Form **990**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

A For the 2019 calendar year, or tax year beginning

Return of Organization Exempt From Income Tax

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

, 2019, and ending

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

OMB No. 1545-0047

Open to Public Inspection

Α	For t	he 2019 calen	dar year, or tax year begin	ning 7/(01	, 2019, a	and ending	6/3	30	,	, 2020	
В	Check	if applicable:	С						D Employ	er identi	fication number	
	Па	ddress change	GENERATION CITIZ	EN. TNC	_				27-	2039	522	
	\vdash	lame change	110 WALL STREET,	5TH FLO	OOR			ŀ	E Telepho			
	\vdash	•	NEW YORK, NY 100						(61	7) 0	22 0226	
	\vdash	nitial return						ŀ	(01	1) 9.	33-9336	
	⊢ Fi	nal return/terminated									.	
	ША	mended return							G Gross r		-,	
	ША	pplication pending	F Name and address of principal	officer: JOS	SHUA SOLOM	ON	'	•	a group retur			X No
			SAME AS C ABOVE				H(b) Are all s	subordinates attach a list	included	d? Yes	No No
ī	Tax	-exempt status:	X 501(c)(3) 501(c) (nsert no.) 4	947(a)(1) or	527	11 140,	attacii a iist	(300 1113	structions)	
J			NERATIONCITIZEN.		,		HO	c) Group e	exemption nu	ımber ►	-	
K		m of organization:	X Corporation Trust	Association	Other ►	1 >4	ear of formation:	•			egal domicile: MA	Δ
	art I	Summar		Association	Other	- 10	ear or formation.	2010	, 111 3	tate of it	egal domicile. M	1
Г	1		y be the organization's missi	on or most	cianificant activ	vitios: CEMI	ED V TI ON	СТТТ	ZEN (G	C) E:	MADIEC	
	'		JALS AND FAMILIES								NABLES	
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ш			RESILIENCE IN BOT			TNKEN'	AND IO	ALLOW	_ <u> </u>	TE2	_10_PFCOM	<u>- A</u>
ē			TING PART OF THE Cox ► if the organization									
Ó	3		oting members of the gover							net as:	sets.	1.0
જ	4		dependent voting members							4		18
es	5		of individuals employed in							5		16 62
₹	6		of volunteers (estimate if							6		173
Activities & Governance	72		ed business revenue from F							7a		0.
•			d business taxable income							7a 7b		0.
		THE UTILITIES	a basiness taxable income	101111 01111 2	750 1, 11110 35				rior Year	7.5	Current Y	
	8	Contributions	and grants (Part VIII, line	1h)			-			ΛE		
ē	9		- ·	•			L		,211,1			3,152.
Revenue	_	-	vice revenue (Part VIII, line				L		,194,1		953	959.
é	10		ncome (Part VIII, column (A	•	•		L		15,7		1.0	
	11		e (Part VIII, column (A), lir							55.		751
	12		e – add lines 8 through 11					5	,426,1		5,335	751.
	13		imilar amounts paid (Part I				L		128,1	98.		
	14		I to or for members (Part I)				L					
S	15	Salaries, other	er compensation, employee	: benefits (F	Part IX, column	(A), lines	5-10) [3	,492,9	199.	4,012	2,869.
Expenses	16 a	Professional	fundraising fees (Part IX, o	olumn (A),	line 11e)							
be	l b	Total fundrais	sing expenses (Part IX, col	umn (D). lir	ne 25) ►	98.	1,900.					
ŭ	17		ses (Part IX, column (A), lir					1	,557,1	27	1 [11	402
			es. Add lines 13-17 (must e				H					<u>, 492.</u>
	18	•	·	•		•		5	,178,3			,361.
	19	Revenue less	s expenses. Subtract line 1	3 irom line	12				247,8			610.
s or		-	(D. 1.)/ 1: 10)						g of Curren		End of Y	
Net Assets	20		(Part X, line 16)				L	1	,886,2			456.
Z A	21	Total liabilitie	es (Part X, line 26)						233,6	30.	441	. , 696.
žŽ	22	Net assets or	fund balances. Subtract li	ne 21 from	line 20			1	,652,5	80.	1,340	760.
Pa	art II	Signatur	e Block									
Und	er pena	Ilties of perjury, I de	eclare that I have examined this retu arer (other than officer) is based on a	rn, including ac	companying schedu	les and statem	nents, and to the	best of my	y knowledge	and beli	ef, it is true, correc	t, and
com	plete. [Declaration of prepa	arer (other than officer) is based on	all information o	of which preparer ha	s any knowled	ge.					
Sig	an	Signatu	re of officer					Dat	te			
He	ere	JOS	HUA SOLOMON					COO				
	-		print name and title									
_		Print/Type r	oreparer's name	Preparer's sign	nature		Date	I	Check	if	PTIN	
_										J ''		,
Pa			SIDDIQUI-KHAN		<u>SIDDIQUI-K</u>	.ПAIN			self-employe	ea .	P01958878	,
	epar	_										
US	e Or	11y Firm's addre			250				Firm's EIN		-1489821	
			CONCORD, CA S						Phone no.		<u>-603-0800</u>	
Ma	y the	IRS discuss th	nis return with the preparer	shown abov	ve? (see instru	ctions)					. X Yes	No

4d Other program services (Describe on Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ► 3,718,566.

BAA

TEEA0102L 07/31/19

Form 990 (2019)

Form 990 (2019) GENERATION CITIZEN, INC. 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Χ	
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		Х
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	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		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	Х	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
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		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If 'Yes,' complete Schedule D, Part V	10		Х
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.			
a	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	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.	11 b		Х
c	Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.	11 c		Х
c	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.	11 d		Х
e	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
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	11 f		Х
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	Χ	
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
14 a	a 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		Х
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? <i>If 'Yes,' complete Schedule F, Parts II and IV</i>	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If 'Yes,' complete Schedule F, Parts III and IV</i>	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		Х
20 a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
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		Х

Form 990 (2019) GENERATION CITIZEN, INC. Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		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? <i>If 'Yes,' complete Schedule J.</i>	23		Х
24	a 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		Х
1	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
•	c 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		Х
l	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		Х
26	former officer, director, trusteé, key employee, créator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part II</i>	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
;	a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> 'Yes,' complete Schedule L, Part IV	28a		Х
1	b A family member of any individual described in line 28a? <i>If 'Yes,' complete Schedule L, Part IV.</i>	28b		Х
,	c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If</i> Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M.</i>	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I.</i>	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance	. –	_	
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.1 a177b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.1 b0		163	110
,	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	
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Form 990 (2019) GENERATION CITIZEN, INC.

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

			Yes	No
2 a	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 62			
k	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
k	If 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation on Schedule O</i>	3 b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
k	olf 'Yes,' enter the name of the foreign country►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
C	: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
k	olf 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
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?	7 a	Χ	
	olf 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	Χ	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
	I If 'Yes,' indicate the number of Forms 8282 filed during the year	76		Λ
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899			
•	as required?	7 g		
ł	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
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?	8		
	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
Ł	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	of f 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a		
ć	Note: See the instructions for additional information the organization must report on Schedule O.	ısa		
L	- · · · · · · · · · · · · · · · · · · ·			
	Denter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	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	14 b		
	· · · · · · · · · · · · · · · · · · ·	יייט		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
10	If 'Yes,' complete Form 4720, Schedule O.	10		

Form 990 (2019) GENERATION CITIZEN, INC. 27-2039522 Page 6 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. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year..... 18 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..... 16 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? Χ 2 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 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?.... Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?..... 5 Χ Did the organization have members or stockholders?..... 6 7 a 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?..... 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... 8 a X Χ **b** Each committee with authority to act on behalf of the governing body?..... 8 b 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 Q..... 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... 10a 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 Χ 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Χ 12b to conflicts?..... Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ Χ 14 Did the organization have a written document retention and destruction policy?..... 14 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? X a The organization's CEO, Executive Director, or top management official. SEE SCHEDULE. O. 15 a **b** Other officers or key employees of the organization..... Χ If 'Yes' to line 15a or 15b, describe the process in 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?..... 16 a Χ **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?..... Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > CA NY MA TX OK RI 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 only) available for public inspection. Indicate how you made these available. Check all that apply Other (explain on Schedule O) SEE SCH. O Another's website X Upon request Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records

NEW YORK NY 10005 (617)

933-9336

5TH FLOOR

ORGANIZATION 110 WALL STREET,

Form 990 (20)19) (.	FNFR	MOTTA	CITIZE	N -	INC.
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27-2039522

⊃age 7

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

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

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

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

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

Check this box if neither the organization nor any rela	ated organiz	ation	con	nper	nsate	ed any	y cu	rrent officer, direct	or, or trustee.	
				(C))					_
(A) Name and title	(B) Average hours per	thar	n one s both	box, an c	unles	,	son	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other
	week (list any hours for related organiza- tions below dotted line)	ËË	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	compensation from the organization and related organizations
(1) SCOTT WARREN	40									
CEO	0			X				136,995.	0.	0.
(2) JOSHUA SOLOMON	40									
C00	0			X				110,371.	0.	0.
	$-\frac{40}{0}$					Х		102,086.	0.	0.
_(4)_KUNAL_MODI	11									
BOARD CHAIR	0	X		Χ				0.	0.	0.
(5) DAVID FLINK	1									
DIRECTOR	0	X						0.	0.	0.
(6) MARY_VASCELLARO	1									
DIRECTOR	0	X						0.	0.	0.
_(7)_JAKE_MAZEITIS	1									
DIRECTOR	0	X						0.	0.	0.
(8) LIZZETTE GONZALEZ REYNOLDS	11									
DIRECTOR	0	X						0.	0.	0.
(9) SYLVIA GORDON ROUSSEAU	1									
DIRECTOR	0	X						0.	0.	0.
(10) PRISCILA GUILLEN	1									
DIRECTOR	0	X						0.	0.	0.
(11) JULIE HUDMAN	1									
DIRECTOR	0	Х						0.	0.	0.
(12) KEI KAWASHIMA-GINSBERG	1									
DIRECTOR	0	Х						0.	0.	0.
(13) JANE LO DIRECTOR	$- - \frac{1}{0} - $	X						0.	0.	0.
(14) JOSEPH MCGEEHIN DIRECTOR		Х						0.	0.	0.

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	(B)			(0	>)						
(A)	Average		Position (do not check more than one		(D)	(E)	(F)				
Name and title	hours per week	offic			Reportable compensation from	Reportable compensation from	Estimated am of other	ount			
	(list any hours	Individual I or director	Instit	Officer	Key	emp!	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation the organizat	tion
	for related organiza	ndividual trustee or director	Institutional trustes)er	Key employee	est o	er er			and relate organization	
	- tions below	yr Thus	ial tro		loyee	ompe					
	dotted line)	tee	ustee		"	Highest compensated employee					
						8					
(15) HANNA RODRIGUEZ-FARRAR	1								0		0
DIRECTOR (16) MATTHEW SEGNERI	0	Х						0.	0.		0.
DIRECTOR		X						0.	0.		0.
(17) DAN TANGHERLINI	1							0.	0.		.
DIRECTOR	0	X						0.	0.		0.
(18) ALEXANDRIA TESCH	1										
DIRECTOR	0	X						0.	0.		0.
(19) REGAN TURNER	1								0		^
DIRECTOR (20)	0	Х						0.	0.		0.
(20)											
(21)											
(22)											
(23)											
(24)											
(25)											
(25)											
1 b Subtotal							>	349,452.	0.		0.
c Total from continuation sheets to Part VII, Section							>	0.	0.		0.
d Total (add lines 1b and 1c).							• • • • • • • • • • • • • • • • • • •	349,452.	0.		0.
2 Total number of individuals (including but not limited from the organization ► 3	to those I	isted	abov	/e) v	who	recei	ved	more than \$100,00	U of reportable comp	ensation	
										Yes	No
3 Did the organization list any former officer, direc	tor. truste	e. ke	ev er	olan	ovee	e. or	hiał	nest compensated	emplovee		
on line 1a? If 'Yes,' complete Schedule J for suc	h individu	aĺ								. 3	X
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate	reportab	le co	mpe	nsa	tion	and	oth	er compensation	from		
such individual							ιρι ε 	· · · · · · · · · · · · · · · · · · ·		. 4	X
5 Did any person listed on line 1a receive or accrufor services rendered to the organization? If 'Yes	e compen	satio	n fro	om :	any	unre	late	ed organization or	individual	5	X
Section B. Independent Contractors	s, comple	ie st	neu	uie	J 10	Suc	πρ	ersorr		. 3	
Complete this table for your five highest compen compensation from the organization. Report compen	sated inde	epend	dent	cor	ntra	ctors	tha	t received more the	nan \$100,000 of		
		uie Ca	aleni	Jai j	year	enun	ng v	t	·	(C)	
(A) Name and business addi	ress							(B) Description of	of services	Compensation	on ———
WEWORK WALL STREET 222 BROADWAY, 22ND FLOO	R NEW Y	ORK,	NY	10	038			RENT		142,6	<u>607.</u>
2 Total number of independent contractors (including b		ted to	tho	se I	isted	abo	ve)	who received more	than		
\$100,000 of compensation from the organization		TEEAO	100	07.11	21/10					Form 990	(2010)

Part VIII Statement of Revenue

Total revenue Related or screen.com Related or s			Check if Schedule O contains a re	esponse or note to any	y line in this Part V	III		
PROGRAM SERVICES 611710 953,959 953,959					(A) Total revenue	Related or exempt function	Unrelated business	Revenue excluded from tax under sections
PROGRAM SERVICES 611710 953,959 953,959	ıts ts	1 a	Federated campaigns 1	la				
PROGRAM SERVICES 611710 953,959 953,959	ran	b	Membership dues	l b				
PROGRAM SERVICES 611710 953,959 953,959	Ē, Ε		·	l c 7 500				
PROGRAM SERVICES 611710 953,959 953,959	fts			7,000.				
PROGRAM SERVICES 611710 953,959 953,959	ਜ਼ੋਂ ਨੂੰ							
PROGRAM SERVICES 611710 953,959 953,959	ns, Sim			634,811.				
PROGRAM SERVICES 611710 953,959 953,959	ntio er:			If 3 720 841				
PROGRAM SERVICES 611710 953,959 953,959	ĕ₩	q	Noncash contributions included in	3,123,3121				
PROGRAM SERVICES 611710 953,959 953,959	d H	_						
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds. 5 Royalties 6 G G G G G G G G G		h	Total. Add lines 1a-1f	_	4,363,152.			
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds. 5 Royalties 6 G G G G G G G G G	ne			Business Code				
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds. 5 Royalties 6 G G G G G G G G G	ven	2 a	PROGRAM SERVICES	611710	953,959.	953,959.		
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds. 5 Royalties 6 G G G G G G G G G	Re							
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds. 5 Royalties 6 G G G G G G G G G	<u>.e</u>	С		. –				
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds. 5 Royalties 6 G G G G G G G G G	er∖	d						
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds. 5 Royalties 6 G G G G G G G G G	n S	е		-				
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds. 5 Royalties 6 G G G G G G G G G	Tal	f	All other program service revenue	-				
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds. 5 Royalties 6 G G G G G G G G G	č		, ,		052 050			
other similar amounts) 4 Income from investment of tax-exempt bond proceeds. Floyalties. 6 a Gross rents. 6 a Gross rents. 6 a b Less: rental expenses 6 b C Rental income or (foss) 6 c Net rental income or (foss) 6 c Net rental income or (foss) 7 a Gross amount from sales of assets of their hairs and sales expenses 6 c Gain or (foss). 7 b C C Net gain or (foss). 8 a Gross income from fundraising events (not including. \$ of contributions reported on line 1c). See Part IV, line 18 . 8 a Bus Less: direct expenses. 8 b Less: direct expenses. 8 a Bus Less income from ganing activities. See Part IV, line 19 9 a Gross income from ganing activities. 9 a Gross sales of inventory, less. 10 a MISCELLANEOUS 9 900099 18,640. 18,640.	ш.				933,939.			
A Income from investment of lax-exempt bond proceeds Royalties		3	other similar amounts)	s, interest, and				
Section Sect		4	Income from investment of tax-exer	not bond proceeds.				
Company Comp								
Ga Gross rents Ga Ga Ga Ga Ga Ga Ga G		,	_					
b Less: rental expenses c Rental income or (loss) 6c d Net gain or (loss) 7a d Net gain or (loss) 7b d Net gain or (loss) 7c d Net gain or (loss) 7c d Net gain or (loss) 8a Gross income from fundraising events (lot including \$\frac{1}{2}\$ of contributions reported on line 1c). 8a b Less: direct expenses 8b c Net income or (loss) from fundraising events 9a Gross income from gaming activities. 9a b Less: direct expenses 9b c Net income or (loss) from gaming activities. 9a b Less: cost of goods sold 10b c Net income or (loss) from sales of inventory. \$\frac{1}{2}\$ under the composition of t		6.	· · · · · · · · · · · · · · · · · · ·	(ii) i cisoridi				
c Rental income or (loss) d Net rental income or (loss). 7a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss). 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18. 8a b Less: direct expenses. 8b c Net income or (loss) from fundraising events. • Net income or (loss) from gaming activities. 9a Gross income from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) from gaming activities. • Net income or (loss) f								
d Net rental income or (loss)								
7a Gross amount from sales of assets of than inventory b. Less: cost or other basis and sales expenses c. G. Gain or (loss)								
Page		d						
other than inventory b Less: cost or other basis and sales expenses c Gain or (loss)		7 a	Gross amount from (i) Securitie	s (ii) Other				
b Less: cost or other basis and sales expenses c Gain or (loss)								
and sales expenses C Gain or (loss)		b	UHIEL HIAH HIVEHLUIV I I					
Ba Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18.								
8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18. 8 a b Less: direct expenses. 9 a Gross income from gaming activities. See Part IV, line 19. 9 a Gross income from gaming activities. See Part IV, line 19. 9 a Gross income from gaming activities. 9 a b Less: direct expenses. 9 b c Net income or (loss) from gaming activities. 10 a Gross sales of inventory, less. returns and allowances b Less: cost of goods sold. 10 b c Net income or (loss) from sales of inventory. Paul Business Code 11 a MISCELILANEOUS 900099 18,640. 18,640.		С	Gain or (loss) 7c					
(not including \$ of contributions reported on line 1c). See Part IV, line 18. b Less: direct expenses. c Net income or (loss) from fundraising events. 9 a Gross income from gaming activities. See Part IV, line 19. b Less: direct expenses. 9 b c Net income or (loss) from gaming activities. 10 a Gross sales of inventory, less. returns and allowances b Less: cost of goods sold. 10 b c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. b Less: cost of goods sold. 10 b c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net income or (loss) from sales of inventory. c Net		d	Net gain or (loss)					
9 a Gross income from gaming activities. See Part IV, line 19		8 a	(not including \$					
9 a Gross income from gaming activities. See Part IV, line 19	<u>ē</u>							
9 a Gross income from gaming activities. See Part IV, line 19	7	h						
9 a Gross income from gaming activities. See Part IV, line 19	‡			7 1				
See Part IV, line 19	O			g events				
b Less: direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Business Code 11a MISCELLANEOUS 900099 18,640. 18,640. b c c d All other revenue e Total. Add lines 11a-11d 18,640.		9 a	Gross income from gaming activities.					
C Net income or (loss) from gaming activities		L	•					
To a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Business Code 11a MISCELLANEOUS 900099 18,640 . 18,640 . c d All other revenue								
Teturns and allowances		С	Net income or (loss) from gaming a	ctivities				
b Less: cost of goods sold c Net income or (loss) from sales of inventory Business Code 11a MISCELLANEOUS 900099 18,640. 18,640. c d All other revenue e Total. Add lines 11a-11d 18,640.		10 a	Gross sales of inventory, less					
C Net income or (loss) from sales of inventory								
Business Code			· ·					
11a MISCELLANEOUS 900099 18,640. 18,640. b c d All other revenue 4 Total. Add lines 11a-11d 18,640.		С	Net income or (loss) from sales of i					
	র্			Business Code				
	<u> </u>	11 a	MISCELLANEOUS	900099	18,640.	18,640.		
	돌로	b						
	ਛਂ ≱	С	`					
	ပ္က 🏖	d	All other revenue					
==7,000	Σ	е	Total. Add lines 11a-11d	.	18.640			
					5,335,751.	972,599.	0.	0.

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).

Do i	Check if Schedule O contains a re not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	[X] (D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21		олренаев	general expenses	Сурспаса
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	270,000.	181,177.	33,077.	55,746.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	3,180,478.	2,134,177.	389,633.	656,668.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,100,470.	2,134,177.	303,033.	030,000.
9	Other employee benefits	297,644.	188,253.	56,580.	52,811.
10	Payroll taxes	264,747.	175,514.	33,305.	55,928.
11	Fees for services (nonemployees):	·	·		
ā	Management				
ŀ) Legal				
(Accounting				
C	Lobbying				
•	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.\$CH. Q. Advertising and promotion	596,039.	363,225.	184,915.	47,899.
13	Office expenses	3,327.	723.	2,472.	132.
14	Information technology	30,450.	19,789.	3,932.	6,729.
15	Royalties.	30, 130.	15,705.	3,332.	0,725.
16	Occupancy	286,221.	182,920.	43,091.	60,210.
17	Travel	174,948.	113,437.	46,575.	14,936.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	17173101	110/10/1	10,0701	11,300.
19	Conferences, conventions, and meetings	1,823.		1,684.	139.
20	Interest	3,457.		3,457.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	12,611.	11,233.	488.	890.
23	Insurance	10,712.	6,995.	1,384.	2,333.
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 O.)				
ā	SCHOOL SUPPORT	72,797.	72,797.		
t	P DEMOCRACY COACH	72,375.	72,375.		
	STAKEHOLDER EXPENSES	65,533.	65,533.		
C	CIVICS DAY	41,108.	41,108.		
•	All other expenses	140,091.	89,310.	23,302.	27,479.
25	Total functional expenses. Add lines 1 through 24e	5,524,361.	3,718,566.	823,895.	981,900.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to	any li	ne in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing			451,763.	1	568,728.
	2	Savings and temporary cash investments			367,788.	2	640,617.
	3	Pledges and grants receivable, net			714,145.	3	285,000.
	4	Accounts receivable, net			216,218.	4	93,312.
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantial controlled entity or family member of any of these per	er offic contrib	er, director, outor, or 35%		5	
	6	Loans and other receivables from other disqualified pe		_			
		section 4958(f)(1)), and persons described in section				6	
	7	Notes and loans receivable, net			7		
\$	8	Inventories for sale or use				8	
Assets	9	Prepaid expenses and deferred charges			90,252.	9	49,352.
Ä	1 0 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	16,221.			
	b	Less: accumulated depreciation	10 b	4,575.	5,761.	10 c	11,646.
	11	Investments — publicly traded securities			,	11	•
	12	Investments — other securities. See Part IV, line 11				12	
	13	Investments - program-related. See Part IV, line 11.				13	
	14	Intangible assets				14	96,794.
	15	Other assets. See Part IV, line 11	40,283.	15	37,007.		
	16	Total assets. Add lines 1 through 15 (must equal line	33)		1,886,210.	16	1,782,456.
	17	Accounts payable and accrued expenses	37,207.	17	14,285.		
	18	Grants payable				18	
	19	Deferred revenue		_	3,500.	19	54,450.
	20	Tax-exempt bond liabilities		<u> </u>		20	
ě	21	Escrow or custodial account liability. Complete Part I				21	
Liabilities	22	Loans and other payables to any current or former off key employee, creator or founder, substantial contribu- controlled entity or family member of any of these per	icer, di itor, or sons	rector, trustee, 35%		22	
	23	Secured mortgages and notes payable to unrelated th	ird par	ties		23	
	24	Unsecured notes and loans payable to unrelated third	parties	s		24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	s to re plete P	lated third parties, Part X of Schedule D.	192,923.	25	372,961.
	26	Total liabilities. Add lines 17 through 25			233,630.	26	441,696.
nces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	▶	X			
쿌	27	Net assets without donor restrictions			379,205.	27	496,625.
m	28	Net assets with donor restrictions		<u></u>	1,273,375.	28	844,135.
Net Assets or Fund Balance		Organizations that do not follow FASB ASC 958, che and complete lines 29 through 33.	ck here	• ► □			
ō	29	Capital stock or trust principal, or current funds				29	
इं	30	Paid-in or capital surplus, or land, building, or equipm		<u> </u>		30	
Š	31	Retained earnings, endowment, accumulated income,				31	
t A	32	Total net assets or fund balances		<u> </u>	1,652,580.	32	1,340,760.
Ř	33	Total liabilities and net assets/fund balances			1,886,210.	33	1,782,456.

Pai	↑ XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI.		<u> </u>		. X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,3	35,	751.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,5	24,3	361.
3	Revenue less expenses. Subtract line 2 from line 1	3	-1	88,6	510.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,6	52,5	580.
5	Net unrealized gains (losses) on investments.	5			
6	Donated services and use of facilities	6	_	26,2	226.
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O). SEE SCHEDULE 0	9		96,9	984.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	1 3	⊿ ∩ '	760.
Pai	t XII Financial Statements and Reporting			10,	700.
	Check if Schedule O contains a response or note to any line in this Part XII				
	Check if Scriedule O contains a response of note to any line in this Part Air			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			162	NO
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2 8	a Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewe separate basis, consolidated basis, or both: Separate basis Both consolidated and separate basis	d on a			
ŀ	Were the organization's financial statements audited by an independent accountant?		. 2b	Χ	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separa basis, consolidated basis, or both:	te			
	X Separate basis Consolidated basis Both consolidated and separate basis				
(If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		. 2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.				
3 a	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		. 3a		Х
ŀ	o If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		. 3b		
BAA	TEEA0112L 01/21/20		Form	990	(2019)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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 2019

Open to Public Inspection

Employer identification number GENERATION CITIZEN, INC. 27-2039522 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 Χ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in 12 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.** Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations **q** Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (iv) Is the organization listed (vi) Amount of other support (see instructions) in your governing document? No (A) (B) (C) (D) (E) Total

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.)

Section A. Public Support									
begi	ndar year (or fiscal year nning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	1,745,344.	1,835,282.	4,322,478.	4,926,403.	4,363,152.	17,192,659.		
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.		
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.		
	Total. Add lines 1 through 3 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)	1,745,344.	1,835,282.	4,322,478.	4,926,403.	4,363,152.	1,090,651.		
6	Public support. Subtract line 5 from line 4						16,102,008.		
Sec	tion B. Total Support								
	ndar year (or fiscal year nning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total		
7	Amounts from line 4	1,745,344.	1,835,282.	4,322,478.	4,926,403.	4,363,152.	17,192,659.		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources			3,836.	15,797.		19,633.		
9	Net income from unrelated business activities, whether or not the business is regularly carried on			,	,		0.		
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). SEE PART VI.	35,425.	14,096.	3,550.	5,155.	18,640.	76,866.		
	Total support. Add lines 7 through 10						17,289,158.		
12	Gross receipts from related active	vities, etc. (see ins	structions)				239,760.		
	First five years. If the Form 990 is organization, check this box and	stop here		ird, fourth, or fifth t	tax year as a section	on 501(c)(3)			
Sec	tion C. Computation of Pu Public support percentage for 20	blic Support P	'ercentage			1			
	Public support percentage for 20 Public support percentage from						93.13 % 94.31 %		
	33-1/3% support test-2019. If t	he organization di	id not check the b	ox on line 13. and	d line 14 is 33-1/3	B% or more, checl	k this box		
b	and stop here. The organization qualifies as a publicly supported organization. b 33-1/3% support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.								
1 7 a	7a 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, 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' test. The organization qualifies as a publicly supported organization								
	b 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, 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' test. The organization qualifies as a publicly supported organization								
			on a box on mic	. 5, 154, 166, 174	, 5, 1,5, 611661(111	.5 50% 4114 500 111			

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.)

Sec	tion A. Public Support		1				
Calend	dar year (or fiscal year beginning in) 🟲	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any unusual grants.)						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
С	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
1 0 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
	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 in line 10b, whether or not the business is regularly carried on						
12	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.)						
	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, o	or fifth tax year as	a section 501(c)(3	⁽¹⁾
	tion C. Computation of Pul	<u> </u>				, ,	
	Public support percentage for 20	•	• • • • • • • • • • • • • • • • • • • •	• •	•		%
	Public support percentage from					16	%
	tion D. Computation of Inv					, ,	
17	, ,	· · ·					%
18	Investment income percentage f						%
	33-1/3% support tests—2019. If it is not more than 33-1/3%, check 33.1/3% support tests— 2018 . If it	this box and sto	p here. The organ	nization qualifies	as a publicly supp	orted organization	▶ ∐
a	33-1/3% support tests—2018. If the line 18 is not more than 33-1/3%						
20	Private foundation. If the organize	zation did not che	eck a box on line	14, 19a, or 19b, o	check this box and	see instructions	

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	11 3 3			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
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).	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination.	3b		
С	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.	3c		
4a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4 a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	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.	4c		
5а	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If 'Yes,' provide detail in Part VI.</i>	6		
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 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as 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 .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI .	9b		
С	Did a disqualified person (as defined in 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 .	9с		
1 0 a	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 10b below.	1 0 a		
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.)	10b		

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Pa	<u>rt IV</u>	Supporting Organizations (continued)			
11	Hac t	the organization accepted a gift or contribution from any of the following persons?		Yes	No
		rice organization accepted a gift of contribution from any of the following persons: son who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	gover	rning body of a supported organization?	11a		
	b A fan	nily member of a person described in (a) above?	11b		
		% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		
Sec	ction I	B. Type I Supporting Organizations			
-	D:4 H	and diverting twinters as manufacturing of any as many comparted examinations have the neuros to security appoint.		Yes	No
1	or ele Part If the direct	ne directors, trustees, or membership of one or more supported organizations have the power to regularly appoint act at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. The organization had more than one supported organization, describe how the powers to appoint and/or remove tors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, and to such powers during the tax year.	1		
2	• • •	the organization operate for the benefit of any supported organization other than the supported organization(s)			
_	that o	operated, supervised, or controlled the supported organization(s) if 'Yes,' explain in Part VI how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the orting organization.	2		
Sed	ction (C. Type II Supporting Organizations			
				Yes	No
1	of ea	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ch of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the orting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sed	ction I	D. All Type III Supporting Organizations			
		<u> </u>		Yes	No
1	D:4 th	be experientian provide to each of its supported experientians, but he lost day of the fifth month of the			
1	orgar	he organization provide to each of its supported organizations, by the last day of the fifth month of the nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
		(ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
_					
2	orgar	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported nization(s) or (ii) serving on the governing body of a supported organization? <i>If 'No,' explain in Part VI how</i>			
	the o	organizatión maintained a close and continuous working relationship with the supported organization(s).	2		
3	voice	eason of the relationship described in (2), did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at mes during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played			
		is regard.	3		
Sec	ction I	E. Type III Functionally Integrated Supporting Organizations			
1	Check	k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
	a	The organization satisfied the Activities Test. Complete line 2 below.			
	ь 🗖 ⊤	The organization is the parent of each of its supported organizations. Complete line 3 below.			
	c 🗌 T	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	struc	tions)	
2	Activi	ities Test. Answer (a) and (b) below.		Yes	No
i	suppo orgai respo	substantially all of the organization's activities during the tax year directly further the exempt purposes of the orted organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported nizations and explain how these activities directly furthered their exempt purposes, how the organization was onsive to those supported organizations, and how the organization determined that these activities constituted	2		
		tantially all of its activities.	2 a		
	the o	the activities described in (a) constitute activities that, but for the organization's involvement, one or more of rganization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for organization's position that its supported organization(s) would have engaged in these activities but for the			
	orgar	nization's involvement.	2b		
3	Parer	nt of Supported Organizations. <i>Answer (a) and (b) below.</i>			
	a Did th each	the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? <i>Provide details in Part VI.</i>	3 a		
	b Did th	ne organization exercise a substantial degree of direction over the policies, programs, and activities of each of its orted organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.	3b		

Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	janizat	ions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying tru instructions. All other Type III non-functionally integrated supporting organization	ıst on No ons mus	ov. 20, 1970 (explain in t complete Sections A	n Part VI). See Athrough E.
Sec	tion 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		
Sec	tion 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 shortax year or assets held for part of year):	t		
a	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	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 1-1/2% 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 .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
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 in (see instructions).	tegrated	Type III supporting or	ganization

Schedule A (Form 990 or 990-EZ) 2019

Line 8 amount divided by line 9 amount

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)	
Sec	tion D - Distributions	Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions.	
7	Total annual distributions. Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9	Distributable amount for 2019 from Section C, line 6	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			
RAA		Schodulo A (Eo	rm 990 or 990 E7) 2019

BAA

Schedule A (Form 990 or 990-EZ) 2019

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

PART II, LINE 10 - OTHER INCOME

NATURE AND SOURCE			2019	 2018		2017		2016		2015
MISCELLANEOUS		Ş	18,640.		Ş	3,550.	Ş	2,762.	Ş	74.
SPECIAL EVENTS				\$ 5,155.				11,334.		35,351.
	TOTAL	\$	18,640.	\$ 5,155.	\$	3,550.	\$	14,096.	\$	35,425.

Schedule B

(Form 990, 990-EZ, or 990-PF)
Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Employer identification number

2019

GENER	ATION CITIZEN,	INC.	27-2039522
Organiz	ation type (check one):		
Filers of	f:	Section:	
Form 99	0 or 990-EZ	\overline{X} 501(c)(3) (enter number) organization	
		4947(a)(1) nonexempt charitable trust not treated as a private foundation	on
Form 99	0-PF	527 political organization	
		501(c)(3) exempt private foundation	
		4947(a)(1) nonexempt charitable trust treated as a private foundation	
		501(c)(3) taxable private foundation	
_	=	ed by the General Rule or a Special Rule. (8), or (10) organization can check boxes for both the General Rule and a Sp	pecial Rule. See instructions.
General	Rule		charitable trust not treated as a private foundation te foundation charitable trust treated as a private foundation te foundation charitable trust treated as a private foundation te foundation ecial Rule. a check boxes for both the General Rule and a Special Rule. See instructions. Fit that received, during the year, contributions totaling \$5,000 or more (in money and II. See instructions for determining a contributor's total contributions. In filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations ecked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received parts I and II. In (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, and or animals. Complete Parts I, II, and III. In (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, ous, charitable, etc., purposes, but no such contributions totaled more than contributions that were received during the year for an exclusively religious, ous, charitable, etc., purposes, but no such contributions totaled more than contributions that were received during the year for an exclusively religious, the parts unless the General Rule applies to this organization because c., contributions totaling \$5,000 or more during the year.
		ng Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contribu	
Special	Rules		
X	under sections 509(a)(received from any on	1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line	e 13, 16a, or 16b, and that
	during the year, total	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rece contributions of more than \$1,000 <i>exclusively</i> for religious, charitable, sciention of cruelty to children or animals. Complete Parts I, II, and III.	
	during the year, contr \$1,000. If this box is charitable, etc., purpo	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that recerbutions exclusively for religious, charitable, etc., purposes, but no such controllected, enter here the total contributions that were received during the year ose. Don't complete any of the parts unless the General Rule applies to this contributions, charitable, etc., contributions totaling \$5,000 or more during the	ributions totaled more than r for an <i>exclusively</i> religious, organization because
		sn't covered by the General Rule and/or the Special Rules doesn't file Schedu	

Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

GENERATION CITIZEN, INC.

Employer identification number

27-2039522

Part I	Contributors	(see instructions).	Use duplicate	copies of Part I	if additional space	is needed.
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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FORD FOUNDATION		Person X
	320 EAST 43RD STREET	\$368,000.	Payroll
	NEW YORK, NY 10017		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	WILLIAM & FLORA HEWLETT FNDN		Person X Payroll
	2121 SAND HILL ROAD	\$475,000.	Noncash
	MENLO PARK, CA 94025		(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	NEW YORK CITY DEPT. OF YOUTH & COMM		Person X Payroll
	123 WILLIAM ST	\$480 <u>,</u> 923.	Noncash
	NEW YORK, NY 10038		(Complete Part II for noncash contributions.)
	41.5		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
(a) No. 		(c) Total contributions	Person X
(a) No. ———————————————————————————————————	Name, address, and ZIP + 4 MARY AND JEROME VASCELLARO HOUSEHOL	(c) Total contributions	_
(a) No. 	Name, address, and ZIP + 4 MARY AND JEROME VASCELLARO HOUSEHOL	\$150,000.	Person X Payroll
(a) No. 4 (a) No.	Name, address, and ZIP + 4 MARY AND JEROME VASCELLARO HOUSEHOL 2746 BUCHANAN ST.	\$150,000.	Person X Payroll Noncash (Complete Part II for
4(a)	Name, address, and ZIP + 4 MARY AND JEROME VASCELLARO HOUSEHOL 2746 BUCHANAN ST. SAN FRANCISCO, CA 94123 (b)	\$150,000.	Person X Payroll
4(a)	Name, address, and ZIP + 4 MARY AND JEROME VASCELLARO HOUSEHOL 2746 BUCHANAN ST. SAN FRANCISCO, CA 94123 (b) Name, address, and ZIP + 4	\$150,000.	Person X Payroll
4(a)	Name, address, and ZIP + 4 MARY AND JEROME VASCELLARO HOUSEHOL 2746 BUCHANAN ST. SAN FRANCISCO, CA 94123 Name, address, and ZIP + 4 LEVI STRAUSS FOUNDATION	\$150,000. (c) Total contributions	Person X Payroll
4(a)	Name, address, and ZIP + 4 MARY AND JEROME VASCELLARO HOUSEHOL 2746 BUCHANAN ST. SAN FRANCISCO, CA 94123 Name, address, and ZIP + 4 LEVI STRAUSS FOUNDATION 1155 BATTERY STREET	\$150,000. (c) Total contributions	Person X Payroll
(a) No.	Name, address, and ZIP + 4 MARY AND JEROME VASCELLARO HOUSEHOL 2746 BUCHANAN ST. SAN FRANCISCO, CA 94123 Name, address, and ZIP + 4 LEVI STRAUSS FOUNDATION 1155 BATTERY STREET SAN FRANCISCO, CA 94111 (b)	\$150,000. \$150,000. (c) Total contributions \$300,000.	Person X Payroll
(a) No.	Name, address, and ZIP + 4 MARY AND JEROME VASCELLARO HOUSEHOL 2746 BUCHANAN ST. SAN FRANCISCO, CA 94123 Name, address, and ZIP + 4 LEVI STRAUSS FOUNDATION 1155 BATTERY STREET SAN FRANCISCO, CA 94111 Name, address, and ZIP + 4	\$150,000. \$150,000. (c) Total contributions \$300,000.	Person X Payroll

Name of organization

Employer identification number

GENERATION CITIZEN, INC.

27-2039522

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional s	pace is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	N/A	_	
		-	
]\$ 	
(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
		_	
		-	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		-	
		1.	
		\$	

lame of organization		
GENERATION	CITIZEN,	INC

Employer identification number 27-2039522

Part III	Exclusively religious, charitable, et or (10) that total more than \$1,000 for the following line entry. For organizations of contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional	he year from any one contrib ompleting Part III, enter the tota (Enter this information once. Se	outor. Comple al of <i>exclusive</i>	te columns (a) through (e) and <i>ely</i> religious, charitable, etc.,
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	N/A			
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	tionship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	tionship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	tionship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	tionship of transferor to transferee

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

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

• 5	Section 501(c)(4), (5), or (6) or	rganizations: Complete Part III.			
Name	of organization	·		Employer identific	ation number
GEN	NERATION CITIZEN, I	NC.		27-203952	
	-	rganization is exempt under section			zation.
1	Provide a description of the constructions for definition	organization's direct and indirect political c n of 'political campaign activities')	ampaign activities in	Part IV.	
2	Political campaign activity ex	penditures (see instructions)		▶\$	}
3	Volunteer hours for political of	campaign activities (see instructions)			
Par	t I-B Complete if the or	rganization is exempt under section	on 501(c)(3).		
1	Enter the amount of any exc	ise tax incurred by the organization under	section 4955	> \$	0.
2	Enter the amount of any exc	ise tax incurred by organization managers	under section 4955.	▶\$	0.
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for	this year?		Yes No
4 a	Was a correction made?				Yes No
k	If 'Yes,' describe in Part IV.				
Par	t I-C Complete if the or	rganization is exempt under section	on 501(c) , excep	t section 501(c)(3).	i
1	Enter the amount directly exp	pended by the filing organization for section	n 527 exempt functio	n activities 🟲 \$	
2		g organization's funds contributed to other s			
3	Total exempt function expendine 17b	ditures. Add lines 1 and 2. Enter here and	on Form 1120-POL,	► \$	
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No
5	amount of political contribution	and employer identification number (EIN) s. For each organization listed, enter the ais received that were promptly and directly del I action committee (PAC). If additional spa	ivered to a separate po	olitical organization, such	as a separate
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Schedule C (Form 990 or 990-EZ) 2019

A 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 share of excess lobbying expenditures). B Check If the filing organization checked box A and Ilimited control provisions apply. Cimits on Lobbying Expenditures (and investigation) (and investigation) (but in the filing organization (but in the control provisions) (and in the control provisions) (but in the filing organization (but in the control provisions) (but in the filing organization (but in the control provisions) (but in the control prov	Part II-A Complete if section 501(the organization	is exempt under sec	ction 501(c)(3) and	filed Form 5768 (el	ection under
B Check ► ☐ if the filling organization checked box A and 'limited control' provisions apply. Limits on Lobbying Expenditures (The term 'expenditures' means amounts paid or incurred.) organization's teletis (e) Affilialed group totals (• • •	s to an affiliated group (and	list in Part IV each affilia	ated aroun member's name	<u> </u>
B Check			= ' '		itou group mombor o name	·1
1 a Total lobbying expenditures to influence public opinion (grassroots lobbying). 7,034. b Total lobbying expenditures to influence a legislative body (direct lobbying). 14,583. c Total lobbying expenditures (add lines 1a and 1b). 21,617. 0. d Other exempt purpose expenditures. 5,713,206. e Total exempt purpose expenditures (add lines 1c and 1d). 5,734,823. 0. f Lobbying nontexable amount. Enter the amount from the following table in both columns. If the amount on line le, column (a) or (b) is: The lobbying nontexable amount is: Not over \$50,000. 20% of the amount for line le, column (a) or (b) is: The lobbying nontexable amount is: Not over \$50,000. 20% of the amount line le. Over \$50,000. 20% of the amount on line le. Over \$50,000. 20% of the amount on line le. Over \$50,000. 20% of the amount on line le. Over \$50,000. 20% of the amount on line le. Over \$50,000. 20% of the amount on line le. Over \$50,000. 20% of the amount on line le. Over \$50,000. 20% of the amount on line le. Over \$50,000. 20% of the amount on line le. Over \$50,000. 20% of the amount on line le. Over \$50,000. 20% of the amount on line le. Over \$50,000. 20% of the amount on line le. Over \$50,000. 20% of the amount on line le. Over \$50,000. 20% of the amount on line le. Over \$50,000. 20% of the amount on line le. Over \$50,000. 20% of the amount on line le. Over \$50,000. 20% of the amount on line le. Over \$50,000. 20% of the amount on line le. Over \$50,000. 20% of the amount of line le. Over \$50,000. 20% of the amount of line le. Over \$50,000. 20% of the amount of line le. Over \$50,000. 20% of the amount of line le. Over \$50,000. 20% of the amount of line le. Over \$50,000. 20% of the amount of line le. Over \$50,000. 20% of the amount of line le. Over \$50,000. 20% of the amount of line le. Over \$50,000. 20% of the amount of line le. Over \$50,000. 20% of the amount of line le. Over \$50,000. 20% of the amount of line le. Over \$50,000. 20% of line line le. Over \$50,000. 20% of line le. Over \$50,000. 20% of line le. Over \$50,000. 20% of line le. O	_					
b Total lobbying expenditures to influence a legislative body (direct lobbying). 14,583. c Total lobbying expenditures (add lines 1a and 1b). 21,617. 0. d Other exempt purpose expenditures (add lines 1c and 1d). 5,734,823. 0. e Total exempt purpose expenditures (add lines 1c and 1d). 5,734,823. 0. f Lobbying nontaxable amount. Enter the amount from the following table in both columns. 436,741. If the amount on line 1c, culumn (a) or (b) is: The lobbying nontaxable amount is: Not ever \$500,000 but not over \$1,000,000 200 20% of the amount on line 1c. Over \$500,000 but not over \$1,000,000 3100,000 plus 15% of the excess over \$500,000. Over \$1,000,000 but not over \$1,000,000 \$100,000 2225,000 plus 15% of the excess over \$300,000. Over \$1,000,000 but not over \$1,000,000 \$100,000 2225,000 plus 15% of the excess over \$3,500,000. Over \$1,000,000 but not over \$1,000,000 \$100,000 2225,000 plus 15% of the excess over \$3,500,000. Over \$1,000,000 but not over \$1,000,000 \$100,000 2225,000 plus 15% of the excess over \$3,500,000. Over \$1,000,000 but not over \$1,000,000 \$100,000 2225,000 plus 15% of the excess over \$3,500,000. Over \$1,000,000 but not over \$1,000,000 \$100,000 2225,000 plus 15% of the excess over \$3,500,000. Over \$1,000,000 but not over \$1,000,000 \$100,000 2225,000 plus 15% of the excess over \$3,500,000. Over \$1,000,000 but not over \$1,000,000 \$100,000 225,000 plus 15% of the excess over \$3,500,000. Over \$1,000,000 but not over \$1,000,000 \$100,000 225,000 plus 15% of the excess over \$3,500,000. Over \$1,000,000 but not over \$1,000,000 \$100,000 225,000 plus 15% of the excess over \$3,500,000. Over \$1,000,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$3,500,000. Over \$1,000,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$1,000,000 plus 15% of the ex	(The term	Limits on Lobbyi 'expenditures' mea	ng Expenditures ns amounts paid or incurr	ed.)	(a) Filing organization's totals	(b) Affiliated group totals
c Total lobbying expenditures (add lines 1a and 1b). 21,617. 0. d Other exempt purpose expenditures (add lines 1c and 1d). 5,713,206. e e Total exempt purpose expenditures (add lines 1c and 1d). 5,734,823. 0. f Lobbying nontaxable amount. Enter the amount from the following table in both columns. 436,741. If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000	1 a Total lobbying expenditu	ures to influence pub	olic opinion (grassroots lob	bying)	7,034.	
d Other exempt purpose expenditures (add lines to and td)	, , ,	14,583.				
e Total exempt purpose expenditures (add lines 1c and 1d)		•	·			0.
Fl. Lobbying nontaxable amount. Enter the amount from the following table in both columns.		'				
Subtract line 1 from line 1a. If zero or less, enter -0:	e Total exempt purpose e	xpenditures (add lin	es 1c and 1d)		5,734,823.	0.
Not over \$500,000 20% of the amount on line 1e.					436,741.	
Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000.		,,,,,		amount is:		
Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000.						
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000. Over \$17,000,000 \$1,000,000 \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$1,000,000. \$			· · · · · · · · · · · · · · · · · · ·	· · · · ·		
Over \$17,000,000			· · · · · · · · · · · · · · · · · · ·			
g Grassroots nontaxable amount (enter 25% of line 1f). h Subtract line 1g from line 1a. If zero or less, enter -0. i Subtract line 1g from line 1a. If zero or less, enter -0. j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2016 (b) 2017 (c) 2018 (d) 2019 (e) Total 2 a Lobbying nontaxable amount (150% of line 2a, column (e)) 5 total lobbying eailing amount (150% of line 2a, column (e)) c Total lobbying expenditures 123,774. 111,707. 68,823. 21,617. 325,921. d Grassroots nontaxable amount 71,895. 84,375. 204,458. 109,185. 469,913. e Grassroots ceiling amount (150% of line 2d, column (e)) f Grassroots lobbying expenditures 61,756. 80,000. 3,143. 7,034. 151,933.			· · · · · · · · · · · · · · · · · · ·	over \$1,500,000.		
h Subtract line 1g from line 1a. If zero or less, enter -0. i Subtract line 1f from line 1c. If zero or less, enter -0. j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? A-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) 2a Lobbying nontaxable amount 287,579. 337,499. 817,834. 436,741. 1,879,653. b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying expenditures 123,774. 111,707. 68,823. 21,617. 325,921. d Grassroots nontaxable amount 71,895. 84,375. 204,458. 109,185. 469,913. e Grassroots ceiling amount (150% of line 2d, column (e)) f Grassroots lobbying expenditures 61,756. 80,000. 3,143. 7,034. 151,933.	' ' '					
i Subtract line 1f from line 1c. If zero or less, enter -0: j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) lection do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2t.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) 2 a Lobbying nontaxable amount (150% of line 2a, column (e)) b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying expenditures 123,774. 111,707. 68,823. 21,617. 325,921. d Grassroots nontaxable amount (150% of line 2d, column (e)) e Grassroots ceiling amount (150% of line 2d, column (e)) f Grassroots lobbying expenditures 61,756. 80,000. 3,143. 7,034. 151,933.	-	•	·		·	
J If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	-					
Yes No						0.
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in)	j If there is an amount othe section 4911 tax for this	er than zero on either syear?	line 1h or line 1i, did the org	anization file Form 4720	reporting	Yes No
Calendar year (or fiscal year beginning in) (a) 2016 (b) 2017 (c) 2018 (d) 2019 (e) Total 2a Lobbying nontaxable amount 287,579. 337,499. 817,834. 436,741. 1,879,653. b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying expenditures 123,774. 111,707. 68,823. 21,617. 325,921. d Grassroots nontaxable amount 71,895. 84,375. 204,458. 109,185. 469,913. e Grassroots ceiling amount (150% of line 2d, column (e)) f Grassroots lobbying expenditures 61,756. 80,000. 3,143. 7,034. 151,933.	(Som	e organizations that	made a section 501(h) ele	ection do not have to o		
beginning in) Calcobbying nontaxable amount 287,579. 337,499. 817,834. 436,741. 1,879,653. b Lobbying ceiling amount (150% of line 2a, column (e)) 2,819,480. c Total lobbying expenditures 123,774. 111,707. 68,823. 21,617. 325,921. d Grassroots nontaxable amount 71,895. 84,375. 204,458. 109,185. 469,913. e Grassroots ceiling amount (150% of line 2d, column (e)) 704,870. f Grassroots lobbying expenditures 61,756. 80,000. 3,143. 7,034. 151,933.		Lobby	ing Expenditures During	4-Year Averaging Peri	od	
amount 287,579. 337,499. 817,834. 436,741. 1,879,653. b Lobbying ceiling amount (150% of line 2a, column (e)) 2,819,480. c Total lobbying expenditures 123,774. 111,707. 68,823. 21,617. 325,921. d Grassroots nontaxable amount 71,895. 84,375. 204,458. 109,185. 469,913. e Grassroots ceiling amount (150% of line 2d, column (e)) 704,870. f Grassroots lobbying expenditures 61,756. 80,000. 3,143. 7,034. 151,933.		(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
amount (150% of line 2a, column (e)) c Total lobbying expenditures 123,774. 111,707. 68,823. 21,617. 325,921. d Grassroots nontaxable amount 71,895. 84,375. 204,458. 109,185. 469,913. e Grassroots ceiling amount (150% of line 2d, column (e)) f Grassroots lobbying expenditures 61,756. 80,000. 3,143. 7,034. 151,933.		287,579	337,499.	817,834.	436,741.	1,879,653.
expenditures 123,774. 111,707. 68,823. 21,617. 325,921. d Grassroots nontaxable amount 71,895. 84,375. 204,458. 109,185. 469,913. e Grassroots ceiling amount (150% of line 2d, column (e)) 704,870. f Grassroots lobbying expenditures 61,756. 80,000. 3,143. 7,034. 151,933.	amount (150% of line					2,819,480.
amount 71,895. 84,375. 204,458. 109,185. 469,913. e Grassroots ceiling amount (150% of line 2d, column (e)) 704,870. f Grassroots lobbying expenditures 61,756. 80,000. 3,143. 7,034. 151,933.		123,774	1. 111,707.	68,823.	21,617.	325,921.
amount (150% of line 2d, column (e)) 704,870. f Grassroots lobbying expenditures 61,756. 80,000. 3,143. 7,034. 151,933.		71,895	84,375.	204,458.	109,185.	469,913.
expenditures 61,756. 80,000. 3,143. 7,034. 151,933.	amount (150% of line					704,870.
	expenditures	61,756	80,000.	3,143.		151,933.

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)).

(cicetion under section 301(17)).					
Formula Novel and the state of	(a)	(b)	
For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	Am	ount	
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
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 Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities?					
i Total. Add lines 1c through 1i.					
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b If 'Yes,' enter the amount of any tax incurred under section 4912					
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).	C)(J),	, 01			
				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the p	orior ye	ear?	3		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) I answered 'Yes.'	Part I	II-A, I	ection 5 line 3, is)1(c)	
1 Dues, assessments and similar amounts from members		1			
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).					
a Current year		2 a			
b Carryover from last year	[2 b			
c Total	[2 c			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		4			
5 Taxable amount of lobbying and political expenditures (see instructions)	[5			

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

GENERATION CITIZEN, INC 27-2039522 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered 'Yes' on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year..... 1 Aggregate value of contributions to (during year). Aggregate value of grants from (during year)...... 200,000 Aggregate value at end of year..... 200,000. Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?... X Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?..... |X|Yes No **Conservation Easements.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements..... 2 a **b** Total acreage restricted by conservation easements. 2 b **c** Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register..... Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No and enforcement of the conservation easements it holds?..... Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 ►\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1. (ii) Assets included in Form 990, Part X..... If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1..... **b** Assets included in Form 990, Part X.....

Part III Organizations Maintai	ning Collec	Ctions of A	art, mistor	ricai i reasures, c	or Other Similar A	ssets (C	continu	<u>iea)</u>
3 Using the organization's acquisition, items (check all that apply):	accession, an	d other recor	ds, check an	y of the following that	make significant use of	its collection	on	
a Public exhibition		d	Loan or	r exchange program				
b Scholarly research		е	Other					
c Preservation for future genera	ations							
4 Provide a description of the organization Part XIII.		·	•	, and the second				
5 During the year, did the organizat to be sold to raise funds rather th Part IV Escrow and Custodial	an to be mair	ntained as pa	art of the org	ganization's collection	า?	[] Yes		No
line 9, or reported an a	amount on	Form 990,	Part X, Ii	ine 21.	iswered res on		U, i ai	tiv,
1 a Is the organization an agent, trus on Form 990, Part X?	tee, custodiar	or other int	ermediary fo	or contributions or ot	ner assets not include	ed Yes	; [No
b If 'Yes,' explain the arrangement	in Part XIII ar	nd complete	the followin	g table:			_	_
						Amour	ıt	
c Beginning balance					1 с			
d Additions during the year					1 d			
e Distributions during the year								
f Ending balance								_
2 a Did the organization include an a					-	ш .		No
b If 'Yes,' explain the arrangement	in Part XIII. C	Check here if	the explana	ation has been provid	ed on Part XIII		L	
Part V Endowment Funds. Co	•						_	
	(a) Current y	year	(b) Prior year	(c) Two years ba	ck (d) Three years ba	<u>ck (e)</u>	Four year	's back
1 a Beginning of year balance								
b Contributions								
c Net investment earnings, gains, and losses								
d Grants or scholarships								
e Other expenditures for facilities and programs								
f Administrative expenses								
g End of year balance								
2 Provide the estimated percentage		nt year end b	•	1g, column (a)) held	l as:			
a Board designated or quasi-endowme			%					
b Permanent endowment ►								
c Term endowment ►	~	1.1000/						
The percentages on lines 2a, 2b, an	ia ze snouia ec	quai 100%.						
3a Are there endowment funds not in the	ne possession	of the organiz	zation that ar	e held and administere	ed for the		Yes	No
organization by: (i) Unrelated organizations						3a(i)	162	NO
(ii) Related organizations						- ''		-
b If 'Yes' on line 3a(ii), are the rela								-
4 Describe in Part XIII the intended	=		•			35		
Part VI Land, Buildings, and E			3 311431111131	T. Tarrage				
Complete if the organization			' on Form	990. Part IV. lin	e 11a. See Form	990. Pa	rt X. li	ne 10.
Description of property				<u> </u>	(c) Accumulated		Book va	
Description of property		(a) Cost or of investn)		(b) Cost or other basis (other)	depreciation	(a)	DOOK V	alue
1 a Land		,		,				
b Buildings								
c Leasehold improvements								
d Equipment				16,221.	4,575		11	,646.
e Other				,	1,070	1		<u>, •</u>
Total. Add lines 1a through 1e. (Column	n (d) must eq	ual Form 99	O, Part X, co	olumn (B), line 10c.).		>	11	,646.
ВАА	,			· · · · · · · · · · · · · · · · · · ·		nedule D (F		

Part VII Investments – Other Securities.		N/A	
Complete if the organization answered			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-c	f-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D) (E)			
(F)			
(G)			
(H)			
(I) Takel (Column (b) must agual Farm 000 Part V column (P) line 12)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) Part VIII Investments — Program Related.		NI / 7\	
Complete if the organization answered	'Yes' on Form 990	N/A). Part IV. line 11c. See Form 9	90, Part X, line 13,
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) •	3.T / 7.		
Part IX Other Assets. Complete if the organization answered	N/A 'Yes' on Form 990). Part IV. line 11d. See Form 9	90. Part X. line 15.
	scription	,, , a ,	(b) Book value
(1)	·		
(2)			
(3)			
<u>(4)</u>			
(5) (6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (b)	3) line 15.)		
Part X Other Liabilities.			
Complete if the organization answered 'Yes' on F		le or 11f. See Form 990, Part X, line 25	
	iption of liability		(b) Book value
(1) Federal income taxes			101 000
(3) ACCRUED PAYROLL PAYABLE (3) ACCRUED VACATION PAYABLE			101,999. 186,854.
(4) PPP AND INTEREST PAYABLE			84,108.
(5)			04,100.
(6)			
(7)			
(8)			
(9)			
(10)			
(11)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)			372,961.
2. Liability for uncertain tax positions. In Part XIII, provide the text of the fo- tax positions under FASB ASC 740. Check here if the text of the footnote has	=	· · · · · · · · · · · · · · · · · · ·	
tax positions and i raop rao 740. Oneon here it the text of the houthold has	boom provided in I alt Aill.		

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per F	Return.	•
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	. 1	5,423,003.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities	.	
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	. 2e	87,252.
3 Subtract line 2e from line 1	. 3	5,335,751.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b.	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).	. 5	5,335,751.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	. Dat	
Tart All Reconciliation of Expenses per Addited Financial Statements With Expenses per	r Retui	rn.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	r Retui	rn.
		5,637,839.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	. 1	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	. 1	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements	. 1	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. 2 a 113,478 2 b	. 1	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. 2 In 113, 478	. 1	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.). 2 on Form 990, Part IV, line 12a. 2 a 113,478 2 b 2 c 2 c 2 c 2 c 2 d	. 1 . 2e	5,637,839.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d.	. 1 . 2e	5,637,839. 113,478.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4 a	. 1 . 2e	5,637,839. 113,478.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. b Other (Describe in Part XIII.) 4 b Other (Describe in Part XIII.)	2e 3	5,637,839. 113,478.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. b Other (Describe in Part XIII.) c Add lines 4a and 4b.	2e 3	5,637,839. 113,478. 5,524,361.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. b Other (Describe in Part XIII.) 4 b Other (Describe in Part XIII.)	2e 3	5,637,839. 113,478.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

BAA Schedule D (Form 990) 2019

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

2019

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

GENERATION CITIZEN, INC.

Employer identification number 27–2039522

FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

GENERATION CITIZEN (GC) WORKS TO ENSURE THAT EVERY STUDENT IN THE UNITED STATES

RECEIVES AN EFFECTIVE ACTION CIVICS EDUCATION, WHICH PROVIDES THEM WITH THE

KNOWLEDGE AND SKILLS NECESSARY TO PARTICIPATE IN OUR DEMOCRACY AS ACTIVE CITIZENS.

WE ENVISION A COUNTRY OF YOUNG PEOPLE WORKING AS ACTIVE AND EFFECTIVE CITIZENS TO

COLLECTIVELY REBUILD OUR AMERICAN DEMOCRACY. GC TEACHES TEENAGERS HOW TO TAKE

EFFECTIVE POLITICAL ACTION. THROUGH AN INNOVATIVE IN-CLASS CURRICULUM, STUDENTS

WORK WITH LOCAL LEADERS TO FIX LOCAL PROBLEMS. THROUGH THIS REAL-WORLD EXPERIENCE,

OUR TEENS ARE BUILDING AN ACTIVE DEMOCRACY. OUR INNOVATIVE, ACTION-BASED PROGRAM

WILL REVOLUTIONIZE CIVICS EDUCATION IN THIS COUNTRY. GENERATION CITIZEN IS BUILDING

A NEW GENERATION OF YOUTH ACTIVISTS AND LEADERS; A GENERATION INSPIRED AND EQUIPPED

TO MAKE CHANGE.

FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

DESPITE THE IMPACT OF COVID-19, GENERATION CITIZEN WAS ABLE TO DELIVER TRAINING TO 21, 400 STUDENTS, ENGAGING 364 TEACHERS AND 173 COLLEGE VOLUNTEERS ACROSS SIX SITES AND REMOTE PARTNERSHIPS IN THE 2019-2020 SCHOOL YEAR. WE ALSO WORKED RAPIDLY TO TRANSFER OUR CURRICULUM AND TRAINING PROGRAMS FOR TEACHERS TO VIRTUAL FORMAT, TO ENSURE THAT WE COULD EFFECTIVELY SERVE SCHOOL PARTNERS IN THE FALL OF 2020. WE AND COALITION PARTNERS HELPED PASS HOUSE BILL 334 WHICH PROVIDED FOR TEACHER PROFESSIONAL DEVELOPMENT AND CIVIC ENGAGEMENT PROJECTS. WE ALSO DEVELOPED OUR KICK START ACTION CIVICS FREE ONLINE MINI TRAINING FOR TEACHERS. IN FY 20, 2,143 TEACHERS FROM 49 STATES PARTICIPATED IN KSAC, AND 98% SAID THEY WOULD RECOMMEND IT TO COLLEAGUES. GENERATION CITIZEN ALSO CO-LED A NATIONAL EQUITY IN CIVICS COALITION WITH A STEERING COMMITTEE OF EXPERTS ACROSS THE COUNTRY AND PUBLISHED NEW WHITE PAPERS AND **RESOURCES** ON CIVICS LEARNING.

Employer identification number

27-2039522

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

RETURNS, THE ORGANIZATION IS SENT A DRAFT OF THE TAX RETURNS TO BE REVIEWED AND EXAMINED. THE ORGANIZATION MAKES COPIES OF THE RETURNS AND DISTRIBUTES TO THOSE INDIVIDUALS CHARGED WITH GOVERNANCE. THOSE INDIVIDUALS AT THAT TIME CAN REVIEW AND IF APPLICABLE DISCUSS ANY LINE ITEMS IN THE RETURN WITH THE ACCOUNTANT WHO HAS PREPARED THE RETURN. IF ALL ITEMS ARE FOUND TO BE ACCEPTABLE, AN AUTHORIZATION IS SIGNED AND PROVIDED TO AUTHORIZE THE OUTSIDE ACCOUNTING FIRM TO PROCESS, SIGN AND PROVIDE COPIES OF THE RETURNS TO BE FILED (PAPER OR ELECTRONICALLY) WITH THE DESIGNATED GOVERNMENTAL AGENCIES. THE TAX RETURNS ARE THEN SIGNED BY THE ORGANIZATION, STAMPED AND MAILED WITH CERTIFIED RETURN RECEIPT OR THE SIGNED FORM 8879 IS PROVIDED TO THE OUTSIDE ACCOUNTING FIRM ALLOWING ELECTRONIC FILING. FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS CONFLICT OF INTEREST ARISES WHEN THE PROFESSIONAL INTEREST OF A BOARD MEMBER OR GENERATION CITIZEN PERSONNEL IS POTENTIALLY AT ODDS WITH THE BEST INTERESTS OF GC. NO PERSONNEL ASSOCIATED WITH GC OR ANY OF ITS COMMITTEES SHALL DERIVE ANY PERSONAL PROFIT OR GAIN, DIRECTLY OR INDIRECTLY, THROUGH HIS/HER CONNECTION WITH GC. GC WILL WORK HARD TO AVOID EVEN THE APPEARANCE OF POSSIBLE IMPROPRIETY. ALL PERSONNEL AT GC MUST DISCLOSE ANY PERSONAL INTEREST HE/SHE MAY HAVE IN ANY BUSINESS-RELATED MATTER, AND GC WILL REFRAIN FROM INVOLVING SAID EMPLOYEE IN PARTICIPATION IN ANY DECISION

THE TAX RETURN IS PREPARED BY AN OUTSIDE ACCOUNTING FIRM. AFTER COMPLETION OF SAID

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT

GENERATION CITIZEN CAREFULLY BENCHMARKS COMPENSATION FOR ALL EMPLOYEES AGAINST PEER

NONPROFITS OF SIMILAR SIZE AND STRUCTURE IN OUR FIELD. WE ALSO HAVE A COMPREHENSIVE

ANNUAL REVIEW PROCESS ALONG WITH A SET STRUCTURE FORT SALARY AND TITLE BANDS THAT

REGARDING THAT MATTER. IF AN EMPLOYEE HAS ANY QUESTION, CONCERN, OR PROPOSED ACTION

THAT WOULD CREATE A CONFLICT OF INTEREST, HE/SHE SHOULD IMMEDIATELY CONTACT THE COO

ON THE ISSUE.

Name of the organization	Employer identification number
GENERATION CITIZEN, INC.	27-2039522

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT (CON

ENSURES TRANSPARENCY AND COMPENSATION TIED TO PERFORMANCE. THE COMPENSATION OF OUR EXECUTIVE DIRECTOR, MANAGING DIRECTOR, AND DIRECTOR OF PROGRAMS, IS REVIEWED ANNUALLY BY OUR BOARD FOR APPROVAL.

FORM 990, PART VI, LINE 18 - EXPLANATION OF OTHER MEANS FORMS AVAILABLE FOR PUBLIC INSPECTION

FEDERAL TAX RETURNS ARE AVAILABLE AT GUIDESTAR.ORG & CHARITYNAVIGATOR.ORG.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

GOVERNING DOCUMENTS ARE AVAILABLE FOR PUBLIC INSPECTION ON THE MASSACHUSETTS CORPORATION SITE.

THE CONFLICT OF INTEREST POLICY AND THE ORGANIZATION'S FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.

FORM 990, PART IX, LINE 11G OTHER FEES FOR SERVICES

		(A)	(B) PROGRAM	(C) MANAGEMENT	(D) FUND-
		TOTAL	<u>SERVICES</u>	<u>& GENERAL</u>	RAISING
PROFESSIONAL FEES	TOTAL \$	596,039. 596,039.	363,225. \$ 363,225.	184,915. \$ 184,915.	\$ 47,899. \$ 47,899.
	<u></u>				
FORM 990, PART XI, LINE 9 OTHER CHANGES IN NET AS	SETS OR FUND	BALANCES			

BAD DEBTS	\$ -96,984.
TOTAL	\$ -96,984.