACY).

DURING THE CALENDAR YEAR 2022, GENEVIEVE NADEAU SPENT, EACH WEEK, AN AVERAGE OF 1.8 HOURS WORKING EACH WEEK FOR UNITED TO PROTECT DEMOCRACY AND 38.2 HOURS WORKING FOR PROTECT DEMOCRACY PROJECT. TOTAL

COMPENSATION ON THE W2 WAS \$218,552 (\$208,717 ALLOCATED TO PROTECT

Schedule O (Form 990) 2022 Page **2**

Schedule O (Form 990) 2022		Page 2
Name of the organization UNITED TO PROTECT DEMO	CRACY	Employer identification number 81 – 4827260
DEMOCRACY PROJECT AND \$9,835 ALLOCAT	ED TO UNITED TO PROTEC	T DEMOCRACY)
AND THE TOTAL ESTIMATED AMOUNT OF OT	HER COMPENSATION WAS \$	23,143
(\$22,102 ALLOCATED TO PROTECT DEMOCR.	ACY PROJECT AND \$1,041	ALLOCATED TO
UNITED TO PROTECT DEMOCRACY).		
FORM 990, PART IX, LINE 11G, OTHER F	EES:	
IMPACT PROJECT:		
PROGRAM SERVICE EXPENSES		965.
MANAGEMENT AND GENERAL EXPENSES		0.
FUNDRAISING EXPENSES		0.
TOTAL EXPENSES		965.
SECURITY CONTRACTORS:		
PROGRAM SERVICE EXPENSES		0.
MANAGEMENT AND GENERAL EXPENSES		106,175.
FUNDRAISING EXPENSES		0.
TOTAL EXPENSES		106,175.
GOVEL TANGE GERMANA		
COMPLIANCE SERVICES: PROGRAM SERVICE EXPENSES		0.
MANAGEMENT AND GENERAL EXPENSES		3,602.
FUNDRAISING EXPENSES		0.
TOTAL EXPENSES		3,602.
	-	
DISCOVERY & DISPOSITION SERVICES:		
PROGRAM SERVICE EXPENSES		48,960.
MANAGEMENT AND GENERAL EXPENSES		0.
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Schedule O (Form 990) 2022	Page 2
Name of the organization UNITED TO PROTECT DEMOCRACY	Employer identification number 81-4827260
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	48,960.
COURT, FILING, AND TRANSCRIPTIONS FEES:	
PROGRAM SERVICE EXPENSES	25,402.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	25,402.
PAYROLL PROCESSING FEES:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	1,721.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	1,721.
BRAND DESIGN & MAINTENANCE:	
PROGRAM SERVICE EXPENSES	25,076.
MANAGEMENT AND GENERAL EXPENSES	4,582.
FUNDRAISING EXPENSES	1,473.
TOTAL EXPENSES	31,131.
CONSULTING:	
PROGRAM SERVICE EXPENSES	54,641.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	54,641.
POLLING SERVICES:	
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Schedule O (Form 990) 2022 Page **2**

Name of the organization UNITED TO PROTECT DEMOCRACY	Employer identification number 81-4827260
PROGRAM SERVICE EXPENSES	160,000.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	160,000.
STATE DATA & RECORDS:	
PROGRAM SERVICE EXPENSES	7,900.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	7,900.
INDEPENDENT CONTRACTORS:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	551.
TOTAL EXPENSES	551.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	441,048.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
LOSS ON UNCOLLECTABLE PROMISES TO GIVE	-300,000.

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