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.

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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South Answers	<u>A F</u>	or th	e 2017 calendar year, or tax year beginning , 2017	, and ending						
Description Section	ь.	haak ii a	malicable		D					
Security	_	_	PENNSILVANIA SPOTLIGHT			32-04956	54			
PO BOX 54582 City of town, state or province, country, and 2/P or ferrege postal code Post										
City or town, state or province, country, and ZIP or froego postal code PAILADELPHIA, PA 19148 G. Criss and compiles 250,000. While the part of the part	L	Name	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E	E Telephone number				
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F Name and address of principal officer ERT.C. ROSSO PHILADELIPHIA, PA 19148 Tax-exempt status Sorie(3) Sorie(1) Model Factor Factor Model Factor			City or town, state or province, country, and ZIP or foreign postal code							
PO BOX 54582 PHILADELPHIA, PA 19148			THIBADBEHIA, TA 19140		G	Gross receipts \$	250,000.			
Tax-exemptristus Sot(p(s) X	Х		F Name and address of principal officer ERIC ROSSO) H(eturn for Yes X No			
Webster PASPOTITIGHT.ORG			PO BOX 54582 PHILADELPHIA, PA 19148	1	1		s included? Yes No			
Form of organization X Corporation Trust Association Other L Year of formation 201 M State of legal domicile PA	<u>I</u>	Tax-ex	rempt status 501(c)(3) X 501(c) (4) ◀ (insert no) 4947(a)(1) or 52̈́	7/	If "No," attach	a list (see instructions)			
Briefly describe the organization's mission or most significant activities SEE ATTACHMENT 1 2 Check this box ▶ if the organization discontinued its operations or disposed of more than example that the property of the powering body (Part VI, line 1a) 3 1 4 Number of notependent voting members of the governing body (Part VI, line 1a) 4 1 5 Total number of individuals employed in calendar year 2017 (Part VI, line 2a) 5 7 Total number of voting members of the governing body (Part VI, line 1b) 7 1 1 2018 5 5 2 6 Total number of voting members of the governing body (Part VI, line 1a) 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	J	Websi	te ▶ PASPOTLIGHT.ORG) H(c) Group exemption	number >			
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I Firm's androse = 7700 WISCONSIN AVE. NW. SOUTH 470 WASSINGTON DE 7000/	Use	Only								
May the IRS discuss this return with the preparer shown above? (see instructions)	May	/ the		.)		one no 202				

PAGE 1

Form 990 (2017)

For Paperwork Reduction Act Notice, see the separate instructions.

JSA 7E1020 1 000 4764ME 7165 Form 990 (2017)

PAGE 2



Part	Checklist of Required Schedules			
			Yes	No.
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	- ,:	X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		i	
	candidates for public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	1		
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	_	x	
	Part III.	5	^	
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			х
-	"Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	,	1	х
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	7		
8			ŀ	Х
9	complete Schedule D, Part III	8		
9	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or		l	
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9	ł	Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	┌┷┤	- 1	
	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 as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more		i	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		_X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		<u> X</u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	ا . ـ . ا		v
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.	12b		<u> </u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		$\frac{\lambda}{X}$
		14a		
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	1.45	Ì	
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	 		
. •	assistance to or for foreign individuals? 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 (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		T	
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	}	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		Х
		Form	990 r	20171

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Part	Checklist of Required Schedules (continued)			
	· ·		Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H			X_
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated	, ,		
	employees? If "Yes," complete Schedule J	23		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			.,
	through 24d and complete Schedule K If "No," go to line 25a			Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			
Ç	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			v
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	1 1		
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	256		х
20	If "Yes," complete Schedule L, Part I	25b		Λ_
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	1		
	current or former officers, directors, trustees, key employees, highest compensated employees, or	26		х
27	disqualified persons? If "Yes," complete Schedule L, Part II	20		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,		Ì	
	substantial 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,	21	_	
40	Part IV 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
С	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		Х
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		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		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 Part V, line 1	34_		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	}	ł	
		35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			•
	Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		J.	
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	

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Par				
	Check if Schedule O contains a response or note to any line in this Part V	•••	Yes	<u></u>
4-	Enter the number reported in Day 2 of Farm 1000. Fator 0 of not applicable		108	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			l
	Did the organization comply with backup withholding rules for reportable payments to vendors and	1 1		
·	reportable gaming (gambling) winnings to prize winners?	1c	X	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 2			1
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	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			l
	account)?	4a		X
b	If "Yes," enter the name of the foreign country ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			l
	(FBAR)			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			ł
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Х	
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or	ا ا	v	l
	gifts were not tax deductible?	6b	Х	
7				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7c		
	required to file Form 8282?	 ``		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
,	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
•	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	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		, i	
а	Initiation fees and capital contributions included on Part VIII, line 12	1 1		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter		.	
а	Gross income from members or shareholders			
b	,			
	against amounts due or received from them)			
	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 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	425		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			İ
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		ļ	
_	in a second seco			. :
	Enter the amount of reserves on hand	14a		Х
ı4a h	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>			
	m seel for meaning and and the selection and halfmanne in stall because and authorities and an entire and a selection and the selection an			

Par	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O	See in	struc	
	Check if Schedule O contains a response or note to any line in this Part VI	• • •		X
<u>S</u> ect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1		1
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar			
h	committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent	1		1 1
	Enter the number of voting members included in line 1d, above, who are independent	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	2		X
	any other officer, director, trustee, or key employee?	-		
3	Did the organization delegate control over management duties customarily performed by or under the direct	,		x
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		$\frac{\lambda}{x}$
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		<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during]
	the year by the following]
а	The governing body?	8a	Х	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	_8b_	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9_		X
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	<u>Code</u>)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	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		X
b				
12a		12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
-	rise to conflicts?	12b	X	
_	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
L		12c	1	x
13	describe in Schedule O how this was done	13		X
14	Did the organization have a written document retention and destruction policy?	14		$\frac{1}{x}$
	· · ·	 		
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15a		$\overline{\mathbf{x}}$
a	The organization's CEO, Executive Director, or top management official	15b	,	X
b	Other officers or key employees of the organization	130		-
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	40-		\tilde{x}
	with a taxable entity during the year?	16a		 ~ ,
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			'
	organization's exempt status with respect to such arrangements?	16b		<u> </u>
<u>secti</u>	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Other (explain in Schedule O)	501(0	:)(3)s	only)
4.0			1	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interpretable to the public describe the second of the second o	erest	policy	, and
	financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and record GARY GRUVER PO BOX 34566 WASHINGTON, DC 20043 202 962-7250	s >		
JSA			990	(2017)

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Part VII	Compensation	of	Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	and
	Independent Co	ontr	actors								

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	orga	nıza	tion	CO	mpen	sate	ed any current offic	er, director, or trus	tee
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	b office Individu	unle: er and	Pos heck ss pe	erson	than of the state	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1)MICHAEL HEALEY DIRECTOR/PRESIDENT	1.00	х		х				0.	0.	0
(2)ERIC ROSSO EXECUTIVE DIRECTOR	40.00			x				90,000.	0.	0
(3)						-				
(4)						_				
(5)		-		-			_			
(6)						_				
(7)			-	-	-	<u> </u>				
(8)				_			_			
(9)				_			-			<u></u>
(10)	<u> </u>			-						
(11)				-			-	<u> </u>		<u> </u>
(12)				-	-	-				
(13)										<u> </u>
(14)				[-					
		<u></u>				<u> </u>				

D	1
rage	

Part VII Section A. Officers, Directors, Tru	ustees. Ke	ev En	olar	ove	es.	and I	Hia	hest Compensat	ed Employ	ees (c	Page &
(A) Name and title	(B) Average hours per week (list any hours for related	(do not check more box, unless person officer and a directi				e than o	one an tee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations		(F) Estimated amount of other compensation from the
	organizations below dotted line)	1 as Da	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-I	VIISC)	organization and related organizations
		-									
				_							
									<u> </u>		
									-,		
											·
			<u> </u>								ı
1b Sub-total	ection A ,						* * *	90,000. 0. 90,000.		0.	0. 0.
Total number of individuals (including but not reportable compensation from the organization)	limited to t		liste				o re	eceived more than	\$100,000 o	f	
3 Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu											Yes No
4 For any individual listed on line 1a, is the sorganization and related organizations greated individual	eater than	\$15	0,0	00?) If	"Yes	3,"	complete Schedu	sation from le J for s	the uch	4 X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Yes	accrue co	mpen	satı	on 1	from	n any	un	related organization			5 X
Complete this table for your five highest com compensation from the organization Report c year											
(A) Name and business add	lress				_			(B) Description of se	rvices	С	(C) Compensation
							F				
							Ŧ				
Total number of independent contractors (in more than \$100,000 in compensation from the list.) SA				nited		thos	e li	isted above) who	received		5 000 0045

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Form	990 (2	PENNSYLVANIA SPOTLIGH	HT		32-0495	654 Page 9
Pai	rt VII	Statement of Revenue				
		Check if Schedule O contains a response or note to ar	ny line in this Part \	/III <u></u>	<u></u> .	<u></u>
	,		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns	250,000			
Program Service Revenue	2a b c d e f	All other program service revenue	0.			
d	3 4 5 6a b	Investment income (including dividends, interest, and other similar amounts)	0.			
	c d 7a b	Rental income or (loss)	0.			
Other Revenue	d 8a	Net gain or (loss)	0.			
Ö	b c 9a b	Less direct expenses	0.			
	10a	Net income or (loss) from gaming activities Gross sales of inventory, less returns and allowances	0.			
		Less cost of goods sold	0.) 00 mg &
	11a b c					
	d	All other revenue	0.		···	
	e 12	Total. Add lines 11a-11d	250,000.			

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

Check if Schedule O contains a response or note to any line in this Part IX (A) Total expenses (B) (C) (D) Fundraising Do not include amounts reported on lines 6b, 7b, Management and Program service 8b, 9b, and 10b of Part VIII. expenses general expenses expenses 1 Grants and other assistance to domestic organizations 0 and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic 0. individuals See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign 0 individuals See Part IV, lines 15 and 16 0. 4 Benefits paid to or for members Compensation of current officers, directors, 90,000. 90,000. 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 0 40,800 40,800 8 Pension plan accruals and contributions (include 0 section 401(k) and 403(b) employer contributions) 1,088 1,088 9 Other employee benefits 10,871. 10,871. 11 Fees for services (non-employees) 12,060 12,060 1,790 8,950 7,160. 6,475. 6,475. 0. 0 e Professional fundraising services. See Part IV, line 17, 0. f Investment management fees 9 Other (If line 11g amount exceeds 10% of line 25, column 95,000 95,000 (A) amount, list line 11g expenses on Schedule (a), ATCH . 2. 0. 12 Advertising and promotion 1,618. 869 749 Office expenses 74 74 Information technology 0 0 Occupancy 16 5,198. 5,198 Payments of travel or entertainment expenses 0 for any federal, state, or local public officials 774 774 Conferences, conventions, and meetings 19 0 Interest 0. Payments to affiliates 21 2,000. 2,000 Depreciation, depletion, and amortization 0. 23 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) 2,651. aBANK/PAYROLL FEES 2,651. 1,343. **b**INSURANCE 1,343. cMEDIA 22,786. 22,786 e All other expenses . 301,688. 280,614 21,074 25 Total functional expenses Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here following SOP 98-2 (ASC 958-720) 0

JSA 7E1052 1 000

Part X Balance Sheet

		Check if Schedule O contains a response or	note to any line in this Pa	art X		
		,		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		68,837.	1	18,564.
	2	Savings and temporary cash investments		0.	2	0.
	3	Pledges and grants receivable, net		0.	3	0.
	4	Accounts receivable, net		0.	4	0.
	5	Loans and other receivables from current and fo	rmer officers, directors,	· · · ·	-	
		trustees, key employees, and highest con	npensated employees	_	_	
		Complete Part II of Schedule L Loans and other receivables from other disqualified person		0.	5	0.
	6	Loans and other receivables from other disqualified persor	ns (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and sponsoring organizations of section 501(c)(9) volunt				
,n		organizations (see instructions) Complete Part II of Schedu		0.	6	0.
Assets	7	Notes and loans receivable, net		0.	7	0.
Ass	8	Inventories for sale or use		0.	8	0.
•	9	Prepaid expenses and deferred charges		0.	9	0.
	10 a	Land, buildings, and equipment cost or				i
		other basis Complete Part VI of Schedule D				
	b	Less accumulated depreciation		9,000.		
	11	Investments - publicly traded securities		0.	11	0.
	12	Investments - other securities See Part IV, line 11.			12	0.
	13	Investments - program-related See Part IV, line 11			13	0.
	14	Intangible assets			14	0.
	15	Other assets See Part IV, line 11		0.	15	0.
	16	Total assets. Add lines 1 through 15 (must equal lii		77,837.		25,564.
	17	Accounts payable and accrued expenses			17	0.
	18	Grants payable		0.	18	0.
	19	Deferred revenue	0.	19	0.	
	20	Tax-exempt bond liabilities			20	0.
	21	Escrow or custodial account liability Complete Part			21	<u> </u>
Liabilities	22	Loans and other payables to current and form				i .
ij		trustees, key employees, highest compensa		-		0.
Liat		disqualified persons Complete Part II of Schedule L		0.	22	0.
_	23	Secured mortgages and notes payable to unrelated		- '	23	0.
	24	Unsecured notes and loans payable to unrelated the			24	<u> </u>
	25	Other liabilities (including federal income tax, parties, and other liabilities not included on lines 1	-			
		•	, · · ·	585.	25	0.
	26	of Schedule D	• • • • • • • • • • • • • • • • •	585.		0.
	20	Organizations that follow SFAS 117 (ASC 958), cl	hook hore N X and		20	
S		complete lines 27 through 29, and lines 33 and 34	4.			·
ŭ	27	Unrestricted net assets		77,252.	27	25,564.
<u>ala</u>	28	Temporarily restricted net assets		0.	28	0.
9	29	Permanently restricted net assets		0.	29	0.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), (
-		complete lines 30 through 34.				
ţ	30	Capital stock or trust principal, or current funds		1	30	
SSe	31	Paid-in or capital surplus, or land, building, or equip	ment fund		31	
Ž	32	Retained earnings, endowment, accumulated incom	ne, or other funds		32	
Se	33	Total net assets or fund balances		77,252.	33	25,564.
	34	Total liabilities and net assets/fund balances	<u>, , , , , , , , , , , , , , , , , , , </u>	77,837.	34	25,564.
						Form 990 (2017)

orm 99	90 (2017)				Pa	ge 1 Z		
Part	XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI							
1	Total revenue (must equal Part VIII, column (A), line 12)	1				000.		
2	Total expenses (must equal Part IX, column (A), line 25)	2		301,688.				
3	Revenue less expenses Subtract line 2 from line 1	3				588.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		77,252.				
5	Net unrealized gains (losses) on investments	5				0.		
6	Donated services and use of facilities	6				0.		
7	Investment expenses							
8	Prior period adjustments	8				0.		
9	Other changes in net assets or fund balances (explain in Schedule O)	9				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			25,5	564.		
Part	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 X Cash Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplaın	ın			- 1		
	Schedule O					لن_		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		L	2a		X_		
	If "Yes," check a box below to indicate whether the financial statements for the year were con	piled	or			. (
	reviewed on a separate basis, consolidated basis, or both							
	Separate basis Consolidated basis Both consolidated and separate basis			•				
b	Were the organization's financial statements audited by an independent accountant?			2b		X		
	If "Yes," check a box below to indicate whether the financial statements for the year were audi]		
	separate basis, consolidated basis, or both					.		
	Separate basis Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for	oversi	ght					
	of the audit, review, or compilation of its financial statements and selection of an independent acc			2c				
	If the organization changed either its oversight process or selection process during the tax year, e					1		
	Schedule O							
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as se	t forth	ın					
	the Single Audit Act and OMB Circular A-133?]	3a		<u> </u>		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	ergo	the					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	dits_		3b				

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

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

Section 527 organizations Complete Part I-A only

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

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

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

	(see separate instructions), ther		, , (,	,	
	Section 501(c)(4), (5), or (6) orga	anizations Complete Part III			
	e of organization			· · · ·	ntification number
	NSYLVANIA SPOTLIGHT			32-049	
Pa		organization is exempt under			
1	· · · · · · · · · · · · · · · · · · ·	organization's direct and indirect	political campaign a	activities in Part IV (see in	nstructions for
	definition of "political campa				
2		xpenditures (see instructions)			
		campaign activities (see instruction			
Pai		organization is exempt under			
1		cise tax incurred by the organizati			
2		cise tax incurred by organization r			
3	-	a section 4955 tax, did it file Form			
					Yes No
	If "Yes," describe in Part IV				
Pai	t I-C Complete if the c	organization is exempt under	r section 501(c), e	except section 501(c)(3	5)
1		expended by the filing organization			
					
2		ng organization's funds contribute			
		es			
3		enditures Add lines 1 and 2 E			
					
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No
5		and employer identification num s For each organization listed, e			
		ributions received that were proi			
		nd or a political action committee			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) Hame	(5) / (55)	(5) =	filing organization's	contributions received and
	•			funds If none, enter -0-	promptly and directly
	1				delivered to a separate political organization if
					none, enter -0-
			 		
1)			4		
			 		
2)			-{		
			 		·
3)			-[
			 	 	
4)			4		
			ļ.————	 	
5)			4		
			 	 	
6)		<u> </u>	-		
	Dada di Anni				

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

Schedule C (Form 990 or 990-EZ) 2017

Schedule C (Form 990 or 990-EZ) 2017

Grassroots ceiling amount
 (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2017

During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year?			An	nount	
legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
referendum, through the use of Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?. Media advertisements?					
Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?. Media advertisements?					
Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Grants to other organizations for lobbying purposes?					
Direct contact with legislators, their staffs, government officials, or a legislative body?					
Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Other activities? Total Add lines 1c through 1i					
Total Add lines 1c through 1i					
Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912					
If "Yes," enter the amount of any tax incurred under section 4912					
If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	-			·	
If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	-				
TIBILE Complete if the exampleation is example under coetion ED4/aV/A coetion ED4/aV/A					
art III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5 501(c)(6).	5), or s	ectio	n		
				Yes	Ti
Were substantially all (90% or more) dues received nondeductible by members?			1	X	十
Did the organization make only in-house lobbying expenditures of \$2,000 or less?				X	十
Did the organization agree to carry over lobbying and political campaign activity expenditures from the				_	
art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5)					
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR				e 3, is	S
answered "Yes."	•		•		
Dues, assessments and similar amounts from members	[1			
Section 162(e) nondeductible lobbying and political expenditures (do not include amounts					
political expenses for which the section 527(f) tax was paid).					
Current year	L	2a			
Carryover from last year		2b			
Total		2c			
Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues.		3			
If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of					
excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby		[
and political expenditure next year?		4			
Taxable amount of lobbying and political expenditures (see instructions)		5			
art IV Supplemental Information					-

Schedule C (Form 990 or 990-EZ) 2017

Page 4

Part IV Supplemental Information (continued)

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number PENNSYLVANIA SPOTLIGHT 32-0495654 Organizations Maintaining Donor Advised Funds 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 Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) . . Aggregate value at end of year. Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation Held at the End of the Tax Year easement on the last day of the tax year 2a 2b h 2c Number of conservation easements on a certified historic structure included in (a) C Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items 1a If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

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Schedule D (Form 990) 2017

	dule D (Form 990) 2017								Page 2
Par	t III Organizations Maintainin								
3	Using the organization's acquisition collection items (check all that apply		other recor	ds, check	any of th	e followi	ng that are a sig	nificant use	e of its
а	Public exhibition	•	d [Loan or	r exchange	e program	ıs		
b	Scholarly research		e	Other	_				
C	Preservation for future genera	ations	•						
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part								
	XIII								
5	During the year, did the organization						_		
	assets to be sold to raise funds rathe		ained as pa	rt of the or	rganizatior	i's collect	ion?	Yes	No
Par	t IV Escrow and Custodial Arr Complete if the organization 990, Part X, line 21		s" on Form	990, Pa	rt IV, line	9, or rep	oorted an amoun	t on Form	1
1a	Is the organization an agent, trustee	e, custodian or othe	er intermed	ary for co	ntributions	or other	assets not		
	included on Form 990, Part X?							Yes	No
b	If "Yes," explain the arrangement in	Part XIII and comp	olete the fol	owing table	e	1	A == a · · mt		
_	Paginning halance					 	Amount		
	Beginning balance								
	Additions during the year					1			
e	Distributions during the year					 			
1	Ending balance						account liability?	Yes	No.
	Did the organization include an amount of "Yes," explain the arrangement in								No
		Part Alli Check in	ere ii trie ex	pianation	las been p	rovided o	H Fait Alli	<u> </u>	
Par	Complete if the organization	on answered "Ve	" on Form	990 Par	rt IV line	10			
	Complete ii the organization	(a) Current year	(b) Prior		(c) Two year		(d) Three years back	(e) Four ye	are back
	<u> </u>	(a) Current year	(6) 1 110	year	(0) 100 300	II DUCK	(a) Three years back	(c) i oui ye	
1 a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains,								
	and losses								
d	Grants or scholarships								
е	Other expenditures for facilities		•						
	and programs								
f	Administrative expenses								
g	End of year balance	<u></u>							
2	Provide the estimated percentage of	of the current year	end balance	e (line 1g, c	column (a))	held as			
а	Board designated or quasi-endowme		_%						
b	Permanent endowment	% ′							
С	Temporarily restricted endowment								
	The percentages on lines 2a, 2b, ar	· ·							
3 a	Are there endowment funds not in t	he possession of th	ne organiza	tion that a	re held an	id adminis	stered for the	(V-	- N-
	organization by							Ye	s No_
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" on line 3a(ii), are the related	-						3b	
4	Describe in Part XIII the intended us		tion's endov	vment fund	ds			·	
Par	Land, Buildings, and Equip Complete if the organization	oment. ion answered "Ye	s" on Forn	n 990. Pa	art IV. line	11a Se	e Form 990. Pa	t X. line 1	0
	Description of property	(a) Cost or	other basis	(b) Cost or	other basis	(c) Accu	mulated (d	i) Book value	
4.0	Land	(inves	tment)	(oth	ier)	depred	ciation		
1a	Land								
b	Buildings								
c C	Leasehold improvements								
d	Equipment		10,000.				3,000		,000.
e Tota	Other	(d) must say 5		V column	(B) Ino 40	20.1			,000.
Tota	i. Add lines ta through te (Column	(u) must equal Forn	1 990, Pan	A, COIUITIN	(D), IITIE TO	<i>/u /</i> .	<u></u> >	<u>_</u>	,000.

_			•
₽	20	•	٠.

Part VII	Investments - Other Securities. Complete if the organization answered	t "Ves" on Form 99) Part IV line 11h See Form 990) Part X line 12
			 	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year man	ket value
(1) Financia	al derivatives			
	-held equity interests			
			 	
(A)				
(B)		<u> </u>	-	
(C)				
(D)	_			
(E) (F)				
(G)		-		
—(()				
	n (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII		<u> </u>	I	
urt viii	Complete if the organization answered	d "Yes" on Form 990), Part IV, line 11c See Form 990), Part X, line 13
	(a) Description of investment	(b) Book value	(c) Method of value	
	(4)	(2) 555 (2.55	Cost or end-of-year man	
(2)				
(3)	•			
(4)				
(5)				
(6)				
(7)				
(8)				
_(9)				
	n (b) must equal Form 990, Part X, col (B) line 13)			
Part IX	Other Assets. Complete if the organization answered	l "Yes" on Form 990), Part IV, line 11d See Form 990), Part X, line 15
	(a) De	scription		(b) Book value
(1)				
(2)				
_(3)				
_(4)				
_(5)				
<u>(</u> 6)				
_(7)			·	<u> </u>
(8)				ļ <u>-</u>
<u>(9)</u>				
	umn (b) must equal Form 990, Part X, col (B) I	ine 15)	<u>.,.,</u> ,.,.,	
Part X	Other Liabilities.	1 UVU 00/	N Dard IV June 44 a. 446 Can Fo	000 Dad V
	Complete if the organization answered line 25	Tres on Form 990	o, Partiv, line Tie or Tit See Fo	rm 990, Part X,
1.	(a) Description of liability	(b) Book valu	ue	
	al income taxes			
_(2)				
(3)				
_(4)				
_(5)	<u> </u>			
_(6)				
(7)				
(8)				
_(9)				
	nn (b) must equal Form 990, Part X, col (B) line 25)			
2. Liability fo	or uncertain tax positions. In Part XIII, provide the	text of the footnote to	the organization's financial statements t	hat reports the

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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

	PENNSILVANIA SPOTLIGHT			32-045	
_	e D (Form 990) 2017	4L D	Parramia mas Br		Page 4
art	Reconciliation of Revenue per Audited Financial Statements Wi	ın K	cevenue per Ki	eturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV				
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		ı		
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2 <u>b</u>			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	<u> </u>		
b	Other (Describe in Part XIII)	4b			
	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) .			5	
art	^	ith E	Expenses per	Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV	, line	e 12a		
4	Total expenses and losses per audited financial statements			1	
1	Amounts included on line 1 but not on Form 990, Part IX, line 25				
2		2a			
a	Donated services and disc of lacinities	2b	·		
b	Filor year adjustments	2c			
С					
d	Other (Describe in Part XIII)				
e	Add lines 2a through 2d			3	
3	Subtract line 2e from line 1			••	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	40			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a 4b	·		
b	Other (Describe in Part XIII)				
_	Add lines 4a and 4b			4c	· · · · · · · · · · · · · · · · · · ·
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) XIII Supplemental Information.	• •		3	
rovid , Par	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, P XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to pr	ovidi	v, lines 1b and 2 le any additional i	nformation	e 4, Part X, line
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				_	
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Schedule D (Form 990) 2017

Part XIII Supplemental Information (continued)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

PENNSYLVANIA SPOTLIGHT

Employer identification number 32-0495654

PART VI, SECTION B, LINE 11B PRIOR TO FILING THE FORM 990, THE ORGANIZATION'S OUTSIDE LEGAL COUNSEL REVIEWS THE TAX RETURN PREPARED BY AN OUTSIDE CPA FIRM.

PART VI, SECTION C, LINE 19

THE ORGANIZATION PROVIDES THE 990 TAX RETURN UPON REQUEST.

ATTACHMENT

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

TO EDUCATE THE PUBLIC ON ISSUES THAT ENHANCE THE WELL-BEING OF MIDDLE-CLASS FAMILIES AND WORKERS HERE IN PENNSYLVANIA. WE'RE GIVING A VOICE TO THE IMPORTANT ISSUES THAT AFFECT OUR DAILY LIVES AND WE'RE SHINING A LIGHT ON THE DEEP-POCKETED SPECIAL INTERESTS ACTING AGAINST THE BEST INTEREST OF PENNSYLVANIA RESIDENTS.

ATTACHMENT

FORM 990, PART IX - OTHER FEES

DESCRIPTION	(A) TOTAL FEES	(B) PROGRAM SERVICE EXP.	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING EXPENSES
COMMUNICATIONS SERVICES	95,000.	95,000.		
TOTALS	95,000.	95,000.		