Form 990

** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

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.

OMB No. 1545-0047 Open to Public Inspection

ΑI	For the	2023 calendar year, or tax year beginning ar	nd ending		
В	Check if applicable	C Name of organization		D Employer identific	eation number
	Addres	THE VOTER PARTICIPATION CENTER			
	Name change	Doing business as		55-088974	48
	Initial return Final	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	return/ termin-	1707 L STREET, NW	700	(202)659	
_	ated Amend	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	23,336,798.
H	return Applica	WASHINGTON, DC 20030		H(a) Is this a group re	
	tion pendin	F Name and address of principal officer: 11101145 HOFACII		for subordinates	
$\frac{1}{2}$	Toy ove	mpt status: X 501(c)(3) 501(c) (insert no.) 4947(a)(1) or 527	H(b) Are all subordinates in	cluded? Yes No
	Websit		1) 01 321	H(c) Group exemption	
		organization: X Corporation Trust Association Other	L Year		State of legal domicile; DC
		Summary		01101111011111 = 1 - 1 10	Totals of logal continued
_		Briefly describe the organization's mission or most significant activities: SEE	PART I	II, LINE 1.	
Se					
Activities & Governance	2	Check this box if the organization discontinued its operations or disp	osed of more	than 25% of its net ass	ets.
Ş	3	Number of voting members of the governing body (Part VI, line 1a)		3	8
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b			7
90	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)		5	38
žį.	6	Fotal number of volunteers (estimate if necessary)			7
, K	7 a	Fotal unrelated business revenue from Part VIII, column (C), line 12			0.
_	, p	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
			-	Prior Year	Current Year
4	8	Contributions and grants (Part VIII, line 1h)	·····	37,352,357.	22,618,390.
Revenue	9	Program service revenue (Part VIII, line 2g)		0.	0.
Rev	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		28,856.	97,909.
	111	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		37,381,213.	22,716,299.
-	_	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		0.	0.
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
	45	Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10		3,495,537.	
Fynenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		1,324,170.	747,228.
9	Ь	Total fundraising expenses (Part IX, column (D), line 25) 1,595,	233.		
ŭ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		30,250,643.	8,256,709.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		35,070,350.	13,100,870.
		Revenue less expenses. Subtract line 18 from line 12		2,310,863.	9,615,429.
Assets or	CBS		В	eginning of Current Year	End of Year
sets	ন্ত্ৰ 20	Total assets (Part X, line 16)		18,954,464.	28,363,585.
t As	g 21	Total liabilities (Part X, line 26)		5,369,051.	4,549,620.
		Net assets or fund balances. Subtract line 21 from line 20		13,585,413.	23,813,965.
_	art II	Signature Block			
		Ities of perjury, L declare that I have examined this return, including accompanying schedu			knowledge and belief, it is
tru	e, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of	wnich preparei	r nas any knowledge.	1/12/5
<u></u>		Signature of thicer		Date	117 24
Sig He	-	THOMAS LOPACH, PRESIDENT & CEO			
пе	re	Type or print name and title			
-		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Pai	id	RICHARD J. LOCASTRO, CPA Liebard J. Locas	to.	11/12/2024 if self-employ	P00288314
	eparer	Firm's name GELMAN, ROSENBERG & FREEDMAN			2-1392008
	e Only	Firm's address 4550 MONTGOMERY AVE SUITE 800N			
		BETHESDA, MD 20814-2930		Phone no. 30	1-951-9090
Ma	ay the II	RS discuss this return with the preparer shown above? See instructions			X Yes No
LE	A For	Paperwork Reduction Act Notice, see the separate instructions. 33200	1 12-21-23		Form 990 (2023)

Га	Statement of Frogram Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO INCREASE CIVIC ENGAGEMENT AMONG THE UNDER-REPRESENTED MEMBERS OF
	THE NEW AMERICAN MAJORITY (UNMARRIED WOMEN, PEOPLE OF COLOR, YOUNG
	PEOPLE, AND PERSONS WHO SHARE GOAL OF INCREASING CIVIC ENGAGEMENT OF
	SUCH SEGMENTS OF THE U.S. POPULATION).
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? 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 expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 9,992,618 • including grants of \$) (Revenue \$
	CONDUCTED VOTER REGISTRATION AND VOTER MOBILIZATION PROGRAMS USING
	PRIMARILY MAIL AND INTERNET TO PEOPLE OF COLOR AND YOUNG PEOPLE.
4b	(Code:) (Expenses \$
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	Thorating grand of \$\frac{1}{2} \tag{\text{Notable \$\psi}} \tag{\text{Notable \$\psi}}
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 9,992,618.
	Form 990 (2023

Form 990 (2023) THE VOTER PARTICIPATION CENTER 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	X	
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	X	
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		Х
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,	۰		
•	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? <i>If</i> "Yes," <i>complete</i>	- '-		1
0	, ,			X
_	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			\ ₃₇
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
_	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	<u></u>		
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
.,		17	Х	
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	⊢'′	21	\vdash
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		x
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		 ^
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			_V
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

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Pa	t IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			l
	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			l
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	. 27		X
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	37	X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			,,,
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			1 37
	Schedule N, Part II	32	-	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			_V
0.4	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			x
05-	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Α.
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	056		
26	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(aV2) arganizations. Did the arganization make any transfers to an exempt non charitable related examination?	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	26		x
27	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		
37		37		X
20	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	- 31		
38		38	х	
Pa		30	- 22	
	Charle if Cabadula O contains a vannence or note to any line in this Dort V			
	Check it Schedule O contains a response of note to any line in this Part v		Yes	No
10	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	4	162	140
	11	<u> </u>		
D	Litter and named of Forms wise included of time 1a. Effect to it flot applicable	-		

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Form **990** (2023)

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

(gambling) winnings to prize winners?

Form 990 (2023) THE VOTER PARTICIPATION CENTER

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

	- C - C - C - C - C - C - C - C - C - C			
٥-	Establishment of continuous states from WO Tanasiin Left Wassand Tan Obstance to		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 38			
	, , , , , , , , , , , , , , , , , , , ,	OI:	Х	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		Х
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Λ
	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 authority over, a	40		Х
L	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Λ
Ь	If "Yes," enter the name of the foreign country See instructions for filling requirements for FinCFN Form 114. Beneat of Foreign Bonk and Financial Associate (FRAR)			
E	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	En		Х
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u> 5b		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c		- 21
C 62	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	50		
6a		6a		Х
h	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- Oa		
b		6b		
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).	OD		
, a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	- 15		
·	to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	10		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year? N/A	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders N/A 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans 13b			
С	Enter the amount of reserves on hand			37
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
_b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			v
	excess parachute payment(s) during the year?	15		X
40	If "Yes," see the instructions and file Form 4720, Schedule N.	40		v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
47	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 activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? N/A	47		
		17		
	If "Yes," complete Form 6069.			

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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								
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		X					
5									
6									
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		X					
b									
	persons other than the governing body?	7b		X					
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		X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)								
	,		Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a		X					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,								
	and branches to ensure their operations are consistent with the organization's exempt purposes?	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						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe								
	on Schedule O how this was done	12c	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	X						
b	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		X					
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 filed SEE SCHEDULE O								
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)s	s only)	availal	ole					
	for public inspection. Indicate how you made these available. Check all that apply.								
	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, and	d finan	cial						
	statements available to the public during the tax year.								
20	State the name, address, and telephone number of the person who possesses the organization's books and records								
	ELBERT HAIRSTON - (202)659-9570								
	1707 L STREET, NW, 700, WASHINGTON, DC 20036								

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

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

X

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-NEC) 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)			((C)			(D)	(E)	(F)
Name and title	Average		not c		more	than o		Reportable	Reportable	Estimated
	hours per week					s both or/trus		compensation from	compensation from related	amount of other
	(list any	tor						the	organizations	compensation
	hours for	direc				- - -		organization	(W-2/1099-MISC/	from the
	related	tee o	ustee			ensat		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	al trus	onal tr		loyee	comp		1099-NEC)		and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) THOMAS LOPACH	29.60	드	드	ō	3	王ə	Ŗ.			
PRESIDENT & CEO				х				259,438.	0.	17,558.
(2) ELBERT HAIRSTON	37.61							•		,
CFO				Х				177,082.	0.	13,810.
(3) KATHARINE WERNER	38.68									-
VICE PRESIDENT OF DIGITAL PROGRAMS						Х		157,339.	0.	22,392.
(4) CARYN PAVLAK	33.94									
VICE PRESIDENT OF DEVELOPMENT						Х		159,791.	0.	11,937.
(5) JOHN MALLOY	31.42									
VP OF DATA SYSTEMS & ANALYTICS						X		147,570.	0.	11,748.
(6) LIONEL DRIPPS	25.61									
EXECUTIVE VICE PRESIDENT						X		148,087.	0.	9,309.
(7) NANCY LEEDS	30.02							100 156		4= 000
VP OF MAIL PROGRAMMING	1 00					Х		129,156.	0.	15,839.
(8) DENISE JUNEAU (SEE SCHEDULE O)	1.00							25 025	•	•
BOARD CHAIR/CONSULTANT	1 00	Х		Х				37,237.	0.	0.
(9) JILL ALPER	1.00	37		٦,					0	0
BOARD SECRETARY/TREASURER	0.50	Х		Х				0.	0.	0.
(10) KATINA BANKS BOARD MEMBER	0.50	Х						0.	0.	0
(11) DIANA WALSH	0.50	Λ						0.	0.	0.
BOARD MEMBER	0.50	Х						0.	0.	0.
(12) GAIL KITCH	0.50	Λ						0.	0.	<u></u>
BOARD MEMBER	0.50	Х						0.	0.	0.
(13) AARON FRANK	0.50									
BOARD MEMBER	1.55	Х						0.	0.	0.
(14) DAN SENA	0.50									
BOARD MEMBER		х						0.	0.	0.
(15) GIBBY WAITZKIN	0.50									
BOARD MEMBER		Х						0.	0.	0.
										Form 990 (2023)
332007 12-21-23										Farm MMI (0000)

Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloye	ees,	and	l Hig	ghes	t Co	ompensated Employee	s (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average hours per week	box,	not cl , unles	neck i	rson is	than d s both r/trust	an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
1b Subtotal								1,215,700.	0.	102,593.
c Total from continuation sheets to Part VI								0.	0.	0.
d Total (add lines 1b and 1c)				<u></u>				1,215,700.	0.	102,593.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove) wh	o re	ceived more than \$100,	000 of reportable	

compensation from the organization

Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on

Yes line 1a? If "Yes," complete Schedule J for such individual 3 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 4 Х Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services X

13

rendered to the organization? If "Yes," complete Schedule J for such person **Section B. Independent Contractors**

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

the organization. Hepott compensation for the calcinate year charing with or within	Trino organization o tax year.	
(A)	(B)	(C)
Name and business address	Description of services	Compensation
THE PIVOT GROUP, INC., 1250 HALF ST SE	MAIL PROGRAM	
APT. 357, WASHINGTON, DC 20003	SERVICES	1,826,423.
MISSION CONTROL, INC, 624 HEBRON AVE BLDG	MAIL PROGRAM	
3 SUITE 200, GLASTONBURY, CT 06033	SERVICES	1,584,948.
C PLUS K, LLC, 1640 RHODE ISLAND AVE NW,	DIGITAL PROGRAM	
STE 600, WASHINGTON, DC 20036-3229	SERVICES	828,141.
THE BONNER GROUP, 800 MAINE AVENUE SW,		
SUITE 450, WASHINGTON, DC 20024	FUNDRAISING	675,938.
DISPOLITICAL, LLC, 1133 15TH ST NW SUITE	DIGITAL PROGRAM	
800, WASHINGTON, DC 20005	SERVICES	315,700.
2 Total number of independent contractors (including but not limited to those listed	d above) who received more than	
\$100,000 of compensation from the organization 12		
		- 000 ()

			Check if Schedule O contains	a response	or note to anv lin	e in this Part VIII			
						(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
							function revenue	business revenue	sections 512 - 514
SS	1	_	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts									
ij g			Membership dues						
fts, Ar			Fundraising events						
ig ig			Related organizations	1 1					
ns, Sim			Government grants (contributions)						
utio er (Ť	All other contributions, gifts, grants, an	1 1	22 (10 200				
현된			similar amounts not included above		22,618,390.				
ont od (_	Noncash contributions included in lines 1a-1f	1g \$	546,855.	00 510 000			
<u>ŏ</u> <u>ö</u>		h	Total. Add lines 1a-1f			22,618,390.			
					Business Code				
e	2	а							
e Ķ		b							
S		С							
am		d							
Program Service Revenue		е							
P		f	All other program service revenue						
		g	Total. Add lines 2a-2f						
	3		Investment income (including divid						
						104,882.			104,882.
	4		Income from investment of tax-exe						
	5		Royalties						
				(i) Real	(ii) Personal				
	6	а	Gross rents 6a	.,					
			Less: rental expenses 6b						
			Rental income or (loss) 6c						
			Not rental income or (less)		1				
				Securities	(ii) Other				
	•	а	assets other than inventory 7a	613,526.	1				
		h	Less: cost or other basis	, , , , , , , ,					
Φ		D		614,227.	6,272.				
ğ		_	and sales expenses 7b	-701.					
eve			Gain or (loss)	-	, -	-6,973.			-6,973.
her Revenue			Net gain or (loss)	I	T	0,515.			0,575.
	8	а	Gross income from fundraising events	·					
Ò			including \$	_					
			contributions reported on line 1c).	I .					
			Part IV, line 18						
			Less: direct expenses						
			Net income or (loss) from fundraisi	-	T				
	9	а	Gross income from gaming activition	I .					
			Part IV, line 19						
			Less: direct expenses						
		С	Net income or (loss) from gaming a	activities					
	10	а	Gross sales of inventory, less return	ns					
			and allowances	<u>10</u>	ı				
		b	Less: cost of goods sold	10k)				
		С	Net income or (loss) from sales of i	nventory					
,]		_			Business Code				
ous •	11	а							
Miscellaneous Revenue		b							
eve		С							
isc B		d	All other revenue						
2			Total. Add lines 11a-11d						
	12		Total revenue. See instructions			22,716,299.	0.	0.	97,909.

332009 12-21-23

Form 990 (2023) THE VOTER PARTICIPATION CENTER Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).	
Charle if Cahadula O contains a vanance av nata to any line in this Dout IV	

D.:	Check if Schedule O contains a respons	se or note to any line in t	(B)	(C)	(D)
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	F0F 10F	100 760	222 114	60 040
	trustees, and key employees	505,125.	102,762.	333,114.	69,249
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	2 020 071	2 210 605	250 065	250 111
7	Other salaries and wages	2,929,871.	2,319,695.	258,065.	352,111
8	Pension plan accruals and contributions (include	72 050	EO 11E	E 1E0	0 505
_	section 401(k) and 403(b) employer contributions)	72,859. 347,221.	59,115. 257,221.	5,159. 47,668.	8,585 42,332
9	Other employee benefits	241,857.	176,959.	37,019.	27,879
10	Payroll taxes	241,057.	1/0,959.	37,019.	41,019
11	Fees for services (nonemployees):				
	Management	256,998.	170,739.	86,259.	
	Legal	148,590.	170,739.	148,590.	
	Accounting	40,000.	40,000.	140,390.	
	Lobbying Professional fundraising services. See Part IV, line 17	747,228.	40,000.		747,228
e •	Investment management fees	33,524.		33,524.	747,220
f	Other. (If line 11g amount exceeds 10% of line 25,	33,324.		33,324.	
g	column (A), amount, list line 11g expenses on Sch 0.)	520,818.	59,593.	259,875.	201,350
12	Advertising and promotion	320,0101	37,373.	233,0731	201,550
13	Office expenses	99,674.	69,966.	26,890.	2,818
13 14	Information technology	143,599.	78,573.	51,547.	13,479
15	Royalties	351,336.	351,336.	32/32/1	20,275
16	Occupancy	502,297.	256,574.	135,344.	110,379
17	Travel	111,671.	79,476.	18,563.	13,632
'' 18	Payments of travel or entertainment expenses		73 / 27 00	20,0001	20,002
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	18,204.	12,956.	3,026.	2,222
20	Interest	==,===	==,,,,,,,	-,	_,
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	10,494.		10,494.	
23	Insurance	34,950.		34,950.	
-0 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), amount, list line 24e expenses on Schedule 0.)				
а	PROGRAM MAILING FEES	1,907,356.	1,907,356.		
	PRODUCTION & PRINTING	1,787,041.	1,787,041.		
	DIGITAL MEDIA BUY	1,301,260.	1,301,260.		
d	OTHER PROGRAM FEES	606,479.	606,479.		
	All other expenses	382,418.	355,517.	22,932.	3,969
25	Total functional expenses. Add lines 1 through 24e	13,100,870.	9,992,618.	1,513,019.	1,595,233
<u>26</u>	Joint costs. Complete this line only if the organization	-,=00,0100	-,,0200	=,==,,0=>,	_,,,,,,,,
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	educational campaign and filingualsing solicitation				

Form 990 (2023)
Part X Balance Sheet

art .	X	Balance Sneet					
		Check if Schedule O contains a response or i	note to ar	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	1,088,332.	1	5,131,127		
	2	Savings and temporary cash investments			4,323,455.	2	9,214,927
	3	Pledges and grants receivable, net			1,596,035.	3	2,451,614
		Accounts receivable, net				4	
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, su	bstantial (contributor, or 35%			
		controlled entity or family member of any of the	nese pers	ons		5	
	6	Loans and other receivables from other disqu	alified pe	rsons (as defined			
		under section 4958(f)(1)), and persons describ	oed in sec	tion 4958(c)(3)(B)		6	
ပ္သ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
₹	9	B			398,493.	9	357,030
1	10a	Land, buildings, and equipment: cost or othe	r				
		basis. Complete Part VI of Schedule D	10a	52,470.			
	b	Less: accumulated depreciation	10b	50,197.	19,039.	10c	2,273 4,837,573
1	11	Investments - publicly traded securities			4,212,588.	11	4,837,573
1	12	Investments - other securities. See Part IV, lin	e 11			12	
1	13	Investments - program-related. See Part IV, lir	ne 11			13	
1	14	Intangible assets			14		
1	15	Other assets. See Part IV, line 11			7,316,522.	15	6,369,043
1	16	Total assets. Add lines 1 through 15 (must e			18,954,464.	16	28,363,585
1	17	Accounts payable and accrued expenses			572,533.	17	233,45
1	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple				21	
3 2	22	Loans and other payables to any current or fo					
		trustee, key employee, creator or founder, su					
2		controlled entity or family member of any of the	-			22	
'	23	Secured mortgages and notes payable to unr				23	
	24	Unsecured notes and loans payable to unrela				24	
2	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on lin	nes 17-24	. Complete Part X	4,796,518.	25	4,316,164
,	06	of Schedule D			5,369,051.		4,549,620
+	26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, or			3,303,031.	20	4,545,020
g		and complete lines 27, 28, 32, and 33.	HECK HE				
۱ <u>۱</u>	27				12,085,413.	27	22,863,965
2 2	28	Net assets with donor restrictions		·····	1,500,000.	28	950,000
-	_0	Organizations that do not follow FASB ASC					330,000
		and complete lines 29 through 33.	, 000, 011				
5 2	29	Capital stock or trust principal, or current fun	ds			29	
2 3	30	Paid-in or capital surplus, or land, building, or				30	
	31	Retained earnings, endowment, accumulated				31	
-		Total net assets or fund balances			13,585,413.	32	23,813,965
Z ~	33	Total liabilities and net assets/fund balances			18,954,464.	33	28,363,585

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

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

Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

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

Form **990** (2023)

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SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

THE VOTER PARTICIPATION CENTER

Employer identification number

	THE	VOTER PART	ICIPATION CEN	ITER			5	5-0889748
Part I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions		
The organ	nization is not a private found							
1	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).							
2	A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Form	n 990).)				
3	A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	i).		
4	A medical research organiz	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(i	iii). Enter	the hospital's name,
	city, and state:							
5	An organization operated for	or the benefit of a col	lege or university owned	or operate	ed by a go	vernmental uni	t describe	ed in
	section 170(b)(1)(A)(iv). (C	Complete Part II.)						
6	A federal, state, or local gov	vernment or governm	nental unit described in	section 17	'0(b)(1)(A)	(v).		
7 X	An organization that norma	lly receives a substar	ntial part of its support fr	om a gove	rnmental	unit or from the	general ¡	oublic described in
	section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8 🗌	A community trust describe	ed in section 170(b)(1)(A)(vi). (Complete Par	: II.)				
9 🗌	An agricultural research org	ganization described	in section 170(b)(1)(A)(x) operate	ed in conju	inction with a la	and-grant	college
	or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the i	name, city	, and state of th	ne college	or
	university:							
10	An organization that norma	lly receives (1) more	than 33 1/3% of its supp	ort from c	ontribution	ns, membership	fees, and	d gross receipts from
	activities related to its exen	npt functions, subjec	t to certain exceptions; a	nd (2) no	more than	33 1/3% of its	support f	rom gross investment
	income and unrelated busir	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the orga	nization a	after June 30, 1975.
	See section 509(a)(2). (Con	mplete Part III.)						
11 🔲	An organization organized a	and operated exclusi	vely to test for public sat	ety. See	section 50)9(a)(4).		
12	An organization organized a	and operated exclusi	vely for the benefit of, to	perform tl	ne function	ns of, or to carr	y out the	purposes of one or
	more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section \$	509(a)(2).	See section 50)9(a)(3). (Check the box on
	lines 12a through 12d that	describes the type o	f supporting organizatior	and com	olete lines	12e, 12f, and 1	2g.	
а	Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	orted org	anization(s), typ	ically by	giving
	the supported organization	on(s) the power to reg	gularly appoint or elect a	majority o	f the direc	tors or trustees	of the su	upporting
	organization. You must o	complete Part IV, Se	ections A and B.					
b	Type II. A supporting org	anization supervised	or controlled in connect	ion with its	s supporte	ed organization(s), by hav	ving
	control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manage	the supp	oorted
	organization(s). You mus	t complete Part IV,	Sections A and C.					
С	Type III functionally inte	grated. A supporting	g organization operated	in connect	ion with, a	and functionally	integrate	ed with,
	its supported organization	n(s) (see instructions)). You must complete F	Part IV, Se	ctions A,	D, and E.		
d		integrated. A supp	orting organization oper	ated in cor	nnection w	ith its supporte	ed organiz	zation(s)
	that is not functionally int	egrated. The organiz	ation generally must sat	sfy a distr	bution rec	quirement and a	an attentiv	/eness
	requirement (see instructi	ions). You must con	nplete Part IV, Sections	A and D,	and Part	V.		
e	Check this box if the orga	anization received a v	written determination fro	n the IRS	that it is a	Type I, Type II,	Type III	
	functionally integrated, or	Type III non-function	nally integrated supporting	ng organiz	ation.			
	er the number of supported o	•						
	vide the following information (i) Name of supported			(iv) Is the orga	nization lieted	((-i) A
	organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	in your governi	ng document?	(v) Amount of r support (see ins	•	(vi) Amount of other support (see instructions)
	organization		above (see instructions))	Yes	No	Support (SCS IIIS	traction io,	Support (See Instructions)
ıvıaı						ı		1

Schedule A (Form 990) 2023 THE VOTER PARTICIPATION CENTER 55-0889

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization
fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	29609302.	85785652.	10687140.	37352357.	22618390.	186052841
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	29609302.	85785652.	10687140.	37352357.	22618390.	186052841
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						18435472.
6	Public support. Subtract line 5 from line 4.						167617369
Sed	ction B. Total Support	•					•
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4			10687140.	37352357.	22618390.	186052841
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	2,797.	316,254.	165,463.	87,354.	104,882.	676,750.
9	Net income from unrelated business	,					
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)		107.				107.
11	Total support. Add lines 7 through 10						186729698
	Gross receipts from related activities.	etc. (see instruction	ons)	•	•	12	•
	First 5 years. If the Form 990 is for the	•	,			01(c)(3)	
	organization, check this box and sto						
Sec	ction C. Computation of Publ						
14	Public support percentage for 2023 (line 6, column (f), d	ivided by line 11, o	column (f))		14	89.76 %
15	Public support percentage from 2022	Schedule A, Part	II, line 14			15	92.67 %
	33 1/3% support test - 2023. If the					ore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				X
b	33 1/3% support test - 2022. If the						
	and stop here. The organization qua	lifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances test						
	and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization						
	meets the facts-and-circumstances to						
b	10% -facts-and-circumstances test	-	•				
	more, and if the organization meets t	-					
	organization meets the facts-and-circ				-		
18	Private foundation. If the organization				• • • • • • • • • • • • • • • • • • • •		s
	<u> </u>		,	, , , , , , , , , , , , , , , , , , , ,			(Form 990) 2023

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support	elow, please comp	Diete Fait II.)				
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(1)	(12)	(2) = = 1	(-7	(5) = 5 = 5	χ,
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						
ŀ	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
(Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6	(-, : -	(-,	(-)	(-,	(-,	(-,
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975					+	
	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)		<u> </u>		1	1	<u> </u>
14	First 5 years. If the Form 990 is for the	· ·		•	•	. , . ,	· —
<u> </u>	check this box and stop here	a Cummant Da					
	ction C. Computation of Publi					T .= T	
	Public support percentage for 2023 (I	, ,,,	•	column (f))		15	<u>%</u>
	Public support percentage from 2022 ction D. Computation of Inves					16	%
	•			ing 10 galuma (f)		17	0/
	Investment income percentage for 20					17	%
	Investment income percentage from						7 is not
198	a 33 1/3% support tests - 2023. If the					- 4.5	
k	more than 33 1/3%, check this box as 33 1/3% support tests - 2022. If the	organization did r	not check a box or	n line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	nd
	line 18 is not more than 33 1/3%, che	ck this box and st	top here. The orga	anization qualifies	as a publicly supp	orted organization	
20	Private foundation. If the organization	n did not check a	hox on line 14 19	a or 19h check th	nis hox and see in	structions	1 7

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes." answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? |f "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes." answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes." provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in Part VI.
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes." provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	2		
	За		
	3b		
	0.5		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	O.L.		
	9b		
	9с		
	- 0		
	10a		
	10b		
مارر	A (Form	n aan)	2023

Pai	TIV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			l
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			l
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			l
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	_		l
_	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			l
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			l
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
Sec	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		
	Type in cupporting organizations		Yes	Na
4	Were a majority of the examplation's directors or trustees during the tay year also a majority of the directors		res	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			l
	or management of the supporting organization was vested in the same persons that controlled or managed			l
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			l
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			l
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			l
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			l
	significant voice in the organization's investment policies and in directing the use of the organization's			l
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).	ı		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see ins	struction		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			l
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			l
	those supported organizations and explain how these activities directly furthered their exempt purposes,			l
	how the organization was responsive to those supported organizations, and how the organization determined	2a		
b	that these activities constituted substantially all of its activities. Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,	Za		
D	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.	217		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
u	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes " describe in Part VI the role played by the organization in this regard	3b		

che	dule A (Form 990) 2023 THE VOTER PARTICIPATION (CENT	rer	55-0889748 Page 6
	t V Type III Non-Functionally Integrated 509(a)(3) Supporting			oo cooy, io hage o
1	Check here if the organization satisfied the Integral Part Test as a qualifying t			Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must co		•	,
ecti	on A - Adjusted Net Income	·	(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
ecti	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Pacayorias of prior year distributions	7		

5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to					
	emergency temporary reduction (see instructions).	6				
7	Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see					

8

1

2 3

4

Schedule A (Form 990) 2023

Current Year

Minimum Asset Amount (add line 7 to line 6)

Adjusted net income for prior year (from Section A, line 8, column A)

Minimum asset amount for prior year (from Section B, line 8, column A)

Section C - Distributable Amount

Enter greater of line 2 or line 3.

instructions).

Enter 0.85 of line 1.

	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continue	ed)	o coco, lo lager
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe		1		
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	,	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pri	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sooti	ion E. Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution:	s	(iii) Distributable
Secu	on E - Distribution Allocations (see instructions)	Excess Distributions	Pre-2023		Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				_
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
С	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i_	Carryover from 2018 not applied (see instructions)				
<u>j</u> _	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2019				

Schedule A (Form 990) 2023

b Excess from 2020
 c Excess from 2021
 d Excess from 2022
 e Excess from 2023

332028 12-21-23 Schedule A (Form 990) 2023

Schedule B

(Form 990)

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

2023

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

Employer identification number

	THE VOTER PARTICIPATION CENTER	55-0889748							
Organization type (ch	eck one):								
Filers of:	Filers of: Section:								
Form 990 or 990-EZ	$\boxed{\textbf{X}}$ 501(c)(3) (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								
, ,	ation is covered by the General Rule or a Special Rule . 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rul	e. See instructions.							
General Rule									
	ization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling many one contributor. Complete Parts I and II. See instructions for determining a contributor's	•							
Special Rules									
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.									
contributor, o	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, contribu is checked, e purpose. Dor	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\$								
•	tion that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fo V, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF,	**							

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

that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)

Name of organization Employer identification number

THE VOTER PARTICIPATION CENTER

55-0889748

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
1		\$ <u>10,000,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 2,131,635.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>1,146,000</u> .	Person X Payroll
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4	Total contributions \$ 1,000,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$601,925.	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		\$539,028.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023)

THE VOTER PARTICIPATION CENTER

Name of organization Employer identification number

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$502,622.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(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
		\$	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.)

55-0889748

Name of organization Employer identification number

THE VOTER PARTICIPATION CENTER

55-0889748

Part II	II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.							
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received					
7	2,128 SHARES OF AMZN							
		\$\$	10/03/23					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received					
7	1,180 SHARES OF AXON							
		\$\$	02/28/23					
(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					
		\$						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received					
		\$						
000450 40 00		· · · · · · · · · · · · · · · · · · ·	Calcadula D (Farms 000) (0000)					

Name of organization

Employer identification number

55_0999749

	ons to organizations described in s	
om any one contributor. Complete columns (a) npleting Part III, enter the total of exclusively religious,	through (e) and the following line en charitable, etc., contributions of \$1,000 or	ntry. For organizations r less for the year. (Enter this info. once.)
se duplicate copies of Part III if additional	space is needed.	
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gi	 gift
Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gi	 gift
Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gi	
Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(b) i diposo di giit	(c) osc or girt	(a) Description of now girl to note
	(e) Transfer of gi	gift
Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
	clusively religious, charitable, etc., contribution any one contributor. Complete columns (a) mpleting Part III, enter the total of exclusively religious, is see duplicate copies of Part III if additional is (b) Purpose of gift Transferee's name, address, a (b) Purpose of gift Transferee's name, address, a (b) Purpose of gift Transferee's name, address, a (b) Purpose of gift Transferee's name, address, a	clusively religious, charitable, etc., contributions to organizations described in many one contributor. Complete columns (a) through (e) and the following line on pileting Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 c and the pileting Part III if additional space is needed. (b) Purpose of gift (c) Use of gift (e) Transfer of gift (b) Purpose of gift (c) Use of gift (e) Transferee's name, address, and ZIP + 4 (e) Transferee's name, address, and ZIP + 4 (b) Purpose of gift (c) Use of gift (e) Transfer of gift (f) Use of gift (g) Use of gift (h) Purpose of gift (h) Purpose of gift (c) Use of gift (d) Use of gift (e) Transferee's name, address, and ZIP + 4 (e) Transferee's name, address, and ZIP + 4

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

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

2023

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

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

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

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

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

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

Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of orga	nization	ions. Complete Part III.		F	mployer identification number
rtamo or orga		ER PARTICIPATION	CENTER	-	55-0889748
Part I-A	Complete if the org	anization is exempt und	ler section 501(c)	or is a section 527	
2 Political	a description of the organiz campaign activity expendit r hours for political campai	ation's direct and indirect politioures gn activities	cal campaign activities in	n Part IV.	\$
Part I-B	Complete if the org	anization is exempt und	ler section 501(c)(3	3).	
1 Enter the	amount of any excise tax	incurred by the organization und	der section 4955		\$
2 Enter the	amount of any excise tax	incurred by organization manag	ers under section 4955		\$
		n 4955 tax, did it file Form 4720			
					Yes No
	describe in Part IV.	anization is exempt und	lor costion E01/o	avaant aaatian FO	1(0)(2)
Part I-C					
		by the filing organization for se			*
	0 0	ization's funds contributed to of	•		¢
		. Add lines 1 and 2. Enter here a			\$
		. Add lines 1 and 2. Enter here a	·		\$
		1120-POL for this year?			
5 Enter the made pa contribut	e names, addresses, and er yments. For each organiza ions received that were pro	mployer identification number (E tion listed, enter the amount pai omptly and directly delivered to additional space is needed, prov	IN) of all section 527 po d from the filing organiz a separate political orga	olitical organizations to v ation's funds. Also ente anization, such as a sep	hich the filing organization r the amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fro filing organization' funds. If none, enter	contributions received and

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

Schedule C (Form 990) 2023

Part II-A Complete if the org	anization is exem				ction under				
section 501(h)).									
A Check if the filing organiza	Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,								
expenses, and shar	e of excess lobbying e	xpenditures).							
B Check if the filing organiza	tion checked box A an	d "limited control" pro	visions apply.						
	ts on Lobbying Expen ditures" means amou			(a) Filing organization's totals	(b) Affiliated group totals				
1a Total lobbying expenditures to influ	uence public opinion (g	rassroots lobbying)		0.					
b Total lobbying expenditures to influ	uence a legislative bod	y (direct lobbying)		636,348.					
c Total lobbying expenditures (add li	nes 1a and 1b)			636,348.					
d Other exempt purpose expenditure	es			11,683,770.					
e Total exempt purpose expenditure	s (add lines 1c and 1d)			12,320,118.					
f Lobbying nontaxable amount. Enter	er the amount from the	following table in both	n columns.	766,006.					
If the amount on line 1e, column (a) o	r (b) is: The lob!	bying nontaxable amo	ount is:						
not over \$500,000,									
over \$500,000 but not over \$1,000	,000, \$100,00	0 plus 15% of the exce	ess over \$500,000.						
over \$1,000,000 but not over \$1,50	00,000, \$175,00	0 plus 10% of the exce	ess over \$1,000,000.						
over \$1,500,000 but not over \$17,	000,000, \$225,00	0 plus 5% of the exces	ss over \$1,500,000.						
over \$17,000,000,	\$1,000,0	000.							
g Grassroots nontaxable amount (en	ter 25% of line 1f)			191,502.					
h Subtract line 1g from line 1a. If zer	o or less, enter -0			0.					
i Subtract line 1f from line 1c. If zero	0.								
j If there is an amount other than ze	ro on either line 1h or li	ine 1i, did the organiza	tion file Form 4720	_					
reporting section 4911 tax for this	year?				Yes No				
(Some organizations t	nat made a section 50	raging Period Under 01(h) election do not h ate instructions for lin	nave to complete all o	of the five columns be	low.				
	Lobbying Expen	ditures During 4-Yea	r Averaging Period	_					
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total				
2a Lobbying nontaxable amount	1,000,000.	810,080.	1,000,000.	766,006.	3,576,086.				
b Lobbying ceiling amount (150% of line 2a, column(e))					5,364,129.				
c Total lobbying expenditures				636,348.	636,348.				
d Grassroots nontaxable amount	250,000.	202,520.	250,000.	191,502.	894,022.				
e Grassroots ceiling amount (150% of line 2d, column (e))					1,341,033.				
f Grassroots lobbying expenditures									

Schedule C (Form 990) 2023

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

1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 5 Section 161(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2 Current year 2 Did the organization agree to carry over to the reasonable estimate of nondeductible section 162(e) dues 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible lobbying and political expenditures next year? 4 Total Supplemental Information 5 Taxable amount of lobbying and political expenditures. See instructions 5 Supplemental Information	or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)	
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred by organization managers under section 4912 of if the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in house lobbying expenditures of \$2,000 or less? 3 Did the organization make only in house lobbying expenditures of \$2,000 or less? 2 Did the organization make only in house lobbying expenditures of \$2,000 or less? 3 Did the organization make only in house lobbying and political campaign activity expenditures from the prior year? 1 Dues, assessments and similar amounts from members 2 Does a section 1501(c)(6), or section 501(c)(6), or	the lobbying activity.	Yes	No	Amo	ount
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred by organization managers under section 4912 of if the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in house lobbying expenditures of \$2,000 or less? 3 Did the organization make only in house lobbying expenditures of \$2,000 or less? 2 Did the organization make only in house lobbying expenditures of \$2,000 or less? 3 Did the organization make only in house lobbying and political campaign activity expenditures from the prior year? 1 Dues, assessments and similar amounts from members 2 Does a section 1501(c)(6), or section 501(c)(6), or	During the year, did the filing organization attempt to influence foreign, national, state, or				
or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1))? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 11 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization make only in-house lobbying axpenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political expension 501(c)(4), section 501(c)(5), or section 501(c)(6), or section					
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d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes					
Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes					
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structions); and Part II-B, line 1. Also, complete this part for any additional information.	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the cart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded section 162(e) dues the organization agree to carryover to the reasonable estimate of nondeductible lobbying and prevenditures next year? Taxable amount of lobbying and political expenditures. See instructions Part IV Supplemental Information Tovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	e prior year? n 501(c)(5), 'No" OR (b) cal	2 3 or sec) Part I 2 2 2b 2c 3	II-A, line	3, is
structions); and Part II-B, line 1. Also, complete this part for any additional information.	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the cart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded section 162(e) dues the organization agree to carryover to the reasonable estimate of nondeductible lobbying and prevenditures next year? Taxable amount of lobbying and political expenditures. See instructions Part IV Supplemental Information Tovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	e prior year? n 501(c)(5), 'No" OR (b) cal	2 3 or sec) Part I 2 2 2b 2c 3	II-A, line	3, is
structions); and Part II-B, line 1. Also, complete this part for any additional information.	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the cart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded section 162(e) dues the organization agree to carryover to the reasonable estimate of nondeductible lobbying and prevenditures next year? Taxable amount of lobbying and political expenditures. See instructions Part IV Supplemental Information Tovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	e prior year? n 501(c)(5), 'No" OR (b) cal	2 3 or sec) Part I 2 2 2b 2c 3	II-A, line	3, is

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

THE VOTER PARTICIPATION CENTER

Employer identification number 55-0889748

Pai			or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at and of year	(a) Bonor advised funds	(b) i unus and other accounts
2	Total number at end of 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	writing that the assets held in donor advi-	sed funds
Ū	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor a		
•	for charitable purposes and not for the benefit of the donor of		
Par			
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply).	
	Preservation of land for public use (for example, recrea	ation or education) Preservation of	of a historically important land area
	Protection of natural habitat	Preservation of	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		
	Number of conservation easements on a certified historic str		2c
d	Number of conservation easements included on line 2c acqu		
	on a historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, re-	leased, extinguished, or terminated by the	e organization during the tax
	year		
4	Number of states where property subject to conservation ear	•	•
5	Does the organization have a written policy regarding the per		
6	violations, and enforcement of the conservation easements in Staff and volunteer hours devoted to monitoring, inspecting,		
U	Stan and volunteer riours devoted to monitoring, inspecting,	Transiting of violations, and emorcing con	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	ation easements during the year
	3,		
8	Does each conservation easement reported on line 2d above	e satisfy the requirements of section 170(l	n)(4)(B)(i)
9	In Part XIII, describe how the organization reports conservati	on easements in its revenue and expense	e statement and
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial statem	ents that describes the
	organization's accounting for conservation easements.		
Par	t III Organizations Maintaining Collections of		ther Similar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement	and balance sheet works
	of art, historical treasures, or other similar assets held for pul	blic exhibition, education, or research in f	urtherance of public
	service, provide in Part XIII the text of the footnote to its final	ncial statements that describes these iter	ns.
b	If the organization elected, as permitted under FASB ASC 95	•	
	art, historical treasures, or other similar assets held for public	e exhibition, education, or research in furt	herance of public service,
	provide the following amounts relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1		
			· · · · · · · · · · · · · · · · · · ·
2	If the organization received or held works of art, historical tre		al gain, provide
	the following amounts required to be reported under FASB A		•
	Revenue included on Form 990, Part VIII, line 1		
	Assets included in Form 990, Part X		
LHA	For Paperwork Reduction Act Notice, see the Instructions	5 IUI FUIII 99U.	Schedule D (Form 990) 2023

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

Par	t III Organizations Maintaining Co	llections of Ar	t, Histo	rical Tre	asures, o	r Other	Similar	Assets	(continu	ed)
3	Using the organization's acquisition, accession	n, and other record	s, check	any of the f	following that	t make sig	nificant u	se of its		
	collection items (check all that apply).									
а	Public exhibition	c	1 🔲 L	oan or exc	hange progra	am				
b	Scholarly research	e	, 🔲	Other						
С	Preservation for future generations									
4	Provide a description of the organization's coll	lections and explair	n how the	y further th	ne organizatio	on's exem	ot purpos	e in Part	XIII.	
5	During the year, did the organization solicit or	receive donations	of art, his	torical treas	sures, or othe	er similar a	ssets			
	to be sold to raise funds rather than to be main	ntained as part of t	he organi	zation's co	llection?				Yes	☐ No
Par	t IV Escrow and Custodial Arrang	ements Comple	te if the c	rganization	answered "	Yes" on Fo	orm 990,	Part IV, li	ne 9, or	
	reported an amount on Form 990, Part									
1a	Is the organization an agent, trustee, custodia	n, or other intermed	diary for c	ontribution	s or other as	sets not ir	ncluded			
	on Form 990, Part X?							\square	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII a									
									Amount	
С	Beginning balance						1c			
	Additions during the year						1d			
	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on For						y?		Yes	No No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation	has been	provided in F	Part XIII				
Par										
		(a) Current year	(b) Pr	ior year	(c) Two yea	rs back (d) Three ye	ears back	(e) Four y	ears back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curre	nt year end balance	e (line 1g,	column (a))) held as:	•				
а	Board designated or quasi-endowment	•	%		•					
b	Permanent endowment	%	_							
С	Term endowment %									
	The percentages on lines 2a, 2b, and 2c should equal 100%.									
За	Are there endowment funds not in the possess		ation that	are held ar	nd administer	ed for the				
	organization by:								Y	'es No
	(i) Unrelated organizations?								3a(i)	
	(m) = 1 · · · · · · · · · · ·								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organizati	ons listed as requir	ed on Sc	hedule R?					3b	
4	Describe in Part XIII the intended uses of the o		wment fu	nds.						
Par	t VI Land, Buildings, and Equipme	ent								
	Complete if the organization answered	"Yes" on Form 990), Part IV,	line 11a. S	See Form 990	, Part X, li	ne 10.			
	Description of property	(a) Cost or o	other	(b) Cost	or other	(c) Ac	cumulate	d	(d) Book	value
		basis (investr	ment)	basis	(other)	depi	reciation			
1a	Land									
	Buildings									
	Leasehold improvements									
	Equipment			5	2,470.		50,19	7.	2	,273.
	Other									
Total	. Add lines 1a through 1e. (Column (d) must ea	ual Form 990. Part	X line 10	c. column	(B))			🔽	2	,273.

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 THE VOTER PA	ARTICIPATION	CENTER 55	5-0889748 Page 3
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.	Farma 000 David IV/ line	11. Cas Faura 000 Bart V line 10	
Complete if the organization answered "Yes" o			d of year morket value
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-or-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
<u>(6)</u> (7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a) [Description		(b) Book value
(1) DEPOSIT			44,455.
(2) DUE FROM CVI			2,140,925.
(3) RIGHT-OF-USE ASSET			4,183,661.
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			5 252 244
Total. (Column (b) must equal Form 990, Part X, line 15, col.	(B))		6,369,041.
Part X Other Liabilities			_
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			1 216 164
(2) OPERATING LEASE LIABILITY			4,316,164.
(3)			
<u>(4)</u>			
(5)			1

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)) 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) 2023

4,316,164.

(6) (7) (8)

	Complete if the organization answered "Yes" on Form 990, Part IV, line				
1				1	23,302,170.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	613,123.		
b	Donated services and use of facilities				
С	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d			2e	613,123.
3	Subtract line 2e from line 1			3	22,689,047.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	33,524. -6,272.		
b	Other (Describe in Part XIII.)	4b	-6,272.		
С	Add lines 4a and 4b			4c	27,252. 22,716,299.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	22,716,299.
Pa	T XII Reconciliation of Expenses per Audited Financial State		Expenses per F	Retur	n
	Complete if the organization answered "Yes" on Form 990, Part IV, line				10000000
1	Total expenses and losses per audited financial statements			1	13,067,346.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1			
а	Donated services and use of facilities	1 1		-	
b	Prior year adjustments	2b		-	
С	Other losses	2c		-	
d	Other (Describe in Part XIII.)			_	
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	13,067,346.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b		33,524.	-	
b	Other (Describe in Part XIII.)	4b			22 524
	Add lines 4a and 4b			4c	33,524.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.	.)		5	13,100,870.
	t XIII Supplemental Information				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;			; Part	X, line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any	y additional inform	nation.		
ם אם	RT XI, LINE 4B - OTHER ADJUSTMENTS:				
LVI	IT XI, DINE 4D - OTHER ADOUGHMENTS.				
T ₁ O ₂	SS ON DISPOSAL REPORTED AS AN OTHER ITEM	ОИ ТНЕ			-6,272.
	ON DIDIODILL RELORDED IN THE CHIER TIER	011 11111			0,272.
FTN	NANCIAL STATEMENTS AND NETTED AGAINST RE	VENUE ON			
	MINIOTAL DISTIBLISHED SAND HOLLINGS NO.	VERIOR OIL			
FOF	RM 990, PART VIII, LINE 7B				
	ar 5507 rimir virir, bind 75				
_					

SCHEDULE G (Form 990)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the organization THE VOT	ER PARTICIPATION C	ENTI	ΞR		55-088	dentification number 89748
Part I Fundraising Activities	Complete if the organization answer			n Form 990, Part IV, I		
required to complete this par 1 Indicate whether the organization rais a Mail solicitations b X Internet and email solicitations c X Phone solicitations d X In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, F b If "Yes," list the 10 highest paid indicompensated at least \$5,000 by the	e X Solicita f Solicita g Specia or oral agreement with any individual cart VII) or entity in connection with pyiduals or entities (fundraisers) pursu	ation of ation of I fundra (includ	non-g gover aising ding of onal fo	overnment grants nment grants events ficers, directors, trus undraising services?	X	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or cor contrib	Did raiser ustody itrol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained b fundraiser listed in col. (i)	to (or retained by)
THE BONNER GROUP INC 800		Yes	No			
MAINE AVE. SW, STE 450,	FUNDRAISING		х	5,792,708.	675,93	8. 5,116,770.
LIFTOFF CAMPAIGNS LLC - 403 E MELBOURNE AVE, SILVER SPRING,	FUNDRAISING		х	38,636.	71,29	032,654.
Total				5,831,344.	747.22	8. 5,084,116.
Total 3 List all states in which the organization or licensing. AL, AK, CA, CO, CT, DC, FL, WI		contrib		or has been notified	it is exempt from	registration
For Paperwork Reduction Act Notice, se	ee the Instructions for Form 900 co	- gan F	7		Sahad	ule G (Form 990) 2023

332081 09-13-23

SEE PART IV FOR CONTINUATIONS

Pa	rt	II Fundraising Events. Complete if the of fundraising event contributions and ground fundraising event contributions and ground fundraising event contributions.				
		or fundraising event contributions and gro	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
a)			(event type)	(event type)	(total number)	col. (c))
Revenue						
Rev	1	Gross receipts				
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
S	5	Noncash prizes				
shense	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses				
	10	,				
Pa		Net income summary. Subtract line 10 from li Gaming. Complete if the organization a				
		\$15,000 on Form 990-EZ, line 6a.	answered res on rom	1 3 3 0, 1 art 1 v, iii c 1 3, 0	reported more than	
Ф			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(,gs	bingo/progressive bingo	(c) canon gammig	col. (a) through col. (c))
Rev	4	Cross revenue				
		Gross revenue				
ses	2	Cash prizes				
Expen	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses				
		Volunteer labor	Yes % No	Yes % No	% Yes % No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
		nter the state(s) in which the organization condu the organization licensed to conduct gaming ac				Yes No
		"No," explain:				. I res I No
	_					
		ere any of the organization's gaming licenses re				Yes No
	_					
0000	_	0.12.23			C-1-	edule G (Form 990) 2023

Sch	ledule G (Form 990) 2023 THE VOTER PARTICIPATION CENTER 55-0	0009/40	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	No No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	No
13	Indicate the percentage of gaming activity conducted in:	1 1	
а	a The organization's facility	13a	%
	o An outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Name		
	Address		
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
b	o If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount		
	of gaming revenue retained by the third party \$		
С	If "Yes," enter name and address of the third party:		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
	Many distance of the Many Commercial Commerc		
	Mandatory distributions:		
а	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	Yes	□ No
h	• Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	103	110
	organization's own exempt activities during the tax year \$		
Pa	irt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pal	t III. lines 9.	9b. 10b.
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	,	, , , ,
	· · · · · · · · · · · · · · · · · · ·		
SC	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS	; :	
(I) NAME OF FUNDRAISER: THE BONNER GROUP INC.		
<u> </u>) NAME OF FUNDRAIDER. THE BUNNER GROUP INC.		
(I) ADDRESS OF FUNDRAISER:		
80	0 MAINE AVE. SW, STE 450, WASHINGTON, DC 20024		
(I) NAME OF FUNDRAISER: LIFTOFF CAMPAIGNS LLC		
, т	WATE OF FUNDANTSER. DIFTOFF CAMENIGMS DDC		
(I) ADDRESS OF FUNDRAISER: 403 E MELBOURNE AVE, SILVER SPRING, MI	2090	1

Schedule G	(Form 990)	\mathtt{THE}	VOTER	PARTICIPATION	CENTER	55-0889748	Page 4
Part IV	G (Form 990) Supplemental Infori	mation	(continued)	1			
			(continued)	·			
-							
-							
ī							
		<u></u>					
ē							

SCHEDULE J (Form 990)

Compensation Information

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

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

Attach to Form 990.

Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service Name of the organization

Department of the Treasury

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

THE VOTER PARTICIPATION CENTER

Employer identification number 55-0889748

Pa	art I Questions Regarding Compensation							
			Yes	No				
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,							
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.							
	First-class or charter travel Housing allowance or residence for personal use							
	Travel for companions Payments for business use of personal residence							
	Tax indemnification and gross-up payments Health or social club dues or initiation fees							
	Discretionary spending account Personal services (such as maid, chauffeur, chef)							
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or							
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		<u> </u>				
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,							
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2						
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's							
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to							
	establish compensation of the CEO/Executive Director, but explain in Part III.							
	Compensation committee Written employment contract							
	Independent compensation consultant X Compensation survey or study							
	Form 990 of other organizations X Approval by the board or compensation committee							
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing							
	organization or a related organization:							
а	Receive a severance payment or change-of-control payment?	4a		X				
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		_X_				
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х				
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.							
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.							
5								
	contingent on the revenues of:	_		37				
a	The organization?	5a		X				
b	Any related organization?	5b		A				
	If "Yes" on line 5a or 5b, describe in Part III.							
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation							
	contingent on the net earnings of:			v				
	The organization?	6a		X				
b	Any related organization?	6b		<u> </u>				
_	If "Yes" on line 6a or 6b, describe in Part III.							
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			v				
_	not described on lines 5 and 6? If "Yes," describe in Part III	7		<u> </u>				
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			77				
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X				
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in							
	Regulations section 53.4958-6(c)?	9	l	ı				

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

Schedule J (Form 990) 2023

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

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

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

	(B) Breakdown of W	/-2 and/or 1099-MISO compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) THOMAS LOPACH	(i)	259,438.	0.	0.	7,777.	9,781.	276,996.	0.
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ELBERT HAIRSTON	(i)	177,082.	0.	0.	5,310.	8,500.	190,892.	0.
CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) KATHARINE WERNER	(i)	157,339.	0.	0.	4,717.	17,675.	179,731.	0.
VICE PRESIDENT OF DIGITAL PROGRAMS	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) CARYN PAVLAK	(i)	159,791.	0.	0.	4,791.	7,146.	171,728.	0.
VICE PRESIDENT OF DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) JOHN MALLOY	(i)	147,570.	0.	0.	4,425.	7,323.	159,318.	0.
VP OF DATA SYSTEMS & ANALYTICS	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) LIONEL DRIPPS	(i)	148,087.	0.	0.	0.	9,309.	157,396.	0.
EXECUTIVE VICE PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							(5

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

Inspection Employer identification number

	THE VOTER PARTICIPATION CENTER					55-0889748			
Pa	rt I Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	etermin	_	s	
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded	X	8	546,855.	FMV				
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other ()								
26	Other ()								
27	Other ()								
28	Other (
29	Number of Forms 8283 received by the organization						•		
	for which the organization completed Form 82	83, Part V, D	onee Acknowledg	ement 29			0		
							Yes	No	
30a	During the year, did the organization receive by			,	·				
	must hold for at least 3 years from the date of								
	exempt purposes for the entire holding period?	?				30a		X	
b	If "Yes," describe the arrangement in Part II.								
31	Does the organization have a gift acceptance p				ions?	31	X		
32a	Does the organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell noncash					
	contributions?					32a		X	
b	If "Yes," describe in Part II.								
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of property	for which column (a) is chec	ked,				
	describe in Part II.								

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

Schedule M (Form 990) 2023

Schedule M (Form 990) 2023

332142 09-11-23

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.

2023
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

THE VOTER PARTICIPATION CENTER

Employer identification number 55-0889748

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

THE FORM 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS WITH THE ASSISTANCE OF
THE CFO. THE FORM WAS REVIEWED BY THE CFO AND THE PRESIDENT/CEO. THE FINAL
FORM 990 WAS DISTRIBUTED ELECTRONICALLY TO THE BOARD FOR REVIEW BEFORE
FILING WITH THE IRS.

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

EACH DIRECTOR, PRINCIPAL OFFICER, SENIOR STAFF, AND MEMBER OF A COMMITTEE

WITH GOVERNING BOARD DELEGATED POWERS ANNUALLY SIGNS A STATEMENT WHICH

AFFIRMS SUCH PERSON:

- A. HAS RECEIVED A COPY OF THE CONFLICTS OF INTEREST POLICY,
- B. HAS READ AND UNDERSTANDS THE POLICY,
- C. HAS AGREED TO COMPLY WITH THE POLICY, AND
- D. UNDERSTANDS THE ORGANIZATION IS CHARITABLE AND, IN ORDER TO MAINTAIN ITS

 FEDERAL TAX EXEMPTION, IT MUST ENGAGE PRIMARILY IN ACTIVITIES WHICH

 ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES.

AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS, AND

AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, HE/SHE LEAVES THE

GOVERNING BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT

OF INTEREST IS DISCUSSED AND VOTED UPON. THE REMAINING BOARD OR COMMITTEE

MEMBERS DECIDE IF A CONFLICT OF INTEREST EXISTS.

IF THE GOVERNING BOARD OR COMMITTEE HAS REASONABLE CAUSE TO BELIEVE A

MEMBER HAS FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, IT

INFORMS THE MEMBER OF THE BASIS FOR SUCH BELIEF AND AFFORDS THE MEMBER AN
For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990) 2023

LHA 332211 11-14-23

<u>Schedule O (Form 990) 2023</u> Page **2**

Name of the organization
THE VOTER PARTICIPATION CENTER

Employer identification number 55-0889748

OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE. IF, AFTER HEARING
THE MEMBER'S RESPONSE AND AFTER MAKING FURTHER INVESTIGATION AS WARRANTED
BY THE CIRCUMSTANCES, THE GOVERNING BOARD OR COMMITTEE DETERMINES THE
MEMBER HAS FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST,
IT TAKES APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION.

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

IN DETERMINING COMPENSATION, THE BOARD RELIED ON AN INDEPENDENT SURVEY OF
COMPENSATION DATA COMPILED OF CHIEF EXECUTIVE OFFICERS FOR ORGANIZATIONS OF
COMPARABLE SIZE IN THE DC AREA. THE PROCESS AND THE DECISION OF THE BOARD
IS DOCUMENTED IN THE MINUTES OF THE BOARD. A COPY OF THE BOARD'S DECISION
IS ALSO INCLUDED IN THE PERSONNEL FILE. A SIMILAR PROCESS IS ALSO USED FOR
OTHER OFFICERS OF THE ORGANIZATION, WHERE THE BOARD USES COMPARABLE DATA TO
DETERMINE COMPENSATION. THE LAST COMPENSATION REVIEW TOOK PLACE IN DECEMBER
2022.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, CA, FL, GA, IL, KS, KY, MD, MA, MI, MN, MS, NJ, NM, NY, NC, PA, TN, VA, WI

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

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART VII, BOARD COMPENSATION:

DENISE JUNEAU RECEIVED COMPENSATION FOR PROVIDING STRATEGIC CONSULTING

SERVICES TO THE ORGANIZATION. THESE SERVICES WERE UNRELATED TO THEIR

DUTIES AS A BOARD MEMBER.