** PUBLIC DISCLOSURE COPY **

Form **990**

Department of the Treasury Internal Revenue Service **Return of Organization Exempt From Income Tax**

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

▶ Do not enter social security numbers on this form as it may be made public.

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

2017
Open to Public Inspection

A	For th	2017 calendar year, or tax year beginning and ending		
	Check if	C Name of organization	D Employer identific	eation number
	applicab	e.		
F	Addre	ss INDEPENDENT SECTOR		
	Name		52-10	81024
	Initial	Number and street (or P.O. box if mail is not delivered to street address) Room/s		
	Final	1602 I STREET NW 900	202-46	
	return termir ated		G Gross receipts \$	13,324,431.
	Amen		H(a) Is this a group re	
Ė	return Applic		for subordinates	
-	ltion pendi	SAME AS C ABOVE		
TILL S	Tov ov	empt status:	H(b) Are all subordinates in 527 If "No," attach a	list. (see instructions)
		te: WWW.INDEPENDENTSECTOR.ORG		- 25
			H(c) Group exemption Year of formation; 1980 N	
	art I	Summary	rear or formation, 1900 N	1 State of legal domicile; DC
	1	Dead-1 Transporter	CATALVZE THE	
ė	1	Briefly describe the organization's mission or most significant activities: TO LEAD AND CHARITABLE COMMUNITY, (SEE SCHEDULE 0)	CATABIZE THE	
П				-1-
Governance	2	Check this box if the organization discontinued its operations or disposed of r	1 - 1	ets.
30	3		3	19
જ	1 .	Number of independent voting members of the governing body (Part VI, line 1h) Total number of individuals employed in calendar year 2017 (Part V, line 2a)		51
Activities &	5	Total number of individuals employed in calendar year 2017 (Part 1/2, line 2a) Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12	5	350
ξį	6	Total number of volunteers (estimate if necessary)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-3,206.
Ac	/ a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	-92,919.
-	b	Net unrelated business taxable income from Form 990-T, line 34		
		0. 17. 17. 1. 17. 1. 18. 18. 18. 18.	Prior Year	Current Year
e	8	Contributions and grants (Part VIII, line 1h)	5,146,702.	10,211,632.
Revenue	9	Program service revenue (Part VIII, line 2g)	806,106.	695,956.
Re	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	250,470.	362,229.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	292,407.	-18,697.
_	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,495,685.	11,251,120.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	6,342,120.	4,708,205.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	174,720.	0.
QX.	b	Total fundraising expenses (Part IX, column (D), line 25)	2.052.010	2 012 200
	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,953,018.	3,913,389.
	1	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	10,469,858.	8,621,594.
	19	Revenue less expenses. Subtract line 18 from line 12	-3,974,173.	2,629,526.
Net Assets or		T	Beginning of Current Year	End of Year
SSE	20	Total assets (Part X, line 16)	39,778,640.	42,169,856.
et A	21	Total liabilities (Part X, line 26)	13,146,316.	12,469,728.
Б	art II	Net assets or fund balances. Subtract line 21 from line 20 Signature Block	26,632,324.	29,700,128.
_		Ities of perjury, I declare that I have examined this return, including accompanying schedules and sta		Included and belief this
		thes of perjury, I declare that I have examined this return, including accompanying schedules and sta I, and complete. Declaration of preparer (other than officer) is based on all information of which prej	,	knowledge and belief, it is
uue	, correc	i, and complete. Declaration of preparer (other than officer) is based on an information of which pre-	parer rias ariy kriowieoge.	
٥.		Signature of officer PUBLIC INSPECTION	Date	
Sig		CAROLYN MOLLEN, CFO COPY - RETAIN FOR		
Her	e	Type or print name and title YOUR RECORDS		
_		The second secon	Date Check	PTIN
Paid	4	Print/Type preparer's name WILLIAM E TURCO, CPA	AV 1 4 2019	
				42-0714325
	oarer Only		Firm's EIN >	44 0/14J4J
use	UIIIY	Firm's address > 9737 WASHINGTONIAN BLVD, #400 GAITHERSBURG, MD 20878	Phone no. 301	- 29 <i>6</i> - 3600 "
N.A.	. He 0	S discuss this return with the preparer shown above? (see instructions)	L Shoule 110° 201.	
(VIEL	uite il	to discuss this return with the preparet shown above? (see instructions)		X Yes No

Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	TO LEAD AND CATALYZE THE CHARITABLE COMMUNITY, PARTNERING WITH	
	GOVERNMENT, BUSINESS, AND INDIVIDUALS TO ADVANCE THE COMMON GOOD.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	М
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?Yes X	Мо
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	- 1
4a	(Code:) (Expenses \$ 2,288,899. including grants of \$) (Revenue \$ 597,700	·
	NATIONAL CONFERENCE - THE INDEPENDENT SECTOR CONFERENCE PROVIDES THE	_
	PREMIER MEETING GROUND FOR LEADERS FROM THE NONPROFIT SECTOR AND	_
	PHILANTHROPIC SECTOR, BRINGING TOGETHER LEADERS FROM PUBLIC CHARITIES,	_
	FOUNDATIONS, CORPORATE GIVING PROGRAMS, AND ACADEMIA TO SHARE THEIR	_
	EXPERIENCES AND EXPERTISE TO DISCUSS AND ADDRESS CRITICAL ISSUES FACING	_
	OUR SECTOR, THE NATION AND THE WORLD. IN 2017 INDEPENDENT SECTOR	_
	COLLABORATED WITH TWO ORGANIZATIONS IN DETROIT: THE COUNCIL OF	_
	MICHIGAN FOUNDATIONS AND THE MICHIGAN NONPROFIT ASSOCIATION. THE	_
	CONFERENCE WAS HELD IN OCTOBER IN DETROIT AND OVER 1,400 PEOPLE	_
	(INCLUDING OVER 200 ON SCHOLARSHIP) ATTENDED. OVER 800 ORGANIZATIONS	_
	WERE REPRESENTED AND 68 ATTENDEES EXHIBITED. THE EXPERTISE AND	_
_	VIBRANCY OF ALL OUR PARTICIPANTS PRODUCED A WORLD-CLASS EXCHANGE OF	
4b	(Code:) (Expenses \$1,172,252. including grants of \$) (Revenue \$)	-
	PUBLIC POLICY - INDEPENDENT SECTOR (IS) PROVIDES LEADERSHIP FOR AND	_
	COLLABORATES WITH OUR MEMBER ORGANIZATIONS AND OTHER STAKEHOLDERS TO	_
	EDUCATE PUBLIC OFFICIALS ABOUT THE VALUE OF THE CHARITABLE COMMUNITY	_
	AND TO ADVOCATE FOR FEDERAL POLICIES AND REGULATIONS THAT ADVANCE THE	_
	ABILITY OF CHARITABLE AND PHILANTHROPIC ORGANIZATIONS TO SERVE THEIR	_
	COMMUNITIES. IN 2016, WE CONTINUED TO INFORM AND GALVANIZE OUR SECTOR	_
	ALLIES AROUND KEY ISSUES, EDUCATE LAWMAKERS ABOUT THE SECTOR'S	
	ESSENTIAL ROLE IN SOCIETY AND IN THE NATIONAL ECONOMY, AND ADVOCATE FOR POLICIES THAT IMPROVE THE ABILITY OF NONPROFIT ORGANIZATIONS TO ACHIEVE	_
		_
	THEIR MISSIONS, BASED ON FEEDBACK FROM OUR 2015 THREADS SERIES AND IN	_
	FULFILLMENT OF OUR NEW STRATEGIC VISION, WE ALSO SHIFTED TO A MORE	_
_	PROACTIVE AGENDA TO ENGAGE IN THE 2016 ELECTIONS.	- 8
4c	(Code:) (Expenses \$ 719,715. including grants of \$) (Revenue \$) LEADERSHIP FOR THE FUTURE BUILDING ON EFFORTS FIRST INITIATED IN LATE	_
		_
	2013 AND CULMINATING WITH A BOARD APPROVED STRATEGIC FRAMEWORK IN APRIL	_
	OF 2016, INDEPENDENT SECTOR CONTINUED ITS EFFORTS TO OPERATIONALIZE THE	_
	ORGANIZATIONAL STRATEGY. DURING 2017, IS ALSO DID CONSIDERABLE WORK TO	_
	RESTRUCTURE AND RETOOL ITS STAFF IN PURSUIT OF THE CORE STRATEGY. THE	_
	CORE STRATEGIC FRAMEWORK ARTICULATES FOUR PRIMARY DRIVERS AS THE BASIS	_
	OF THE ORGANIZATION'S WORK:	_
	COMMUNITY BUILDER: IS WILL CONTINUE TO EVOLVE FROM A "PIPELINE" TO A	_
	"PLATFORM" COMMUNITY BUILDING ORGANIZATION, GATHERING THE DIVERSE	_
	PLAYERS THAT MAKE UP THE SOCIAL SECTOR, USING SUCH OPPORTUNITIES TO	
	BUILD RELATIONSHIPS, KNOWLEDGE, CONNECTION ACROSS SECTORS, AND	
	ACTION-BASED LEARNING,	_
4d	,	
	(Expenses \$ 1,767,770 · including grants of \$) (Hevenue \$ 4,957.)	
<u>4e</u>	Total program service expenses ► 5,948,636.	

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Form 990 (2017) INDEPENDENT SECTOR 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?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	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		34	
	as applicable.		22.201	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		x	
	Part VI	11a	^	_
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	a a la		х
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11b		
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
Ч	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	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	7.10		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		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? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	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	17		X
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? # "Yes,"			
	complete Schedule G. Part III	19		X

Form **990** (2017)

52-1081024

Form 990 (2017) INDEPENDENT SECTOR Part IV Checklist of Required Schedules (continued)

SH			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a	Х	
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			v
	any tax-exempt bonds?	24c		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	_	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			х
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	25b		x
26	Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	200		
26	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV		(1)	11.73
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
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	١		
	Part V, line 1	34	-	X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	_	Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	0.51		
00	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?	00		x
27	If "Yes," complete Schedule R, Part V, line 2	36		- 4
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	31		
30	Note, All Form 990 filers are required to complete Schedule O	38	x	
	1966, 7 in 1 on 1960 more are required to complete defreduce of	1 00	000	

Form **990** (2017)

Form 990 (2017) INDEPENDENT SECTOR Part 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
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	0.24		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0		C	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	4 4		
	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,	8.4		8.
	filed for the calendar year ending with or within the year covered by this return		- 1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a_	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b_	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country:	d u.s		, 2 f
	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?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	_		
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	01-		
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
a	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7.0		
Ů	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			.50
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	17.		
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a		_
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			16.8
a	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a		. 3	2000
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	130	4.3	181
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders N/A 11a	100		1.8.7
a	Gross income from other sources (Do not net amounts due or paid to other sources against		er M	8.8
D	amounts due or received from them.)	oi L	1,-14	W_1
19a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b			0.00
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		3.44	
	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.		V III	
b	Enter the amount of reserves the organization is required to maintain by the states in which the	- 1	530	H Y
	organization is licensed to issue qualified health plans		B 0	
С	Enter the amount of reserves on hand	D1=		14 Ye
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	0.0:0	
		Form	990	(2017)

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 in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI		12.50	X
Sec	tion A. Governing Body and Management			
	050 U		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 19			4.1
	If there are material differences in voting rights among members of the governing body, or if the governing		V	
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1.9	117	1,000
b	Enter the number of voting members included in line 1a, above, who are independent 1b			13/64
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	7 . A		M _e /m
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
•	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	Х	
-	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
7 4	more members of the governing body?	7a	x	
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7.0		
Б		7b	х	
8	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	1.0		150
	The governing body?	8a	Х	
	Each committee with authority to act on behalf of the governing body?	8b	Х	_
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	- CD		
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	(mis Section B requests information about policies not required by the internal nevertice code.)		Yes	No
1∩a	Did the organization have local chapters, branches, or affiliates?	10a	100	Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	/=	N SI	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
Ŭ	in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent	DE CE		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	9.	13	3 84
2	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b		Х
~	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	10,0	el su	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		133	
100	taxable entity during the year?	16a		Х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	100		
~	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	SET	H-1	35.
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			*
17	List the states with which a copy of this Form 990 is required to be filed ▶SEE SCHEDULE 0			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) as	ailable		
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financi	al	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	CAROLYN MOLLEN - 202-467-6100°			
	1602 L STREET, NW, NO. 900, WASHINGTON, DC 20036			

Form **990** (2017)

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

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

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

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

(A) Name and Title	(B) Average hours per		not c	Pos heck ss per	more	than		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director		Officer			tee)	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) NEIL J. NICOLL	1.00									
CHAIR, DIRECTOR		Х		Х				0.	0.	0.
(2) STEVEN J. MCCORMICK	1.00									
VICE-CHAIR, DIRECTOR		Х		х				0 .	0.	0.
(3) JIM GIBBONS	1.00									
TREASURER		х		Х				0.	0.	0.
(4) SANDRA L. VARGAS	1.00									
SECRETARY		х		х				0.	0.	0,,
(5) BARBARA R. ARNWINE	1.00									
DIRECTOR		Х						0.	0	0.
(6) FRED BLACKWELL	1.00									
DIRECTOR		Х						0	0	0.
(7) JEFFREY L. BRADACH	1.00									
AT-LARGE		Х						0.	0.	0.
(8) KATHY CALVIN	1.00									
DIRECTOR		Х						0.	0.	0,.
(9) SONYA CAMPION	1,00									
DIRECTOR		X	_					0.	0.	0.
(10) ANTONY CHIANG	1.00									
DIRECTOR		Х						0.	0.	0.
(11) RON KAGAN	1.00									
DIRECTOR		Х						0.	0.	0.
(12) SARAH KASTELIC	1.00									
DIRECTOR		Х						0.	0.	0,,
(13) LARRY KRAMER	1.00									
DIRECTOR		Х						0.	0.	0.
(14) ROBERT L. LYNCH	1,00									
DIRECTOR		Х						0.	0.	0.
(15) TERRY MAZANY	1.00									
AT-LARGE		Х						0.	0.	0.
(16) TIMOTHY J. MCCLIMON	1.00									
DIRECTOR		х						0.	0.	0.
(17) DIANE MELLEY	1.00		74	100		***	Y			74 st
DIRECTOR		Х						0.	0,	0,

732007 11-28-17

Form 990 (2017)

10111 350 (2011)	T SECTOR								52-108102	4 Page 8
Part VII Section A. Officers, Directors, T	rustees, Key Emp	oloy	ees,	and	Hig	ghes	t Co	ompensated Employee	s (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do	not c		ition		nne	Reportable	Reportable	Estimated
	hours per	box	, unles	ss pei	rson i	s bolt	an	compensation	compensation	amount of
	week		cer an	dad	recto	rrus	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for related	or di	92			ated		organization	(W-2/1099-MISC)	from the
	organizations	ustee	trust		9	suadu		(W-2/1099-MISC)		organization and related
	below	ual tr	ional		ploye	1 COT				organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(18) HENRY TIMMS	1.00									
DIRECTOR		Х						0.	0.	0.
(19) DARREN WALKER	1.00							, and		
DIRECTOR		X						0.	0.	0.
(20) DANIEL J. CARDINALI	38.00									
CEO				Х				523,882.	0.	37,168.
(21) VICTOR REINOSO	38.00									
000				Х				246,708.	0.	9,560.
(22) CAROLYN MOLLEN	38.00									
CFO				Х				203,002.	0.	11,329.
(23) JEFF MOORE	38,00									
cso				Х				208,061.	0,	32,120.
(24) BARRY GOODINSON	38,00									
VP					х			166,492.	0.	12,843.
(25) ROBERT JONES	38.00									
VP						Х		156,761.	0.	9,254.
(26) DANIELLE MAXWELL	38.00									
DIR. TALENT & ADMINISTRATION						Х		130,063.	0 -	19,459.
1b Sub-total					11112	01107		1,634,969.	0.	131,733.
c Total from continuation sheets to Par								349,541.	0.	44,453.
d Total (add lines 1b and 1c)							•	1,984,510.	0.	176,186.

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

Yes No

Yes No

X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
DETROIT MARRIOTT AT THE RENAISSANCE CENTER		
RENAISSANCE CENTER, DETROIT, MT 48243	HOTEL SERVICES	219,358.
WASHINGTON COUNCIL E&Y, 1001 PENNSYLVANIA		
AVE, NW #601, WASHINGTON, DC 20004	LEGAL CONSULTING	210,000.
OSI BEYOND, LLC, 4833 RUGBY AVENUE, SUITE		
400, BETHESDA, MD 20814	TECHNOLOGY SERVICES	115,186.
ELLIOTT BAY		
3708 SW AUSTIN STREET, SEATTLE, WA 98126	DESIGN PRODUCTION	100,739.
n		

SEE PART VII, SECTION A CONTINUATION SHEETS

\$100,000 of compensation from the organization

Form 990 (2017)

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

16

Form 990 INDEPENDENT SECTOR 52-1081024

Form 990 INDEPENDENT :	SECTOR								52-10810	24
Part VII Section A. Officers, Directors, Tru	ıstees, Key En	nplo	yee	s, a	nd F	ligh	est (Compensated Employe	ees (continued)	
(A) Name and title	(B) Average			(e Pos	C) ition)		(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (list any hours for related organizations below line)	itee or director	Institutional trustee	Officer	Key emplayee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(27) LIZ CULKIN DIR. CONFERENCE & EVENT MANAGEMENT	38.00					х		119,662.	0 .	21,766.
(28) CHIRSTIAN CLANSKY DIR. MARKETING AND DIGITAL STRATEGY	38.00					x		117,223.	0.	14,065.
(29) MATT PERDONI COUNSEL & DIR. BUSINESS DEVEL.	38.00					х		112,656.	0.	8,622.
										,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
-K										
				4						
2										
Total to Part VII, Section A, line 1c								349,541.		44,453.
SIGNOT OF THE OCCUPATION TO THE STREET	*********	*****	*****	****	11116	ARRANA			La .	

Statement of Revenue Part VIII Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) **(D)** Revenue excluded Unrelated Related or Total revenue from tax under sections 512 - 514 exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 2,062,990 **b** Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and 8,148,642 similar amounts not included above 18,050 g Noncash contributions included in lines 1a-1f: \$ 10,211,632, h Total. Add lines 1a-1f **Business Code** 2 a CONFERENCE FEES 900004 690,999. 597,700 93,299. Program Service Revenue PUBLICATION SALES 900099 4,957 4,957 b C f All other program service revenue 695,956 q Total. Add lines 2a-2f Investment income (including dividends, interest, and 126,402 126,402 other similar amounts) Income from investment of tax-exempt bond proceeds 4 24,210 24,210, 5 Royalties (i) Real 1,351,929 6 a Gross rents 1,534,582 b Less: rental expenses -182,653. c Rental income or (loss) 102,359. 80,294, 182,653. d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other 774,556. assets other than inventory b Less: cost or other basis 538,729. and sales expenses 235,827. c Gain or (loss) 235,827. 235,827. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$_ 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 c Net income or (loss) from gaming activities 10 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 Miscellaneous Revenue 11 a SUBLEASE INCOME 900099 86,868, 86,868. b PARKING SERVICES 812930 52,878 52,878 C d All other revenue 139,746 e Total. Add lines 11a-11d 11,251,120 602,657 -3,206. 440.037

12 732009 11-28-17

Form 990 (2017)

Total revenue. See instructions.

Part IX Statement of Functional Expenses

Do	Check if Schedule O contains a response not include amounts reported on lines 6b,	(A)	(B)	(C)	(D) Fundraising
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign			The second second	
	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,	1 462 610	714 000	E 9 2 0 9 1	162 720
_	trustees, and key employees	1,462,619.	714,900.	583,981.	163,738
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	2,630,039.	1 205 512	1,050,097.	294,429
7	Other salaries and wages	2,030,033.	1,285,513.	1,030,037.	254,425
8	Pension plan accruals and contributions (include	153,408.	74,983.	61,251.	17,174
_	section 401(k) and 403(b) employer contributions)		99,445.	81,235.	22,775
9	Other employee benefits	203,455. 258,684.	126,440.	103, 285.	28,959
10	Payroll taxes	230,004.	120,440.	103,203.	20,333
11	Fees for services (non-employees):				
a	Management	48,350.		48,350.	
b	Legal	43,087.		43,087.	
C	Accounting	45,007.		45,007.	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17	30,028.		30,028.	
f	Investment management fees	30,020.		30,020.	
g	Other. (If line 11g amount exceeds 10% of line 25,	1,109,412.	890,931.	205,041.	13,440
40	column (A) amount, list line 11g expenses on Sch 0.)	22,447.	22,447.	203,041.	13,110
12	Advertising and promotion	356,885.	74,890.	279,137.	2,858
13	Office expenses	74,928.	37,464.	37,464.	2,000
14	Information technology	14,520.	37,404.	37,404.	
15	Royalties	1,075,212.	615,897.	378,932.	80,383
16	Occupancy	300,019.	273,398.	18,931.	7,690
17	Travel	300,013.	273,330	10,751.	7,030
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	588,678.	536,442.	37,146.	15,090
19	Conferences, conventions, and meetings	330,070.	030,442.	57,140.	13,000
20	Interest Payments to affiliates				
21 22	Payments to affiliates Depreciation, depletion, and amortization	231,779.		231,779.	
23		14,514.		14,514.	
23	Other expenses. Itemize expenses not covered				
4	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	IN-KIND EXPENSES	18,050.	18,050.		
b	ALLOCATED OVERHEAD	0.	1,177,836.	-1,337,547.	159,711
			, , , ,	, , , , , ,	
c d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	8,621,594.	5,948,636.	1,866,711.	806,247
26	Joint costs. Complete this line only if the organization	,,	- 1 - 2 - 2 - 3	=,:::,:=:	,,
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.	-		to le	
	Check here fill following SOP 98-2 (ASC 958-720)				

Form **990** (2017)

Form 990 (2017)
Part X Balance Sheet

Part X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	619,275	1	277,608.
2	Savings and temporary cash investments	646,932.	2	2,578,278,
3	Pledges and grants receivable, net	847,204.	3	2,433,060
4	Accounts receivable, net	88,805.	4	183,015
5	Loans and other receivables from current and former officers, directors,	Pr. 1 July 12 (200 A)	- T	7 2 7 - 1
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary		100	
_ω	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	Notes and loans receivable, net		7	
A Ass	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	128,834.	9	109,016
10a				Company of the Compan
	basis. Complete Part VI of Schedule D 10a 37,130,915.			
b	0.000.006	28,192,686.	10c	27, 222, 089
11	Investments - publicly traded securities	8,403,509.	11	8,450,506
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related, See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	851,395.	15	916,284
16	Total assets. Add lines 1 through 15 (must equal line 34)	39,778,640.	16	42,169,856
17	Accounts payable and accrued expenses	1,063,708.	17	1,007,023
18	Grants payable		18	
19	Deferred revenue	5,850.	19	
20	Tax-exempt bond liabilities	10,248,107	20	9,915,599
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ທ 22	Loans and other payables to current and former officers, directors, trustees,		il i i v	
<u>≓</u>	key employees, highest compensated employees, and disqualified persons.			
Liabilities	Complete Part II of Schedule L		22	
تّ ₂₃	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties	1,625,000.	24	1,375,000
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X of			
	Schedule D	203,651.	25	172,106
26	Total liabilities. Add lines 17 through 25	13,146,316.	26	12,469,728
	Organizations that follow SFAS 117 (ASC 958), check here			
ω	complete lines 27 through 29, and lines 33 and 34.			10121 - 17.16
ပ္ရွိ 27	Unrestricted net assets	25,392,623.	27	26,380,332
를 28	Temporarily restricted net assets	1,239,701.	28	3,319,796
29	Permanently restricted net assets		29	
<u> </u>	Organizations that do not follow SFAS 117 (ASC 958), check here		W. 1	
늘	and complete lines 30 through 34.			Will be the second
ਨੂੰ 30	Capital stock or trust principal, or current funds		30	
စ္တိ 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances 27 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	Retained earnings, endowment, accumulated income, or other funds		32	
ž 33	Total net assets or fund balances	26,632,324.	33	29,700,128
34	Total liabilities and net assets/fund balances	39,778,640.	34	42, 169, 856

Form 990 (2017)

2	Total expenses (must equal Part IX, column (A), line 25)			334.
3	Revenue less expenses. Subtract line 2 from line 1			526.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))			324.
5	Net unrealized gains (losses) on investments		438	278.
6	Donated services and use of facilities 6			
7	Investment expenses 7			
8	Prior period adjustments			
9	Other changes in net assets or fund balances (explain in Schedule O)			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B)) 10	29	,700,	128.
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII	/*********		
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other	1178	-/	10 100
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?			Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a			
	separate basis, consolidated basis, or both:		1 8 11	, Viv
	Separate basis Consolidated basis Both consolidated and separate basis	1,000	1.75	
b	b Were the organization's financial statements audited by an independent accountant?			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis,	113	500	157
	consolidated basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis	1,275	1	800
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,		W. Sin	10° H
	review, or compilation of its financial statements and selection of an independent accountant?			
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		12 1	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit		2	West 1
	Act and OMB Circular A-133?	За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		
		Form	990	(2017)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number 52-1081024 INDEPENDENT SECTOR Part II Reason for Public Charity Status (All organizations must complete this part) See instruction

1 0	1.6.1	neason for Fublic C	orianty Status (All organizations must co	impiere un	is part.) Se	e instructions.	
he	organ	zation is not a private found	ation because it is: (F	or lines 1 through 12, ch	neck only	one box.)		
1		A church, convention of chi	urches, or associatio	n of churches described	in sectio	n 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 orga	nization described in se	ection 170	(b)(1)(A)(ii	i).	
4		A medical research organiza						the hospital's name,
		city, and state:						
5		An organization operated for	or the benefit of a col	lege or university owned	or operate	ed by a go	vernmental unit describe	ed in
		section 170(b)(1)(A)(iv). (C	Complete Part II.)					
6		A federal, state, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).	
7	X	An organization that normal						oublic described in
		section 170(b)(1)(A)(vi). (C						
8		A community trust describe		1)(A)(vi). (Complete Part	: II.)			
9		An agricultural research org				ed in conju	nction with a land-grant	college
	,11	or university or a non-land-g					-	-
		university:	,					
10		An organization that normal	lly receives: (1) more	than 33 1/3% of its supp	ort from c	ontributio	ns, membership fees, an	d gross receipts from
		activities related to its exem						•
		income and unrelated busin						•
		See section 509(a)(2). (Cor		,		•	, ,	· ·
11		An organization organized a		vely to test for public saf	ety. See	section 50)9(a)(4).	
12		An organization organized a	and operated exclusi	vely for the benefit of, to	perform tl	he functio	ns of, or to carry out the	purposes of one or
		more publicly supported org	ganizations describe	d in section 509(a)(1) o	r section	509(a)(2).	See section 509(a)(3). (Check the box in
		lines 12a through 12d that of	- describes the type of	f supporting organization	and com	plete lines	12e, 12f, and 12g.	
а		Type I. A supporting orga	anization operated, si	upervised, or controlled I	by its supp	orted org	anization(s), typically by	giving
		the supported organization	on(s) the power to reg	gularly appoint or elect a	majority o	of the direc	tors or trustees of the su	upporting
		organization. You must o	omplete Part IV, Se	ections A and B.				
b		Type II. A supporting orga	anization supervised	or controlled in connect	ion with its	s supporte	d organization(s), by hav	ving
		control or management of	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manage the supp	ported
		organization(s). You mus	t complete Part IV,	Sections A and C.				
С		Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functionally integrate	ed with,
		its supported organization	n(s) (see instructions)	. You must complete F	Part IV, Se	ctions A,	D, and E.	
d		Type III non-functionally	integrated. A supp	orting organization oper	ated in col	nnection w	rith its supported organiz	zation(s)
		that is not functionally into	egrated. The organiz	ation generally must sati	isfy a distr	ibutìon rec	juirement and an attentiv	/eness
		requirement (see instructi	ons). You must con	nplete Part IV, Sections	A and D,	and Part	V.	
е		Check this box if the orga	anization received a v	written determination from	m the IRS	that it is a	Type I, Type II, Type III	
		functionally integrated, or	Type III non-function	nally integrated supporting	ng organiz	ation.		
f		r the number of supported o						
g		ide the following information Name of supported	about the supporte	d organization(s). (iii) Type of organization	(iv) is the oraz	inization listed	(v) Amount of monetary	(vi) Amount of other
		organization	(II) EIN	(described on lines 1-10	in your governi	ng document?	support (see instructions)	support (see instructions)
		3194111241311		above (see instructions))	Yes	No	- Committee and the committee	support (eee metaetiene)
								-
			ri .	6		3	-	_
ota	1		or the state of th		2014	SIIS, Y. A.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 782021 10-06-17 Schedule A (Form 990 or 990-EZ) 2017

Schedule A (Form 990 or 990-EZ) 2017 INDEPENDENT SECTOR 52-108102 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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	1					
	include any "unusual grants.")	6,535,206.	7,482,486.	8,420,635.	5,146,702.	10,211,632.	37,796,661.
2	Tax revenues levied for the organ-					_	
	ization's benefit and either paid to				5		
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	6,535,206.	7,482,486.	8,420,635.	5,146,702.	10,211,632.	37,796,661.
5	The portion of total contributions		8 1 8 7 7 74			138	
	by each person (other than a	100					
	governmental unit or publicly						
	supported organization) included			1817			
	on line 1 that exceeds 2% of the			AT NEW YORK	S II Y DAYN		
	amount shown on line 11,					Service of the service of	
	column (f)						4,371,871.
6	Public support. Subtract line 5 from line 4.	53 V	D UNASU				33,424,790.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 4	6,535,206.	7,482,486.	8,420,635.	5,146,702.	10,211,632.	37,796,661.
8	Gross income from interest,						
	dividends, payments received on					li l	
	securities loans, rents, royalties,						
	and income from similar sources	964,742.	1,070,771.	1,303,958.	1,127,031.	970,891.	5,437,393.
9	Net income from unrelated business						
	activities, whether or not the	1				0	
	business is regularly carried on					(1	
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11							43,234,054.
12	Gross receipts from related activities,	etc. (see instructio	ns)			12	4,075,239.
13			,		vear as a section		
	organization, check this box and stop				-		
Se	ction C. Computation of Public						
14	Public support percentage for 2017 (lin	ne 6, column (f) div	rided by line 11, co	olumn (f))		14	77.31 %
15						15	73.96 %
16a	33 1/3% support test - 2017. If the o					ore, check this box	c and
	stop here. The organization qualifies a	as a publicly suppo	rted organization	VARIATION/WEST CONTRACT THE		. Was a construction of the water	X
k	33 1/3% support test - 2016. If the o						
	and stop here. The organization quali	fies as a publicly s	upported organizat	tion			▶□
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fact	_					
	meets the "facts-and-circumstances" t			•	•	-	
b	10% -facts-and-circumstances test						
~	more, and if the organization meets th	_					
	organization meets the "facts-and-circle						▶□
18	Private foundation. If the organization		-				■
						dule A (Form 990	

732022 10-06-17

Page 3

Schedule A (Form 990 or 990-EZ) 2017 INDEPENDENT SECTOR 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	TOTAL DISEASE SETTING	, , , , , , , , , , , , , , , , , , , ,	w	,		
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
2	Gross receipts from activities that						
3	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	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.)					TO SALE	TULT
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6					15. 1/1	
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
_	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
_	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
10	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)						
14	First five years. If the Form 990 is for	Ŭ			*	, ,, ,	
0	check this box and stop here	. 0.					>
	tion C. Computation of Public					T T	
	Public support percentage for 2017 (lin			column (f))		15	%
	Public support percentage from 2016			*************		16	9/
	tion D. Computation of Inves					T T	
	Investment income percentage for 20					17	9/
	Investment income percentage from 2					18	%
19 a	33 1/3% support tests - 2017. If the	organization did n	ot check the box	on line 14, and line	e 15 is more than 3	3 1/3%, and li	ne 17 is not
	more than 33 1/3%, check this box and	•					▶□
b	33 1/3% support tests - 2016. If the	organization did n	ot check a box or	line 14 or line 19a	a, and line 16 is mo	ore than 33 1/3	%, and
	line 18 is not more than 33 1/3%, chec	k this box and st	op here. The orga	anization qualifies a	as a publicly suppo	orted organizat	ion
	Private foundation. If the organization						>

732023 10-06-17

Schedule A (Form 990 or 990-EZ) 2017

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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes." explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? [f "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).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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).
- 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).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined 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.
- c 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.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
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10b		

ENDOCUMENTAL	rt IV Supporting Organizations (continued)			
	Continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	8. 7.		
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		100	
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	181	W	
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	1-11-15	127	te, II
	controlled the organization's activities. If the organization had more than one supported organization,	780		47.74
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	0.38		
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1_	-	
2	Did the organization operate for the benefit of any supported organization other than the supported	150	124	9 1
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			100
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		13	123
-	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations		r	Twars T
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		400	12.3
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		68.	200
	or management of the supporting organization was vested in the same persons that controlled or managed		-	
500	the supported organization(s). tion D. All Type III Supporting Organizations	1	L	
Sec	tion D. All Type III Supporting Organizations		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	NESS
	Did the average time are title to each of the average to develop by the last day of the fifth mouth of the		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		i-Ľ	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	100		1
2	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how		DI W	135
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
•	significant voice in the organization's investment policies and in directing the use of the organization's	= 1		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			-3.1
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	s).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	structions),	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	100		SO T
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			1
	those supported organizations and explain how these activities directly furthered their exempt purposes,	-45.4	1 5	17/201
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	100		8
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		4.1	100
	reasons for the organization's position that its supported organization(s) would have engaged in these	1 10 5		
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			457
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a	100000	(#E-00.04)
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

	edule A (Form 990 or 990 EZ) 2017 INDEPENDENT SECTOR			52-1081024	Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Organi	izations		
1	Check here if the organization satisfied the Integral Part Test as a qualifying	-		Part VI.) See instr	uctions. A
	other Type III non-functionally integrated supporting organizations must co	mplete Sec	ctions A through E.		
Sec	tion A - Adjusted Net Income		(A) Prior Year	(B) Current (options	
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 (options	
-1	Aggregate fair market value of all non-exempt-use assets (see			a Salah Marina	
	instructions for short tax year or assets held for part of year):				
a	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
	Discount claimed for blockage or other	W. 11-11			4.118
	factors (explain in detail in Part VI):	12191			
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 Y	′ear
া	Adjusted net income for prior year (from Section A, line 8, Column A)	1	Since Mad William		
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	
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to		Manager Salar		
-	emergency temporary reduction (see instructions)	6		N .	
7	Check here if the current year is the organization's first as a non-functional	lly integrate	d Type III supporting ora	anization (see	
	instructions).			,	

Schedule A (Form 990 or 990-EZ) 2017

Pai	Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continued)	
Sect	ion D - Distributions		-akesessonson or a souther	Current Year
_1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	
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 to	he organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reason-	SINS! AUDIN		
	able cause required- explain in Part VI). See instructions.			The second second
3	Excess distributions carryover, if any, to 2017			
а				
b	From 2013			
С	From 2014			
d	From 2015			
е	From 2016			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
ī	Carryover from 2012 not applied (see instructions)			
1	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			TOTAL PROPERTY OF
4	Distributions for 2017 from Section D,			
	line 7:			
а	Applied to underdistributions of prior years			Both Market St.
b	Applied to 2017 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, 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 2017. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in	A SECTION OF THE SECTION		
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j			TO SELECT SELECTION OF
	and 4c.			
8	Breakdown of line 7			
а	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			LIA LI LINANIA LI
	Excess from 2017		Tage Street Wallet	

Schedule A (Form 990 or 990-EZ) 2017

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

IN	52-1081024					
Organization type (check of	one):					
Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rul	e. See instructions.				
General Rule						
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's					
Special Rules						
sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount, line 1. Complete Parts I and II.	or 16b, and that received from				
year, total contribu	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						
		B (Form 990, 990-EZ, or 990-PF) (2017)				

Name of organization

Employer identification number

INDEPENDENT SECTOR

52-1081024

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$1,200,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Hame, address, and an + +	\$1,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3_		\$600,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Name, address, and zir + +	\$ 475,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
7		\$375,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
8		\$350,000.	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
9		\$317,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d)
No. 10	Name, address, and ZIP + 4	\$300,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 11	Name, address, and ZIP + 4	\$ 300,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d) Type of contribution
No.	Name, address, and ZIP + 4	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

52-1081024

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if ac	dditional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<u> </u>		\$	-
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-		\$	***************************************
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
•		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	÷
(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
====:		\$	

me of organ	nization		Employer identification number
art III	Exclusively religious, charitable, etc., contr the year from any one contributor. Complete c	ibutions to organizations described olumns (a) through (e) and the follo	in section 501(c)(7), (8), or (10) that total more than \$1,000 for wing line entry. For organizations
	completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additiona	charitable, etc., contributions of \$1,000 or	less for the year. (Enter this info, once.)
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	ft
-	Transferee's name, address, an	ad ZIP + 4	Relationship of transferor to transferee
No. om ort I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
- -	Transferee's name, address, an	(e) Transfer of git	ft Relationship of transferor to transferee
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of git	ft
-	Transferee's name, address, an	ad ZIP + 4	Relationship of transferor to transferee
No. om ort I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferae's name address as	(e) Transfer of gif	
-	Transferee's name, address, an	ad ZIP + 4	Relationship 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

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.

2017
Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

·ux	, (coc coparate mea deterno), then	da-18 Timbell Adatologica Patrologica (table 18 cele-18 19			
	Section 501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Ivan	ne of organization			-	mployer identification number
10-	INDEPENDEN				52-1081024
Pa	art I-A Complete if the org	ganization is exempt unde	r section 501(c) o	r is a section 527	organization.
1	Provide a description of the organiz	zation's direct and indirect political	campaign activities in	Part IV.	
2	Political campaign activity expendit	ures			> \$
3	Volunteer hours for political campa	ign activities		********************	
		824 - SSR21 - D 895537884-			
Pa	art I-B Complete if the org	janization is exempt unde	r section 501(c)(3).	
1	Enter the amount of any excise tax	incurred by the organization unde	r section 4955		> \$
2	Enter the amount of any excise tax	incurred by organization manager	s under section 4955		> \$
3	If the organization incurred a section	n 4955 tax, did it file Form 4720 fo	or this year?		Yes No
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				
Pa	art I-C Complete if the org	anization is exempt unde	r section 501(c), e	except section 50	1(c)(3).
1	Enter the amount directly expended	d by the filing organization for sect	ion 527 exempt function	on activities	▶\$
2	Enter the amount of the filing organ	ization's funds contributed to othe	er organizations for sec	tion 527	
	exempt function activities				> \$
3					
	line 17b				> \$
4	Did the filing organization file Form				
5	Enter the names, addresses and en				
	made payments. For each organiza			_	
	contributions received that were pr	omptly and directly delivered to a	separate political orgai	nization, such as a sepa	arate segregated fund or a
	political action committee (PAC). If	additional space is needed, provic	le information in Part I	J.	
_	(a) Name	(b) Address	(c) EIN	(d) Amount paid fro	m (e) Amount of political
	(4,)	(4)	(-,	filing organization'	s contributions received and
				funds. If none, enter	-0 promptly and directly
					delivered to a separate political organization.
					If none, enter -0
_					
_					-
_					
_					
_					

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

Schedule C (Form 990 or 990-EZ) 2017

LHA

732041 11-09-17

Schedule C (Form 990 or 990-EZ) 2017 I	NDEPENDENT SECTOR			52-1	081024 Page 2
Part II-A Complete if the orga	anization is exemp	ot under section 5	01(c)(3) and filed	Form 5768 (ele	
section 501(h)).					
A Check ▶ ☐ if the filing organization	ion belongs to an affilia	ted group (and list in P	art IV each affiliated gr	roup member's name	e, address, EIN,
expenses, and share	of excess lobbying exp	penditures).			
B Check ▶ if the filing organizat	ion checked box A and	"limited control" provis	sions apply.		
	s on Lobbying Expend itures" means amount			(a) Filing organization's	(b) Affiliated group totals
(The term expend				totals	
1a Total lobbying expenditures to influence	ence public opinion (gra	ass roots lobbying)			
b Total lobbying expenditures to influence		/		43,011.	
c Total lobbying expenditures (add lin	es 1a and 1b)			43,011.	
d Other exempt purpose expenditures	3			7,682,623.	
 Total exempt purpose expenditures 	(add lines 1c and 1d)	***************************************		7,725,634.	
f Lobbying nontaxable amount. Enter	the amount from the fo	ollowing table in both o	olumns.	536,282.	
If the amount on line 1e, column (a) or	(b) is: The lobby	ing nontaxable amou	nt is:		
Not over \$500,000	20% of the	e amount on line 1e.			
Over \$500,000 but not over \$1,000,	000 \$100,000	plus 15% of the excess	s over \$500,000.		
Over \$1,000,000 but not over \$1,50	0,000 \$175,000	plus 10% of the excess	s over \$1,000,000.		A Marian San Maria
Over \$1,500,000 but not over \$17,0	000,000 \$225,000	plus 5% of the excess	over \$1,500,000.		
Over \$17,000,000	\$1,000,00	0,			
g Grassroots nontaxable amount (ent	er 25% of line 1f)	******************************		134,071.	
h Subtract line 1g from line 1a. If zero	or less, enter -0-			0.	
i Subtract line 1f from line 1c. If zero	or less, enter -0-			0.	
j If there is an amount other than zero	o on either line 1h or lin	e 1i, did the organization	on file Form 4720		
reporting section 4911 tax for this y	ear?				Yes No
(Some organizations th	at made a section 501	aging Period Under se (h) election do not ha e instructions for lines	ve to complete all of	the five columns be	elow.
		itures During 4-Year			
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
- 3 M/2 / 43 ×	EC1 ED4	600 667	672 402	E3C 000	2 470 040
2a Lobbying nontaxable amount	561,504.	699,667.	673,493	536,282.	2,470,946.
b Lobbying ceiling amount (150% of line 2a, column(e))					3,706,419.
c Total lobbying expenditures	7,260.	23,762.	33,216.	43,011.	107,249.
d Grassroots nontaxable amount	140,376.	174,917.	168,373.	134,071.	617,737.
e Grassroots ceiling amount (150% of line 2d, column (e))					926,606.
Grassroots lobbuing expanditures					

Schedule C (Form 990 or 990-EZ) 2017

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)).

of the lobbying activity.				(I	_
, ,		Yes	No	Amo	ount
1 During the year, did the filing orga	nization attempt to influence foreign, national, state or	17844		1 P = 1	
local legislation, including any atte	mpt to influence public opinion on a legislative matter	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1		381	
or referendum, through the use of				17104	
a Volunteers?		6:		S L	
b Paid staff or management (include	compensation in expenses reported on lines 1c through 1i)?			MALL A	100
c Media advertisements?		ω <u> </u>			
d Mailings to members, legislators, of	or the public?				
e Publications, or published or broa					
f Grants to other organizations for le					
	ir staffs, government officials, or a legislative body?				
	conventions, speeches, lectures, or any similar means?	***			
j Total. Add lines 1c through 1i					
	e organization to be not described in section 501(c)(3)?				
	ax incurred under section 4912		200		
	ax incurred by organization managers under section 4912		DAT LA		
	section 4912 tax, did it file Form 4720 for this year?	tion 501/c)//	5) or co.	otion	
	ionizonan ie avamnt lindar eaction billieit/ii. eac	LIUII SU I (C)(oj, di sec	SHOTI	
Part III-A Complete if the org	panization is exempt under section 501(c)(4), sec	5 K2			
	janization is exempt under section 501(c)(4), sec			Yes	1
Part III-A Complete if the org 501(c)(6).			1	Yes	N
Complete if the org 501(c)(6).	e) dues received nondeductible by members?	2 02		Yes	١
Complete if the org 501(c)(6). Were substantially all (90% or mor Did the organization make only in- Complete if the organization agree to carry art III-B Complete if the organization and if eith		n the prior year tion 501(c)(2 ? 3 5), or sec	ction	e 3, i
Complete if the org 501(c)(6). Were substantially all (90% or mor Did the organization make only in- Did the organization agree to carn Complete if the organization agree to carn Complete if the organization agree organization agree to carn Complete if the organization agree organization ag	e) dues received nondeductible by members? nouse lobbying expenditures of \$2,000 or less? very over lobbying and political campaign activity expenditures from an interest and a section 501(c)(4), section and BOTH Part III-A, lines 1 and 2, are answered	n the prior year tion 501(c)(ed "No," OR	2 3 5), or sec 3 (b) Part	ction	
Part III-A Complete if the org 501(c)(6). Were substantially all (90% or mor Did the organization make only in- Complete if the org 501(c)(6) and if eith answered "Yes." Dues, assessments and similar an	e) dues received nondeductible by members? nouse lobbying expenditures of \$2,000 or less? v over lobbying and political campaign activity expenditures from panization is exempt under section 501(c)(4), sec	n the prior year tion 501(c)(e ed "No," OR	2 3 5), or sec 3 (b) Part	ction	
Complete if the org 501(c)(6). Were substantially all (90% or mor Did the organization make only in- Complete if the org The organization agree to carry Complete if the org 501(c)(6) and if eith answered "Yes." Dues, assessments and similar am	e) dues received nondeductible by members? nouse lobbying expenditures of \$2,000 or less? ver lobbying and political campaign activity expenditures from an is exempt under section 501(c)(4), section BOTH Part III-A, lines 1 and 2, are answered to the section between	n the prior year tion 501(c)(e ed "No," OR	2 3 5), or sec 3 (b) Part	ction	
Complete if the org 501(c)(6). Were substantially all (90% or mor Did the organization make only in- Did the organization agree to carro Cart III-B Complete if the org 501(c)(6) and if eith answered "Yes." Dues, assessments and similar am Section 162(e) nondeductible lobble expenses for which the section is	e) dues received nondeductible by members? nouse lobbying expenditures of \$2,000 or less? very over lobbying and political campaign activity expenditures from panization is exempt under section 501(c)(4), sector (a) BOTH Part III-A, lines 1 and 2, are answered anounts from members uping and political expenditures (do not include amounts of personness).	n the prior year tion 501(c)(a ed "No," OR	2 3 5), or sec 3 (b) Part	ction	
Complete if the org 501(c)(6). Were substantially all (90% or mor Did the organization make only in- Bid the organization agree to carro Complete if the org 501(c)(6) and if eith answered "Yes." Dues, assessments and similar am Section 162(e) nondeductible lobble expenses for which the section is a Current year	e) dues received nondeductible by members? nouse lobbying expenditures of \$2,000 or less? very over lobbying and political campaign activity expenditures from panization is exempt under section 501(c)(4), sector (a) BOTH Part III-A, lines 1 and 2, are answered anounts from members sying and political expenditures (do not include amounts of page 527(f) tax was paid).	n the prior year tion 501(c)(ed "No," OR	2 3 5), or sec 3 (b) Part	ction	
Part III-A Complete if the org 501(c)(6). Were substantially all (90% or mor 2 Did the organization make only in-3 Did the organization agree to carn 2 Complete if the org 501(c)(6) and if eith answered "Yes." Dues, assessments and similar am 2 Section 162(e) nondeductible lobbe expenses for which the section a Current year b Carryover from last year	e) dues received nondeductible by members? nouse lobbying expenditures of \$2,000 or less? very over lobbying and political campaign activity expenditures from a partial part III-A, lines 1 and 2, are answered to the second sec	n the prior year tion 501(c)(ed "No," OR	2 3 55), or sec a (b) Part 1 2a 2b	ction	
Part III-A Complete if the org 501(c)(6). Were substantially all (90% or mor 2 Did the organization make only in-3 Did the organization agree to carn 2 Complete if the org 501(c)(6) and if eith answered "Yes." Dues, assessments and similar am 2 Section 162(e) nondeductible lobbe expenses for which the section a Current year Carryover from last year c Total	e) dues received nondeductible by members? nouse lobbying expenditures of \$2,000 or less? very over lobbying and political campaign activity expenditures from panization is exempt under section 501(c)(4), sector (a) BOTH Part III-A, lines 1 and 2, are answered anounts from members sying and political expenditures (do not include amounts of page 527(f) tax was paid).	n the prior year tion 501(c)(ed "No," OR	2 3 55), or sec a (b) Part 1 2a 2b 2c	ction	
Tart III-A Complete if the org 501(c)(6). Were substantially all (90% or mor 2 Did the organization make only in-3 Did the organization agree to carry art III-B Complete if the org 501(c)(6) and if eith answered "Yes." Dues, assessments and similar am 2 Section 162(e) nondeductible lobbe expenses for which the section a Current year Current year Carryover from last year Carrotal Aggregate amount reported in section sections.	e) dues received nondeductible by members? nouse lobbying expenditures of \$2,000 or less? very over lobbying and political campaign activity expenditures from a partial section 501(c)(4), section 501(c)(4), section BOTH Part III-A, lines 1 and 2, are answered to the section members and political expenditures (do not include amounts of partial section).	n the prior year tion 501(c)(ed "No," OR	2 3 55), or sec a (b) Part 1 2a 2b 2c	ction	
Dart III-A Complete if the org 501(c)(6). Were substantially all (90% or mor Did the organization make only in- Did the organization agree to carry Cart III-B Complete if the org 501(c)(6) and if eith answered "Yes." Dues, assessments and similar am Section 162(e) nondeductible lobble expenses for which the section a Current year Carryover from last year Carryover from last year Total Aggregate amount reported in section III-B Complete if the org 501(c)(6) and if eith answered "Yes." Carryover from last year Carryover from last year III-B Complete if the org	e) dues received nondeductible by members? nouse lobbying expenditures of \$2,000 or less? r over lobbying and political campaign activity expenditures from ganization is exempt under section 501(c)(4), sector (a) BOTH Part III-A, lines 1 and 2, are answere nounts from members nounts from members lying and political expenditures (do not include amounts of person of the person of	n the prior year tion 501(c)(ed "No," OR	2 3 55), or sec a (b) Part 1 2a 2b 2c	ction	
Complete if the org 501 (c) (6). Were substantially all (90% or mor Did the organization make only in- Complete if the org Total Complete if the org 501 (c) (6) and if eith answered "Yes." Dues, assessments and similar am Section 162(e) nondeductible lobb expenses for which the section of a Current year Complete if the org 501 (c) (6) and if eith answered "Yes." Complete if the org 501 (c) (6) and if eith answered "Yes." Complete if the org 501 (c) (6).	e) dues received nondeductible by members? nouse lobbying expenditures of \$2,000 or less? rever lobbying and political campaign activity expenditures from ganization is exempt under section 501(c)(4), section BOTH Part III-A, lines 1 and 2, are answered to an activity expenditures from ganization is exempt under section 501(c)(4), section (a) BOTH Part III-A, lines 1 and 2, are answered to an activity expenditures from ganization is exempt under section 501(c)(4), section (a) BOTH Part III-A, lines 1 and 2, are answered to an activity expenditures from ganization from members (do not include amounts of particular particular from members (do not include amounts of particular particular from from from from from from from fro	n the prior year tion 501(c)(c ed "No," OR olitical	2 3 55), or sec 8 (b) Part 1 2a 2b 2c 3	ction	

Schedule C (Form 990 or 990-EZ) 2017

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

INDEPENDENT SECTOR

Employer identification number 52-1081024

Pa	rt I Organizations Maintaining Donor Advised Fu	nds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line 6.		
-		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3			
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing	that the assets held in donor advised	funds
	are the organization's property, subject to the organization's exclusions		
6	Did the organization inform all grantees, donors, and donor advisor		
	for charitable purposes and not for the benefit of the donor or dono		
	a sa sa si si si si susan	***************************************	F 10.220 F 11.220
Pa	rt II Conservation Easements. Complete if the organiza		
1	Purpose(s) of conservation easements held by the organization (ch	eck all that apply).	
	Preservation of land for public use (e.g., recreation or educat	tion) Preservation of a histori	cally important land area
	Protection of natural habitat	Preservation of a certific	ed historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified co	onservation contribution in the form of	a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic structure	e included in (a)	2c
d	Number of conservation easements included in (c) acquired after 7	7/25/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, released	d, extinguished, or terminated by the or	ganization during the tax
	year >		
4	Number of states where property subject to conservation easemen	nt is located -	
5	Does the organization have a written policy regarding the periodic	monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds		
6	Staff and volunteer hours devoted to monitoring, inspecting, handle	ling of violations, and enforcing conser	vation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling o	of violations, and enforcing conservation	n easements during the year
	\$		
8	Does each conservation easement reported on line 2(d) above satisfied		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation eas		
	include, if applicable, the text of the footnote to the organization's	financial statements that describes the	e organization's accounting for
Da	conservation easements. rt III Organizations Maintaining Collections of Art,	Historical Transuras or Othe	or Similar Assots
ra	Complete if the organization answered "Yes" on Form 990,		a Sillilai Assets.
_			the seal had a sea also set usually set set
та	If the organization elected, as permitted under SFAS 116 (ASC 958		
	historical treasures, or other similar assets held for public exhibition		e of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describes the		المرابعة والمراجعة والروان فالمراجع المراجعة
b	If the organization elected, as permitted under SFAS 116 (ASC 958		
	treasures, or other similar assets held for public exhibition, educati	ion, or research in furtherance of public	service, provide the following amounts
	relating to these items:		Φ.
	(i) Revenue included on Form 990, Part VIII, line 1		
		e or other similar appets for financial a	
2	If the organization received or held works of art, historical treasure:		ain, provide
_	the following amounts required to be reported under SFAS 116 (AS		
a ı.	Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X		
n	ASSETS INCIDIDED IN COLUMN 250+ COLUMN ASSETS INCIDIDED IN COLUMN 250+ COLUMN ASSETS INCIDIDED IN COLUMN ASSETS INCIDIDED IN COLUMN ASSETS INCIDIDED IN COLUMN ASSETS IN COLUMN		

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

Schedule D (Form 990) 2017

Sche	dule D (Form 990) 2017 INDEPENDENT	SECTOR			52-10	081024	Page 2
	t III Organizations Maintaining Co	llections of Art	Historical Tre	asures, or Ot	her Similar Asse	ts (contin	nued)
3	Using the organization's acquisition, accession						
	(check all that apply):						
а	Public exhibition	d	Loan or excl	nange programs			
b	Scholarly research	e	Other				
С	Preservation for future generations						
4	Provide a description of the organization's coll-	ections and explain	how they further th	e organization's e	xempt purpose in Pa	rt XIII.	
5	During the year, did the organization solicit or			-			
	to be sold to raise funds rather than to be mair					Yes	No
Pai	t IV Escrow and Custodial Arrange				THE RESERVE THE PERSON NAMED IN COLUMN 2 I		
	reported an amount on Form 990, Part	X, line 21.					
1a	Is the organization an agent, trustee, custodiar	n or other intermedia	ary for contributions	or other assets r	not included		
	on Form 990, Part X?					Yes	No No
b	If "Yes," explain the arrangement in Part XIII ar						
						Amount	t
С	Beginning balance				1c		
d	Additions during the year						
е	Distributions during the year						
f	Ending balance						
2a	Did the organization include an amount on For					Yes	☐ No
ь	If "Yes," explain the arrangement in Part XIII. C						
Pai	t V Endowment Funds. Complete if	the organization ans	swered "Yes" on Fo	rm 990, Part IV, li	ne 10.		
	÷1	(a) Current year	(b) Prior year	(c) Two years bad	ck (d) Three years bac		years back
1a	Beginning of year balance	6,612,008.	6,358,065.	4,521,43			000,000
b	Contributions			1,999,21		_	
С	Net investment earnings, gains, and losses	779,979	416,003.	-32,39	3. 168,829	•	
d	Grants or scholarships						
е	Other expenditures for facilities						
	and programs	210,347.	162,060.	130,19	5. 147,392	2,	500,000.
f	Administrative expenses						
g	End of year balance	7,181,640.	6,612,008.	6,358,06	5. 4,521,437	. 2,	500,000.
2	Provide the estimated percentage of the current	•	(line 1g, column (a)) held as:			
а	Board designated or quasi-endowment	100.00	_%				
b	Permanent endowment -	%					
С	Temporarily restricted endowment	%					
	The percentages on lines 2a, 2b, and 2c shoul						
3a	Are there endowment funds not in the possess	sion of the organizat	ion that are held an	d administered fo	or the organization	Ĩ	- Constant
	by:					f	Yes No
	(i) unrelated organizations						X
							Х
	If "Yes" on line 3a(ii), are the related organization			******************		3b	
Day	Describe in Part XIII the intended uses of the of tVI Land, Buildings, and Equipme		vment funds.				
Pal			Dark IV/ Bros. 44 O	00 Forms 000 F	V line 10		
	Complete if the organization answered					455	
	Description of property	(a) Cost or ot	ner 🍴 (b) Cost	or other (c) Accumulated	(d) Boo	k value

27,222,089. Schedule D (Form 990) 2017

5,391,820.

20,102,923.

1,204,192.

523,154.

e Other

basis (other)

5,391,820.

26,729,411.

2,459,510.

2,550,174.

depreciation

6,626,488.

1,255,318,

2,027,020.

basis (investment)

1a Land

c Leasehold improvements

d Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Schedule D (Form 990) 2017 INDEPENDENT SECTO	OR	5	52-1081024	Page 3
Part VII Investments - Other Securities.				
Complete if the organization answered "Yes"				
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market	value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.			TOTAL METERS	an or the first
	and the state of t			
Complete if the organization answered "Yes" (a) Description of investment	on Form 990, Part IV, line 1 (b) Book value	11c. See Form 990, Part X, line 13. (c) Method of valuation: Cost or en	ad of year market	· value
- Area S	(b) Dook value	(C) Method of valuation. Cost of Sin	0-01-year market	Value
(1)				
(3)				
(4)				
(5)				-
(6)				-
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			C THE	
Part IX Other Assets.				
Complete if the organization answered "Yes"		11d. See Form 990, Part X, line 15.		
(a)	Description		(b) Book v	value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	este			
Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities.	<u> </u>			
Complete if the organization answered "Yes"	Form 900 Part IV line	11 and 14 Con Form 000 Part X line 2/	e.	
(a) Description of liability		(b) Book value	o.	, 4 TH F ₀ 2 H
(1) Federal income taxes		(b) BOOK value		
(2) DEPOSITS HELD IN ESCROW		117,001.		
(3) DEFERRED RENT		55,105.		
(4)				
(5)				
(6)		-1 '41 ()		
(7)				
- V. J				

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2017

(9)

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

172,106.

Sche	dule D (Form 990) 2017 INDEPENDENT SECTOR			52-108	1024 Page 4
	t XI Reconciliation of Revenue per Audited Financial Statement	ts With F	Revenue per Re	turn.	
	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	13,229,262.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	ar N			
а	Net unrealized gains (losses) on investments	2a	438,278.		
b	Donated services and use of facilities	2b	58,160.		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	496,438.
3	Subtract line 2e from line 1			3	12,732,824.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1;		ACTORITION FRANCISCO PRINTEDOS	log i	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		l i di	
b	Other (Describe in Part XIII.)	4b	-1,481,704.		
	Add lines 4a and 4b	vecesses see	NEW CONTRACTOR OF THE CONTRACTOR	4c	-1,481,704.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	11,251,120.
	t XII Reconciliation of Expenses per Audited Financial Statemer			leturn.	
12791240	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		35.704.00000		
1	Total expenses and losses per audited financial statements			1	10,161,458.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	************	********************		
a	Donated services and use of facilities	2a	58,160.	0000	
b	Prior year adjustments	2b	//		
c	Other losses	2c			
d		2d	1,481,704.	2	
_				2e	1,539,864.
	Add lines 2a through 2d			3	8,621,594.
3	Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	***********	*******************	3	1,111,111,
4	Investment expenses not included on Form 990, Part VIII, line 7b	1 40 1		Y 1181	
a		4a 4b		V 8	
	Other (Describe in Part XIII.)	are entered		4-	0.
	Add lines 4a and 4b			4c	8,621,594.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I. line 18.) † XIII Supplemental Information.		XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	5	0,021,354.
1.25.25.41	The state of the s	/ Kasa 41a -	and Ohr Dout V. line 4	Ded V. E	0- D+ VI
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV			; Part X, II	ne 2; Part XI,
ines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additi	onal inform	ation.		
. » . D. (1	A T. A TAND A				
ART	V, LINE 4:				
	VALUE OF THE ACCUMANT OF THE PROPERTY AND THE PROPERTY ACCUMANT.				
HE	UNRESTRICTED NET ASSETS OF INDEPENDENT SECTOR ARE REPORTED AS				
	ACCUMENT AND DOLLD DESCRIPTION OF A SCHOOL WANDERS AND AGENT	am a			
JNDE	SIGNATED AND BOARD DESIGNATED NET ASSETS. UNRESTRICTED NET ASSE	STS			
REPF	ESENT THE PORTION OF EXPENDABLE FUNDS THAT IS AVAILABLE TO SUPPLE	PORT THE			
		_			
PEF	ATIONS OF INDEPENDENT SECTOR, WHILE BOARD DESIGNATED NET ASSETS	3			
REPF	ESENT A PORTION OF UNRESTRICTED NET ASSETS FOR DESIGNATED PURPO	DSES AND			
)				
CONS	ISTS OF A SHORT TERM BUILDING OPERATING FUND AND A LONG TERM RE	ESERVE			
UNI	WHICH WAS CREATED TO ESTABLISH A CORPUS FOR WHICH INVESTMENT I	INCOME			
VILI	BE USED FOR GENERAL OPERATIONS. AS OF DECEMBER 31, 2017, BOARD)			
DESI	GNATED NET ASSETS INCLUDED \$500,000 IN THE SHORT TERM BUILDING				

Schedule D (Form 990) 2017

2017.03040 INDEPENDENT SECTOR

OPERATING FUND AND \$6,681,640 IN THE LONG TERM RESERVE FUND.

Schedule D (Form 990) 2017

PENALTIES ON INCOME TAXES, AND ACCOUNTING IN INTERIM PERIODS, MANAGEMENT

ORGANIZATION HAS TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT

EVALUATED THE ORGANIZATION'S TAX POSITIONS AND CONCLUDED THAT THE

SCHEDULE J (Form 990)

Compensation Information

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

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

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

Open to Public

OMB No. 1545-0047

Inspection

Employer identification number

52-1081024

Internal Revenue Service Name of the organization

Department of the Treasury

INDEPENDENT SECTOR

Questions Regarding Compensation

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

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

Schedule J (Form 990) 2017

6b

7

b Any related organization?

not described on lines 5 and 6? If "Yes," describe in Part III

For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments

Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the

initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in

Regulations section 53.4958-6(c)?

If "Yes" on line 6a or 6b, describe in Part III.

X

Х

X

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

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

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

Je()		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(D)·(j)(B)	in column (B) reported as deferred on prior Form 990
(1) DANIEL J. CARDINALI	€	522,571.	0	1,311.	27,461.	12,026.	563,369.	0
CEO				0	0	0	0	0
(2) VICTOR REINOSO	Ξ	246,36	0	347.	7,615.	8,192.	262,515.	0
000	(E)	0	0	0	*0	0	0	0
(3) CAROLYN MOLLEN	Ξ	202,863.	0	139,	1,636.	11,426.	216,064.	.0
CFO		0		0	0.	*0	0	0
(4) JEFF MOORE	Ξ	207,419.	0	642.	13,817.	21,096.	242,974.	0
CSO	E	0	0	0	0	* 0	*0	0
(5) BARRY GOODINSON	ε	165,897.	0	. 595	•0	14,205.	180,697.	0
VP	€	0	0	0	0	0	0	0.0
(6) ROBERT JONES	€	156,443.	0	318.	0	10,271.	167,032.	0
VP	: ≘	0		0	0	0	0	.0
(7) DANIELLE MAXWELL	€	129,963.	0	100.	10,046.	11,079	151,188.	0
DIR. TALENT & ADMINISTRATION	: 🗐	0	0	0	0	0	*0	.0
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							Schedu	Schedule J (Form 990) 2017
732112 10-17-17								

SCHEDULEK (Form 990) Name of the organization

2017 Open to Public Inspection

OMB No. 1545-0047

Employer identification number

52-1081024

Supplemental Information on Tax-Exempt Bonds

► Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. Attach to Form 990.
 Go to www.irs.gov/Form990 for instructions and the latest information.

INDEPENDENT SECTOR

(i) Pooled % financing × Yes S S (g) Defeased (h) On behalf Š Δ of issuer × Yes Yes Yes ž × Yes ŝ S OF O (f) Description of purpose TO REFINANCE PURCHASE HEADQUARTERS BUILDING Yes Yes å No B 11,600,000. Yes Yes (e) Issue price 600,000 11,600,000. 545,636, × × 9N å 2013 Η. 11 V (d) Date issued 06/04/13 Yes Yes × × × × (c) CUSIP # NONE Are there any lease arrangements that may result in private business use of Was the organization a partner in a partnership, or a member of an LLC, (b) Issuer EIN Were the bonds issued as part of an advance refunding issue? 56-6001131 Were the bonds issued as part of a current refunding issue? which owned property financed by tax-exempt bonds? Has the final allocation of proceeds been made? Working capital expenditures from proceeds Credit enhancement from proceeds Capital expenditures from proceeds Capitalized interest from proceeds Amount of bonds legally defeased Gross proceeds in reserve funds Proceeds in refunding escrows Issuance costs from proceeds Year of substantial completion (a) Issuer name Part III Private Business Use COLUMBIA bond-financed property? Amount of bonds retired Other unspent proceeds Total proceeds of issue Other spent proceeds Bond Issues Proceeds P F A DISTRICT Part II. Part 9 8 O 0 4 S 00 0 10 언 F 4 45 16 5

732121 1Q-18-17 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule K (Form 990) 2017

Schedule K (Form 990) 2017 INDEPENDENT SECTOR			52-1	-1081024				Page 2
Part III Private Business Use (Continued)								
	<-			B		S		Ì
3a Are there any management or service contracts that may result in private	Yes	S ×	Yes	No	Yes	ON	Yes	No
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		×						
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside								
Counsel to review any research agreements relating to the financed property?								Ĩ
		70 00		ò		ò		ò
5 Enter the percentage of financed property used in a private business use as a result of		0%		%		%		8
unrelated trade or business activity carried on by your organization, another								
section 501 (c)(3) organization, or a state or local government		% 00*		%		%		%
6 Total of lines 4 and 5		% 00.		%		%		%
7 Does the bond issue meet the private security or payment test?		×						
8a Has there been a sale or disposition of any of the bond-financed property to a non-								
governmental person other than a 501(c)(3) organization since the bonds were issued?		×						Î
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed								
- Jo		%		%		%		%
c If ⁴Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								9
9 Has the organization established written procedures to ensure that all nonqualified								
bends of the issue are remediated in accordance with the requirements under								
7		×						Î
Part IV Arbitrage								
*	A			8		O	Δ	
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
Penalty in Lieu of Arbitrage Rebate?		×						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		×						
b Exception to rebate?		×						
c No rebate due?	×							Ì
If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
performed								
3 Is the bond issue a variable rate issue?		×						
4a Has the organization or the governmental issuer entered into a qualified								
hedge with respect to the bond issue?		X						
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
732122 10-18-17						Sch	Schedule K (Form 990) 2017	n 990) 2017

			52-1	52-1081024				Page 3
Part IV Arbitrage (Continued)	•							
270	Yes	S _N	Yes	No No	Yes	S S	Yes	S S
5a Were gross proceeds invested in a guaranteed investment contract (GIC)? h Name of provider		×						
c Term of GIC								20
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		×						
7 Has the organization established written procedures to monitor the requirements of section 148?		×						
Part V Procedures To Undertake Corrective Action								
	A			В		0		D
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation isn't available under applicable	×							
Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K.	on Schedule	K. See instructions	ctions		24			
								*
								*
								. 10
732123 10-18-17						Sch	nedule K (Fo	Schedule K (Form 990) 2017

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

INDEPENDENT SECTOR

Employer identification number 52-1081024

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

Schedule O (Form 990 or 990-EZ) (2017)

Name of the organization INDEPENDENT SECTOR	Employer identification number 52-1081024
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:	
	,
WE BEGAN OUR 2016 ELECTION INITIATIVE IN JANUARY BY COMMISSIONING	
QUALITATIVE AND QUANTITATIVE RESEARCH OF AMERICAN VOTERS NATIONALLY AND	
IN KEY BATTLEGROUND STATES. THIS RESEARCH REVEALED THE DEEP BIPARTISAN	
SUPPORT ENJOYED BY THE SECTOR. DRAWING ON THIS RESEARCH, WE DEVELOPED	
KEY MESSAGE POINTS AND SEVERAL BROAD POLICY RECOMMENDATIONS THAT WE	
USED TO ENGAGE DIRECTLY WITH THE DEMOCRATIC AND REPUBLICAN 2016	
PRESIDENTIAL CANDIDATES AND THEIR STAFFS THROUGHOUT THE ELECTION	
SEASON, THE DATA AND OUR MESSAGES WERE PUBLISHED IN OUR OCTOBER 2016	
REPORT, UNITED FOR CHARITY.	
·	
WE RESPONDED WITH OUR PARTNERS TO NEW POLICY CHALLENGES AS THEY AROSE,	
INCLUDING: LEADING A CAMPAIGN TO OPPOSE A PROPOSED IRS CHANGE TO GIFT	
SUBSTANTIATION RULES, WHICH RESULTED IN THE IRS SUBSEQUENTLY	
WITHDRAWING ITS PROPOSED CHANGES; WORKING WITH THE DEPARTMENT OF LABOR	
TO CREATE NONPROFIT-SPECIFIC GUIDANCE FOR IMPLEMENTATION OF NEW	
OVERTIME REGULATIONS, INCLUDING WEBINARS HELD WITH DOL THAT WERE VIEWED	
BY OVER 6,000 NONPROFITS; AND PREPARING FOR COMPREHENSIVE TAX REFORM IN	
2017 BY ENGAGING WITH OUR MEMBERS AND KEY TAX WRITING COMMITTEES TO	
EXPLORE OPPORTUNITIES FOR EXPANDING CHARITABLE GIVING INCENTIVES.	
IN ADDITION TO ENGAGING IN ADVOCACY ON BEHALF OF THE SECTOR, WE ALSO	
CONTINUED TO PROVIDE ORGANIZATIONS AND INDIVIDUALS WITH TOOLS AND	
STRATEGIES TO ENGAGE IN MORE EFFECTIVE ADVOCACY THEMSELVES. MORE THAN	
100 ATTENDEES CONVENED AT OUR PUBLIC POLICY ACTION INSTITUTE, HELD IN	
CONJUNCTION WITH OUR ANNUAL CONFERENCE IN NOVEMBER 2016, TO LEARN	
ADVOCACY BEST PRACTICES AND DISCUSS HOW 2017 TAX REFORM EFFORTS MAY	
IMPACT NONPROFITS: SPECIFICALLY AROUND CHARITABLE GIVING: AS WELL AS	

21ST CENTURY ORGANIZATION: IS WILL EVOLVE ITS INTERNAL STRUCTURES,

NEW EFFORT TO CO-CREATE A NATIONAL NARRATIVE ABOUT THE VALUE OUR SECTOR

CREATES IN AMERICAN LIFE.

Name of the organization INDEPENDENT SECTOR	Employer identification number 52-1081024
CAPABILITIES AND METHODOLOGIES TO BECOME A DATA-DRIVEN ORGANIZATION	
RESULTED IN, WITHDRAWING, LEARNING ORGANIZATION USING WHAT WE LEARN IN	
SERVICE OF OUR MISSION.	
DURING 2017, IS STAFF CONTINUED TO SUPPORT THE BOARD OF DIRECTORS'	
STRATEGIC LEADERSHIP AND OVERSIGHT OF THE ORGANIZATION. THE TEAM	
SUPPORTED THE CONTINUED IMPLEMENTATION OF THE ORGANIZATIONAL STRATEGY,	
AND HELPED ENSURE THAT THE BOARD WAS APPROPRIATELY ENGAGED AND	
POSITIONED TO PLAY ITS VITAL LEADERSHIP ROLE RELATIVE TO SETTING THE	
ORGANIZATION'S PATH TO THE FUTURE. AS A LEADER AND CHAMPION ON BEHALF	
OF THE NONPROFIT AND PHILANTHROPIC SECTOR, IS HAS A HIGHLY REGARDED FOR	
RESPONSIVENESS, AGILITY, KNOWLEDGE, AND RELIABILITY. INDEPENDENT SECTOR	
IS ALSO RECOGNIZED BOTH FOR ITS ROLE AND SKILL AS A NEUTRAL CONVENER,	
BRINGING TOGETHER SECTOR LEADERS FROM A BROAD SPECTRUM OF GROUPS AROUND	
SALIENT ISSUES, AND FOR ITS POLICY LEADERSHIP, MUCH OF WHICH IN 2017	
WAS FOCUSED ON ADVANCING THE INTERESTS OF THE SECTOR THROUGH THE TAX	
REFORM PROCESS.	
AS IT DOES EVERY YEAR, INDEPENDENT SECTOR CONTINUES TO HONOR THE LEGACY	
OF ITS FOUNDER, JOHN W GARDNER, THROUGH THE AWARD OF THE JOHN W.	
GARDNER LEADERSHIP AWARD. THE AWARD, PRESENTED IN 2017 TO ROSEANNE	
HAGGERTY, PRESIDENT AND CEO OF COMMUNITY SOLUTIONS, HONORS LEADERS IN	
AMERICAN CIVIL SOCIETY WHO ARE UNIQUELY MODELING WHAT IT LOOKS LIKE,	
AND TAKES, TO IMPROVE LIVES AND THE NATURAL WORLD-THE VERY HEART OF THE	
IS MISSION.	
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:	
NETWORKS AND MEMBER ENGAGEMENT - THE IS MEMBERSHIP IS A LEADERSHIP	

Name of the organization INDEPENDENT SECTOR	Employer identification number 52-1081024
NETWORK OF OVER 400 ORGANIZATIONS REPRESENTING A CROSS-SECTION OF THE	
CHARITABLE COMMUNITY INCLUDING LOCAL REGIONAL AND NATIONAL PUBLIC	
CHARITIES, FOUNDATIONS, CORPORATE GIVING PROGRAMS, AND OTHER	
ORGANIZATIONS COMMITTED TO ADVANCING THE COMMON GOOD, WE ENGAGE MEMBERS	
OF DIFFERENT TYPES, SIZES, MISSION AREAS, AND GEOGRAPHIES, AND INVOLVE	
OUR MEMBERSHIP IN ALL OF OUR EFFORTS TO STRENGTHEN THE CHARITABLE	
COMMUNITY. THIS INCLUDES: DEVELOPING POLICY POSITIONS AND AMPLIFYING	
THE VOICE OF THE CHARITABLE COMMUNITY TO THE ADMINISTRATION AND	
LEGISLATORS, SUPPORTING AND DEVELOPING ESTABLISHED AND EMERGING	
LEADERS, AND PROMOTING GOOD GOVERNANCE STANDARDS. MEMBERS ARE INFORMED	
THROUGH OUR DAILY AND PERIODIC COMMUNICATIONS, AND THROUGH REPORTS ON	
RELEVANT TOPICS PROVIDING INSIGHT INTO THE FORCES SHAPING THE	
CHARITABLE COMMUNITY. MEMBERS ARE ENGAGED THROUGH COMMITTEES, AD HOC	
GROUPS, ONLINE AND IN-PERSON EVENTS, AND AT OUR ANNUAL CONFERENCE WHERE	
THEY BRING THEIR THOUGHT LEADERSHIP AND EXPERTISE, AS WELL AS THEIR	
DESIRE TO FURTHER DEVELOP THEIR SKILLS AND KNOWLEDGE AND CONNECT WITH	
OTHER CHANGEMAKERS.	
DURING 2017, INDEPENDENT SECTOR CONTINUED TO SERVE AS THE "VITAL	
MEETING GROUND" FOR AMERICA'S CHANGE-MAKERS AND PROBLEM-SOLVERS,	
COMMITTED TO OUR FOUNDING ROLES AS A COMMUNITY BUILDER AND POLICY	
LEADER. IS BEGAN TO EXPAND THE WAYS IN WHICH WE ENGAGE CHANGEMAKERS AND	
BUILD COMMUNITY IN THE SECTOR, LAUNCHING NEW INITIATIVES IN 2017 THAT	
ARE HELPING ORGANIZATIONS AND INDIVIDUALS BUILD BRIDGES, IDENTIFY	
EVIDENCE-BASED SOLUTIONS, AND BETTER TELL THEIR STORIES. WE ALSO	
STRENGTHENED THE ADVOCACY VOICE OF THE SECTOR THROUGH CLOSER	
PARTNERSHIPS WITH OTHER INFRASTRUCTURE ORGANIZATIONS AND BY BEGINNING	
TO MOBILIZE GRASSROOTS ADVOCATES. TO FURTHER OUR ADVOCACY, WE HAVE ALSO	

Name of the organization Employer identification number INDEPENDENT SECTOR 52-1081024 BUILT A STRONGER RESEARCH BASE ON THE EFFECTS OF TAX POLICY ON CHARITABLE GIVING AND ON THE ECONOMIC IMPACT OF THE SECTOR: IN KEEPING WITH OUR FOCUS ON STRENGTHENING OUR CAPACITY FOR COMMUNITY ENGAGEMENT, THE OUR COMMON FUTURE CONFERENCE, HELD IN DETROIT IN 2017. MARKED THE TRANSITION OF OUR ANNUAL GATHERING FROM OUR TRADITIONAL "IS CONFERENCE" TO ONE THAT BETTER SERVES AS A VITAL MEETING GROUND FOR THE ENTIRE SECTOR. AT OUR COMMON FUTURE, WE ALSO ANNOUNCED UPSWELL, A NEW SOCIAL GOOD EXPERIENCE THAT WE BEGAN DESIGNING IN 2017. UPSWELL GROWS OUT OF THE TRADITION OF THE INDEPENDENT SECTOR CONFERENCE BRINGING TOGETHER CHANGEMAKERS IN A HIGHLY INTERACTIVE EXPERIENCE WHERE THEY WILL LEARN NEW SKILLS, BUILD DEEPER RELATIONSHIPS, BE OUT IN THE COMMUNITY, AND COLLABORATE ON ACTION-ORIENTED PROJECTS. EXPENSES \$ 429,220. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. COMMUNICATIONS INDEPENDENT SECTOR WORKS TO COMMUNICATE THE VALUE OF THE CHARITABLE COMMUNITY TO THE MEDIA, ELECTED OFFICIALS, THE PUBLIC, AND STAFF AT PUBLIC CHARITIES AND FOUNDATIONS WHILE EDUCATING ITS MEMBERSHIP AND AUDIENCES ACROSS THE SOCIAL GOOD SPACE ON EMERGING CHALLENGES, OPPORTUNITIES, AND TRENDS. IN 2017, COVERAGE OF IS ACTIVITIES APPEARED MORE THAN 1 800 TIMES IN NATIONAL OUTLETS INCLUDING CNN MONEY, THE WASHINGTON POST, FORBES, CHICAGO TRIBUNE, NBCNEWS.COM, MASHABLE, NPR, CNBC, AND YAHOO! FINANCE, IS ALSO GARNERED VISIBILITY IN TRADE PUBLICATIONS SUCH AS THE CHRONICLE OF PHILANTHROPY, THE NONPROFIT TIMES, NONPROFIT QUARTERLY, AND STANFORD SOCIAL INNOVATION REVIEW. MEDIA REPRESENTATIVES LOOK TO IS FOR EXPERTISE ON VOLUNTEERING, ETHICS AND ACCOUNTABILITY, AND PUBLIC POLICY ISSUES, PARTICULARLY ON ISSUES OF TAX AND FISCAL POLICY AFFECTING THE CHARITABLE COMMUNITY.

Name of the organization INDEPENDENT SECTOR	Employer identification number 52-1081024
	-3
INDEPENDENT SECTOR CONTINUES TO SERVE AS A SOURCE OF BEST PRACTICES.	
STRATEGIES, AND EMERGENT TRENDS TO THE CHARITABLE COMMUNITY, AND A	
FORUM TO DISCUSS THEM, PRESIDENT AND CEO DAN CARDINALI SPOKE AT MORE	
THAN 10 HIGH-VISIBILITY EVENTS IN 2017. WE ARE ALSO CONTINUALLY	——————————————————————————————————————
IMPROVING OUR DIGITAL PRESENCE, USER EXPERIENCE, CIRCULATION OF KEY	
INFORMATION, AND OPPORTUNITIES FOR ENGAGEMENT. IN 2017, WE LAUNCHED A	
NEW INDEPENDENTSECTOR.ORG AND TWO MICROSITES: GIVING100.ORG FOR A	
PUBLIC POLICY CAMPAIGN, AND COMMONFUTURE17.ORG FOR OUR ANNUAL	
CONFERENCE. WE ALSO LAUNCHED A NEW PODCAST-100 DAYS FOR GOOD-TO	
CHRONICLE THE NEWS AND POLICY UPDATES RELATED TO THE NEW ADMINISTRATION	
IN WASHINGTON. WE ALSO GREW AUDIENCES AND ENGAGEMENT BY 11.6 PERCENT ON	
SOCIAL MEDIA USING TWITTER, FACEBOOK, AND LINKEDIN. ONE OF THE BIGGEST	
CHANGES WE IMPLEMENTED IN 2017 WAS A MORE FOCUSED APPROACH ON	
STORYTELLING ABOUT THE CHARITABLE COMMUNITY THROUGH OUR BLOG WITH MORE	
FEATURE-LENGTH STORIES. THESE STORIES, AS WELL AS PRACTICAL AND	
EASY-TO-CONSUME PIECES, WERE FEATURED IN OUR DAILY MEMBERSHIP	
NEWSLETTER, DAILY DIGEST, OUR MONTHLY STORYTELLING NEWSLETTER, COMMON	
GOOD(S), AND OUR WEEKLY CONFERENCE RELATED NEWSLETTER, VISIONS.	
EXPENSES \$ 707,983. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.	
PROGRAMS AND PRACTICE (P&P) IN 2017, INDEPENDENT SECTOR REFINED ITS	
KEY PROGRAMMATIC AREAS TO ENSURE THEY ALIGN WITH IS' ORGANIZATIONAL	
DRIVERS OF COMMUNITY BUILDING AND PUBLIC POLICY.	
DEVELOPING A SECTOR NARRATIVE, INDEPENDENT SECTOR BEGAN DEVELOPMENT OF	
A NARRATIVE TO HELP CONVEY THE SECTOR'S POWER, ROLE, IMPACT IN	
IMPROVING AMERICAN CIVIL SOCIETY, WITH SPECIFIC FOCUS ON HOW TO REFRAME	-

"OUR COMMON FUTURE" CONFERENCE IN DETROIT. IS AND THE FETZER INSTITUTE

CO-DESIGNED A CONVERSATION GUIDE FOR THE DINNERS, DEVELOPED IN

PARTNERSHIP WITH LOCAL AND STATE INSTITUTIONS IN MICHIGAN.

YEAR-LONG FELLOWSHIP FOR 12 NONPROFIT AND PHILANTHROPIC LEADERS AGE 40

AND UNDER TO STRENGTHEN THEIR CAPACITY TO ADDRESS SOCIETY'S TOUGHEST

CHALLENGES. SINCE ITS INCEPTION, THE FELLOWS ALUMNI PROGRAM HAS GROWN

TO NEARLY 100 FORMER FELLOWS WITH A DIVERSE RANGE OF POSITIONS AND

SPECIALTIES IN ADDRESSING SOCIAL CHANGE. IN ADDITION, WE CONTINUED TO

IS CONTINUED THE AMERICAN EXPRESS NGEN FELLOWS PROGRAM, A

RECOGNIZE ONE HIGHLY ACCOMPLISHED SECTOR LEADER WHO HAS ALREADY

DEMONSTRATED SIGNIFICANT IMPACT IN ADDRESSING SOCIETY'S CRITICAL NEEDS

Employer identification number INDEPENDENT SECTOR 52-1081024 AS PART OF THE AMERICAN EXPRESS NGEN LEADERSHIP AWARD. TO DATE WE HAVE IDENTIFIED MORE THAN 35 FINALISTS WITH DISTINCT SOCIAL IMPACT AND HONORED EIGHT RECIPIENTS. ETHICS AND ACCOUNTABILITY: IN 2017, IS CONTINUED TO PROMOTE THE 'PRINCIPLES FOR GOOD GOVERNANCE AND ETHICAL PRACTICE'. SINCE ITS RELEASE IN FEBRUARY 2015, THE IS PRINCIPLES HAVE BEEN BROADLY DISSEMINATED ACROSS THE CHARITABLE SECTOR. IN 2017, THE PRINCIPLES WEBSITE LANDING PAGE (WWW.PRINCIPLESFORGOOD.COM) HAS AVERAGED NEARLY 3,500 PAGE VIEWS MONTHLY. IS BROUGHT THE PRINCIPLES TO NEW AUDIENCES THROUGH A SERIES OF ONLINE AND IN PERSON EDUCATIONAL EVENTS. IS PRESENTED THREE DIGITAL LEARNING EVENTS ON BOARD GOVERNANCE, CHARITABLE SOLICITATION LAWS, AND FINANCIAL OVERSIGHT. IS STAFF ALSO SPOKE AT THREE SECTOR CONFERENCES IN 2017, INCLUDING THE INSTITUTE FOR CORPORATE SOCIAL RESPONSIBILITY, THE YOUNG NONPROFIT PROFESSIONALS NETWORK ANNUAL CONFERENCE, AND THE GREATER WASHINGTON SOCIETY OF CPA'S NONPROFIT SYMPOSIUM. EXPENSES \$ 630,567. INCLUDING GRANTS OF \$ 0. REVENUE \$ 4,957. FORM 990, PART VI, SECTION A, LINE 6: IS HAS MEMBERS THAT HELP SUPPORT THE MISSION OF THE ORGANIZATION. FORM 990, PART VI, SECTION A, LINE 7A: THERE IS ONLY ONE CLASS OF VOTING MEMBERS. THE MEMBERSHIP HAVE THE AUTHORITY TO ELECT DIRECTORS OF THE ORGANIZATION OTHER THAN THE PRESIDENT. FORM 990, PART VI, SECTION A, LINE 7B:

THE MEMBERSHIP HAVE THE AUTHORITY TO APPROVE CHANGES IN THE ARTICLES OF

Name of the organization INDEPENDENT SECTOR	Employer identification number 52-1081024
INCORPORATION AND BY-LAWS, MEMBERSHIP DUES AND/OR DUES ASSESSMENT	
METHODOLOGY, MEMBERSHIP ELIGIBILITY CRITERIA, AFFIRM MAJOR POLICIES AND	
LEGISLATIVE ACTIONS BY THE BOARD, AS APPROPRIATE, AND ADOPT RESOLUTIONS ON	
NATIONAL ISSUES OF CONCERNS TO THE MEMBERSHIP, AS APPROPRIATE.	
*	
FORM 990, PART VI, SECTION B, LINE 11B:	
PRIOR TO FILING, THE FORM 990 IS PRESENTED TO INDEPENDENT SECTOR'S AUDIT	
COMMITTEE FOR REVIEW. THE CHIEF FINANCIAL OFFICER ALSO REVIEWS THE FORM	
990 IN DETAIL WITH THE PRESIDENT AND CHIEF EXECUTIVE OFFICER PRIOR TO	
OBTAINING THE CEO'S SIGNATURE ON THE DOCUMENT. THE FORM 990 IS ALSO	
PRESENTED TO THE FULL BOARD OF DIRECTORS FOR REVIEW IN ADVANCE OF FILING.	
IT IS DISTRIBUTED IN ADVANCE OF THE BOARD MEETING IN ORDER TO ENSURE THAT	====
DIRECTORS HAVE THE OPPORTUNITY FOR A MEANINGFUL REVIEW AND TO ALLOW ALL	
DIRECTORS THE OPPORTUNITY TO GAIN A FULL UNDERSTANDING OF THE DOCUMENT	
BEFORE IT IS FILED. INDEPENDENT SECTOR'S AUDITORS PARTICIPATE IN THE BOARD	
MEETING IN ORDER TO RESPOND TO ANY QUESTIONS THAT DIRECTORS MAY HAVE.	
0	
FORM 990, PART VI, SECTION B, LINE 12C:	
EACH YEAR, BOARD MEMBERS ARE ASKED TO REVIEW INDEPENDENT SECTOR'S CONFLICT)
OF INTEREST POLICY AND TO COMPLETE A CONFLICT OF INTEREST DISCLOSURE	
STATEMENT. AMONG OTHER THINGS, THE POLICY MAKES CLEAR THAT ALL DECISIONS OF	
THE BOARD, OFFICERS AND EMPLOYEES OF INDEPENDENT SECTOR ARE TO BE MADE	
SOLELY ON THE BASIS OF A DESIRE TO PROMOTE THE BEST INTERESTS OF THE	
ORGANIZATION AND THE PUBLIC GOOD. THE DISCLOSURE STATEMENT, IN TURN,	
REQUESTS THAT DIRECTORS IDENTIFY, TO THE BEST OF THEIR KNOWLEDGE,	
AFFILIATIONS WITH ORGANIZATIONS THAT MAY BE POTENTIALLY RELATED TO THE	
FINANCIAL OR OTHER SUBSTANTIVE OPERATIONS OF INDEPENDENT SECTOR. THEY ARE	
ALSO ASKED TO IDENTIFY CIRCUMSTANCES INVOLVING EITHER THEMSELVES, OR A	

Name of the organization INDEPENDENT SECTOR	Employer identification number 52-1081024
MEMBER OF THEIR EXTENDED FAMILY, THAT MAY BE CONSTRUED AS A CONFLICT OF	
INTEREST. IF SUCH CIRCUMSTANCE SHOULD ARISE SUBSEQUENT TO SUBMITTING THE	
DISCLOSURE STATEMENT, THE POLICY SETS FORTH AN ONGOING DISCLOSURE	
REQUIREMENT.	
AT THE STAFF LEVEL, INDEPENDENT SECTOR PERSONNEL ALSO ENSURE THAT THERE ARE	
NO CONFLICTS OF INTEREST WHEN CONSIDERING ENGAGEMENT OF A NEW VENDOR, IF A	
POTENTIAL CONFLICT IS IDENTIFIED, APPROPRIATE STEPS ARE TAKEN BOTH TO	
ASSESS THE NATURE OF THE POTENTIAL CONFLICT AND, SUBSEQUENTLY, TO ENSURE	
THAT THE POSSIBILITY OF AN ACTUAL CONFLICT IS MITIGATED. SUCH MITIGATION	
MAY BE ACHIEVED THROUGH THE RECUSAL OR FIREWALLING OF THE INDIVIDUAL IN	
QUESTION, THUS ENSURING THAT THE CONFLICT IS MANAGED AND THE LETTER AND	
SPIRIT OF THE CONFLICTS POLICY ARE UPHELD.	
IN ADDITION, WE NOTE THAT DURING THE ANNUAL AUDIT STAFF IDENTIFY AND	
DISCLOSE TO AUDITORS ALL KNOWN CONFLICTS OF INTEREST.	
D	
FORM 990, PART VI, SECTION B, LINE 15A:	
APART FROM THE ORGANIZATION'S PRESIDENT AND CHIEF EXECUTIVE OFFICER,	
INDEPENDENT SECTOR'S BOARD OFFICERS (CHAIR, VICE CHAIR, SECRETARY, AND	
TREASURER) DO NOT RECEIVE COMPENSATION FROM THE ORGANIZATION. AN ANNUAL	
COMPENSATION REVIEW PROCESS FOR THE CEO TAKES PLACE UNDER THE LEADERSHIP OF	
THE BOARD CHAIR AND EXECUTIVE COMMITTEE, AN OUTSIDE CONSULTANT IS RETAINED	
OR SALARY SURVEYS AND 990S ARE REVIEWED TO PROVIDE INDUSTRY COMPARABLE	
SALARY DATA. AN INTERMEDIATE SANCTIONS ANALYSIS AND RELATED DOCUMENTATION	
ARE ALSO COMPLETED. THE EXECUTIVE COMMITTEE HAS RESPONSIBILITY FOR MAKING	
FINAL RECOMMENDATIONS TO THE FULL BOARD OF DIRECTORS REGARDING THE	
PRESIDENT'S PERFORMANCE EVALUATION AND COMPENSATION. THE BOARD OF	

Name of the organization INDEPENDENT SECTOR	Employer identification number 52-1081024
DIRECTORS MAKES A FINAL DETERMINATION WITH REGARD TO THESE MATTERS.	
WITH REGARD TO STAFF COMPENSATION, THE PRESIDENT AND CEO, VICE PRESIDENTS,	
AND APPROPRIATE STAFF MANAGERS ALSO COMPLETE ANNUAL PERFORMANCE	
EVALUATIONS. FOR ALL STAFF OTHER THAN THE PRESIDENT AND CEO, IS UTILIZES	
INDUSTRY COMPARABLE DATA IN MAKING DETERMINATIONS REGARDING THE RANGE OF	
SALARIES. THE PRESIDENT AND CEO MAKES ALL FINAL DETERMINATIONS RELATIVE TO	
STAFF COMPENSATION.	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:	
AZ,CA,CO,CT,DC,FL,GA,HI,IL,KS,KY,MA,MD,ME,MI,MS,MN,NC,NH,NM,NY,OH,OK,PA,RI	
SC,TN,UT,VA,WA,WI,AK	
FORM 990, PART VI, SECTION C, LINE 19:	
INDEPENDENT SECTOR'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND	
FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC. THE ANNUAL AUDIT,	
990 AND 990T, BOARD OF DIRECTORS LIST, AND IS POLICIES (CONFLICT OF	
INTEREST, FINANCIAL RESPONSIBILITY, GIFTS AND ENTERTAINMENT, RECORDS	
RETENTION AND TRAVEL) ARE ALL AVAILABLE TO THE PUBLIC ON THE ORGANIZATION'S	
WEBSITE (WWW.INDEPENDENTSECTOR.ORG).	
·	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
INDEPENDENT CONTRACTOR:	
PROGRAM SERVICE EXPENSES 31,384.	
MANAGEMENT AND GENERAL EXPENSES 7,223.	
FUNDRAISING EXPENSES 473.	
TOTAL EXPENSES 39,080.	
CONSULTANT:	

2017.03040 INDEPENDENT SECTOR

Schedule O (Form 990 or 990-EZ) (2017)		Page
Name of the organization INDEPENDENT SECTOR		Employer identification number 52-1081024
PROGRAM SERVICE EXPENSES	651,954.	
MANAGEMENT AND GENERAL EXPENSES	150,042.	
FUNDRAISING EXPENSES	9,835.	
TOTAL EXPENSES	811,831.	
LEGISLATIVE ASSISANCE:		
PROGRAM SERVICE EXPENSES	168,644.	
MANAGEMENT AND GENERAL EXPENSES	38 _e 812.	
FUNDRAISING EXPENSES	2,544.	
TOTAL EXPENSES	210,000.	
SPEAKERS, SERVICE BUREAUS, AND OTHER:		
PROGRAM SERVICE EXPENSES	38,949.	
MANAGEMENT AND GENERAL EXPENSES	8,964.	
FUNDRAISING EXPENSES	588.	
TOTAL EXPENSES	48,501.	
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL	A 1,109,412.	
FORM 990, PAGE 6, PART VI, LINE 1 AND PAGE 7, PART VI	II, VOTING MEMBERS	
THE NUMBER OF VOTING MEMBERS SHOWN IN PART VI SECTION	N A LINE 1 DIFFERS	
FROM THE NUMBER OF DIRECTORS LISTED IN PART VII BECAU	JSE BOARD MEMBERS	
ARE INCLUDED IN PART VII IF THEY SERVED ON THE BOARD	AT ANY TIME DURING	
2016, INDEPENDENT SECTOR'S BOARD TERM BEGINS AT THE A	ANNUAL BUSINESS	
MEETING HELD DURING THE IS ANNUAL CONFERENCE IN THE E	FALL.	

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

Open to Public Inspection

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

2017

OMB No. 1545-0047

Employer identification number 52-1081024

> Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part

INDEPENDENT SECTOR

Name of the organization

Department of the Treasury Internal Revenue Service

Direct controlling 38,511,367, INDEPENDENT SECTOR Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. End-of-year assets (e) 2 451 929 Total income **©** DISTRICT OF COLUMBIA Legal domicile (state or foreign country) Primary activity BUILDING MANAGEMENT Name, address, and EIN (if applicable) of disregarded entity 1620 IS LLC - 54-3219877 20036 1602 L STREET NW WASHINGTON, DC Part II

Schedule R (Form 990) 2017	Schedule R (F				s for Form 990.	For Paperwork Reduction Act Notice, see the Instructions for Form 990.
						₹0.50 24
						260
Yes No		501(c)(3))				
entity?	entity	status (if section	section	foreign country)		of related organization
controlled	Direct controlling	Public charity	a)	Legal domicile (state or	Primary activity	Name, address, and EIN
(g)	(L)	(e)		(c)	(q)	(e)

52

Schedule R (Form 990) 2017

Part III

INDEPENDENT SECTOR

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

Page 2

r Percentage 3 Seneral or Yes No 9 Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) \equiv Disproportionate Yes No allocations? \equiv Share of end-of-year assets <u>(a</u> Share of total income £ Predominant income (related, unrelated, excluded from tax under sections 512-514) (e) Direct controlling entity 0 (C)
Legal
domicile
(state or
foreign Primary activity Name, address, and EIN of related organization <u>a</u>

Section 512(b)(13) controlled Yes No Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year. Percentage ownership Ξ Share of end-of-year assets **(**B) Share of total income Type of entity (C corp, S corp, or trust) (e) Direct controlling entity Legal domicile (state or foreign country) <u>ပ</u> Primary activity 9 Name, address, and EIN of related organization Part IV

Schedule R (Form 990) 2017

732162 09-11-17

Page 3

Part V.] Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more rela	ited organizations listed	n Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	/			<u>1</u>	
b Gift, grant, or capital contribution to related organization(s)				9	
c Gift, grant, or capital contribution from related organization(s)				-	
d Loans or loan quarantees to or for related organization(s)				7	
	******************************		***************************************	2 .	
e Loans of loan guarantees by related organization(s)			CONTRACTOR	e e	III
f Dividends from related organization(s)				+	
g Sale of assets to related organization(s)				10	
				두	
				÷	
i Lease of facilities, equipment, or other assets to related organization(s)				ï	
k Lease of facilities, equipment, or other assets from related organization(s)				÷	
∺				=	
m Performance of services or membership or fundraising solicitations by related organization(s)	ization(s)	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		-th	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	(s)uc			t,	
 Sharing of paid employees with related organization(s) 	***************************************			10	
					A.
p Reimbursement paid to related organization(s) for expenses	****************			5	
q Reimbursement paid by related organization(s) for expenses	***************************************			19	
r Other transfer of cash or property to related organization(s)	***************************************		100000000000000000000000000000000000000	+	
s Other transfer of cash or property from related organization(s)				1s	
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	ho must complete this	line, including covered r	elationships and transaction thresholds.		
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	volved	
(1)					
(2)					
(0)) 		
(4)					
(5)					
(9)					
732163 08-11-17			Schedule R (Form 990) 2017	R (Form	990) 201

Page 4

52-1081024

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) (b) (c) (d)	(q)	(0)	e) (p)	(t)	(b)	(9)	0	(i)	(k)
Name, address, and EIN of entity	Primary activity	micile oreign	rincome related, tax under	은 + ⁻ 를	Share of end-of-year	Dispropor- tionate allocations?	UBI box 20 lle K-1	General or managing partner?	Percentage ownership
			Sections 512-514) Yes No		622052	Yes No	(Form 1065)	Yes No	

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