Form **990**

Return of Organization Exempt From Income Tax

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

, 20

Open to Public Inspection

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990 for instructions and the latest information. , 2018, and ending A For the 2018 calendar year, or tax year beginning

В	Check if a	policable	C Name of organization		32-04956				
_	_ `		PENNSYLVANIA SPOTLIGHT						
<u> </u>	Addre		Doing business as		E Talachana ayanbar				
L	Name	change	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone numbe				
	Initial	return	PO BOX 54582		(412) 837-	8421			
	Final	return/ nated	City or town, state or province, country, and ZIP or foreign postal code						
	Amen	nded	PHILADELPHIA, PA 19148		G Gross receipts \$	335,000.			
X		cation	F Name and address of principal officer ERIC ROSSO		H(a) Is this a group re subordinates?	eturn for Yes X No			
Щ.		···y	PO BOX 54582, PHILADELPHIA, PA 19148	. 11	H(b) Are all subordinate	s included? Yes No			
$\overline{}$	Tax-ex	empt st		or 527	If "No," attach	a list (see instructions)			
1	Websi		PASPOTLIGHT.ORG	- ' 	H(c) Group exemption	number -			
<u></u>		of organ		L Year of forma		te of legal domicile PA			
Ď	art l		mmary						
_				TTACHMENT 1					
	1	brieny	describe the organization's mission or most significant activities						
Governance									
Ē				1 . 6					
o e	2		this box if the organization discontinued its operations or dispose		1 _	1			
			er of voting members of the governing body (Part VI, line 1a)						
Ş	4	Numb	er of independent voting members of the governing body (Part VI, line 1b) .						
Ę	5	Total	number of individuals employed in calendar year 2018 (Part V, line 2a)						
Activities &	6	Total	number of volunteers (estimate if necessary)						
ď	7a	Total	unrelated business revenue from Part VIII, column (C), line 12		_				
	b	Net u	nrelated business taxable income from Form 990-T, line 38	<u> </u>		_			
					Prior Year	Current Year			
a	8	Contr	ibutions and grants (Part VIII, line 1h)		250,000.	. 335,000.			
ž	9	Progra	am service revenue (Part VIII, line 2g)		0.	0.			
Revenue	10	Invest	tment income (Part VIII, column (A), lines 3, 4, and 7d)	[0.	0.			
œ	11	Other	revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	·			
	12		revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12).		250,000.	. 335,000.			
	13		s and similar amounts paid (Part IX, column (A), lines 1-3)		0.	. 0.			
	14		its paid to or for members (Part IX, column (A), line 4)		0.	. 0.			
	14-		es, other compensation, employee benefits (Part IX, column (A), lines 5-10).		142,759.	. 148,143.			
Expenses	162		A Control of the Cont	·	0 .	. 0.			
per			fundraising expenses (Part IX, column (A), line 1 ip) RECEIVE	ון י יט					
ñ	17		expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		158,929	. 107,651.			
	18	Total	expenses Add lines 13-17 (must equal Part IX, column (A), (45) 1.9 20	18 T	301,688				
	19		nue less expenses Subtract line 18 from line 12	9 · · · · · · ·	-51,688	. 79,206.			
20		Kevei			nning of Current Year				
sts c	20	Total	OGDEN, L	<u> </u>	25,564				
\sse	20 21 22		assets (Part X, line 16)	.	0.				
25	21		liabilities (Part X, line 26)		25,564	. 104,770.			
			ssets or fund balances Subtract line 21 from line 20	· · · · · · · · · · · · · · · · · · ·		<u></u>			
	art II		perjury, _declare that I have examined this return, including accompanying schedi	ules and statements	and to the best of my	v knowledge and belief it is			
tru	idei pei	ect, and	complete Declaration of preparer (other than officer) is based on all information of which	ch preparer has any	knowledge	1			
			30-1-		11/12/	' Pg			
Sig	an	D i	Signature of officer		Date				
He	-	[(- 1-	IVE DIRECTO	מו				
		Date 1	Type or print name and title Type preparer's name Preparer's signature	Date		PTIN			
Pai	d	1 "		1.0.16.1	Check if	P00956578			
	parer	AMY	C GILBERT CPA CYA	10.10					
	e Only		siname ►GILBERT & WOLFAND, P.C.		Firm's EIN > 52-	-1702014			
	•	Firm	saddress ▶2201 WISCONSIN AVE, NW SUITE 320 WASHINGTON, DC 20007		Phone no 202	2-342-6000			
			scuss this return with the preparer shown above? (see instructions)	<u> </u>		X Yes No			
Fo	r Pape	rwork	Reduction Act Notice, see the separate instructions.			Form 990 (2018)			

JSA 8E1010 1 000 4764ME 7165

PENNSYLVANIA SPOTLIGHT

For	m 990 (2018) Pag	e 2
P	Statement of Program Service Accomplishments	
_		X
1	Briefly describe the organization's mission ATTACHMENT 1	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	٧o
_	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?	40
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured	bv
•	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	ers,
	the total expenses, and revenue, if any, for each program service reported	
4a	(Code) (Expenses \$190,840 including grants of \$) (Revenue \$)	
	EDUCATING THE PUBLIC ABOUT ATTEMPTS TO DIVIDE OUR STATE.	
	PENNSYLVANIANS DESERVE AN INCLUSIVE VISION THAT VALUES ALL PEOPLE,	_
	CREATES A STRONG MIDDLE-CLASS AND DOESN'T FALL INTO THE DIVISIVE	
	POLITICS WE'VE SEEN EMERGE ACROSS THE NATION.	—
		—
4b	(Code) (Expenses \$ 20,280. including grants of \$) (Revenue \$)	_
	PENNSYLVANIA POLITICAL ACTIVITY.	
		—
_	/O	
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)	
		—
		—
		—
		—
		_
4d	Other program services (Describe in Schedule O)	
	(Expenses \$ including grants of \$) (Revenue \$ _)	
4e	Total program service expenses ▶ 211,120.	
	AAA	



1 is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yecomplete Schedule A. 2 is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition candidates for public office? If "Yes," complete Schedule C, Part I. 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501 election in effect during the tax year? If "Yes," complete Schedule C, Part II. 5 is the organization as section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership due assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part II. 6 Did the organization antian any donor advised funds or any similar funds or accounts for which done have the right to provide advice on the distribution or investment of amounts in such funds or accounts "Yes," complete Schedule D, Part II. 7 Did the organization receive or hold a conservation easement, including easements to preserve open spathe environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III. 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes, complete Schedule D, Part III. 9 Did the organization or prot an amount in Part X, ine 21, for escrow or custodial account liability, serve a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, debt negotiation services? If "Yes," complete Schedule D, Part VII. 10 Did the organization, directly or through a related organization, hold assets in temporarily restrict endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part VII. 10 Did the organization in peror an amount for land, buildings, and equipment in Part X, line 10? If "Yes complete Schedule D, Part			Yes	No
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Did the organization receive or hold a conservation easement, including easements to preserve open spatitive environment, historic land areas, or historic structures? If "Yes, complete Schedule D, Part II	٠. ا	6		Х
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Did the organization, directly or through a related organization, hold assets in temporarily restrict endowments, permanent endowments, or quasi-endowments? If "yes," complete Schedule D, Part V		9		x
endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VII, VIII, IX, or X as applicable Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Ye complete Schedule D, Part VI		<u> </u>		
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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		11a	x	
of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		114		
Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or most its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assignment of the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part IX. Did the organization's separate or consolidated financial statements for the tax year include a footnote that address the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X. Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X. Nas the organization included in consolidated, independent audited financial statements for the tax year? "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is option is the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E. Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking pusiness, investment, and program service activities outside the United States, or aggregioneign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts II and IV. Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV. Did the organization report a total of more than \$15,000 of expenses for professional fundraising services Part IX, column (A), line 3 and the organization report more than \$15,000 of expenses for professional fundraising services Part VIII, lines 6 and 11e? If "Yes," complete Schedule G, Part III. Did the organization report more than \$15,000 of gross		11b		x
If its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		110		
Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assist reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		11c		x
reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	}	110		
Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		11d		x
Did the organization's separate or consolidated financial statements for the tax year include a footnote that address the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	}	11e		X
the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," comp. Schedule D, Parts XI and XII		116		
Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," comp. Schedule D, Parts XI and XII		11f		x
Schedule D, Parts XI and XII				
Was the organization included in consolidated, independent audited financial statements for the tax year? "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is option is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	<i>ne</i>	12a		x
"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is option is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	, · ·	124		
Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		425		x
Did the organization maintain an office, employees, or agents outside of the United States?		12b		X
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 aggregation or investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		13		X
fundraising, business, investment, and program service activities outside the United States, or aggregation foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		14a		~
foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV				
Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		446		х
for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		14b		-
Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or oth assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		4.5		х
assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		15	-	_ ^
Did the organization report a total of more than \$15,000 of expenses for professional fundraising services Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		4.0		х
Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		16		_^
Did the organization report more than \$15,000 total of fundraising event gross income and contributions Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		١		v
Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		17_		Х
Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9 If "Yes," complete Schedule G, Part III				,,
If "Yes," complete Schedule G, Part III		18		Х
Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		19		X
		20a		Х
If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		20b		
Did the organization report more than \$5,000 of grants or other assistance to any domestic organization	or			<u>.</u> .
domestic government on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II		21	<u> </u>	X
000		Form	990	(2018

Part	V Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			••
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
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			v
	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	24a		х
L	through 24d and complete Schedule K If "No," go to line 25a	24a 24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
C		24c		
ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?			
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	-		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
_	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or 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 contributor or employee thereof, a grant selection committee member, or to a 35% controlled			v
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<u>x</u> _
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	20-		х
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28b		х
•	Schedule L, Part IV	200		
·	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		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		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			v
	or IV, and Part V, line 1	34		$\frac{x}{x}$
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	356		
20	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	35b		<u> </u>
36	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
27	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
70	19? Note. All Form 990 filers are required to complete Schedule O	38	x	
Part				
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>	<u> </u>	
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 5			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		.,	
	reportable gaming (gambling) winnings to prize winners?	1c	X	
		Form	33U	(2018)

Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			(
	Statements, filed for the calendar year ending with or within the year covered by this return. 2			
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 e-file (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	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 account)?	4a		_ X
b	If "Yes," enter the name of the foreign country			1
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (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		Х
C	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	<u>X</u>	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	X	
7	Organizations that may receive deductible contributions under section 170(c).			
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	_	-	
	required to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	-	
	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 7h		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	- ' ''	-	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8		
9	sponsoring organization have excess business holdings at any time during the year?		\neg	
		9a		
		9b	$\neg \neg$	
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12		`	i
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		ļ	j
11	Section 501(c)(12) organizations. Enter			4
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			1
	against amounts due or received from them)			
12a	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			ļ
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			j
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	.]	ļ	
b	Enter the amount of reserves the organization is required to maintain by the states in which			1
	the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		<u> </u>
	If "Yes," see instructions and file Form 4720, Schedule N			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		_ <u>X</u>
	If "Yes," complete Form 4720, Schedule O		i	

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 thr response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes	ough 7b below,	and See in	for a	"No" tions
	Check if Schedule O contains a response or note to any line in this Part VI				X
Casti				• •	1
Secti	on A. Governing Body and Management			Yes	No
		40 1			-
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 1			١,
	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				Ι,
	committee, explain in Schedule O	9			}
b	Enter the number of voting members included in line 1a, above, who are independent	_1b 1			1
2	Did any officer, director, trustee, or key employee have a family relationship or a business rel	ationship with			;
	any other officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or ur				ļ
_	supervision of officers, directors, or trustees, or key employees to a management company or other		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was fi		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's		5		X
_	Did the organization have members or stockholders?		6		X
6					
7a	Did the organization have members, stockholders, or other persons who had the power to el		7a		х
	one or more members of the governing body?		/ a		
b	Are any governance decisions of the organization reserved to (or subject to approval		-		х
	stockholders, or persons other than the governing body?		7b		<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions under	ertaken during			
	the year by the following				
а	The governing body?		8a	<u> </u>	
b	Each committee with authority to act on behalf of the governing body?		8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot				
•	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 Inte		Code)	
				Yes	No
100	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		_		
D			10b		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt process and process of the consistent with the organization of the consistent with the c		11a	-	X
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before fi	ling the form?.			
	Describe in Schedule O the process, if any, used by the organization to review this Form 990		420	~x^-	l
	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests to	that could give		v	
	rise to conflicts?		12b	X	├
С	Did the organization regularly and consistently monitor and enforce compliance with the p	olicy? If "Yes,"			
	describe in Schedule O how this was done		12c		X
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 ar		-	_	
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation				
	The organization's CEO, Executive Director, or top management official		15a		X
a			15b		Х
b	Other officers or key employees of the organization		.55		<u> </u>
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)				;
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar				X
	with a taxable entity during the year?		16a		A .
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				
	organization's exempt status with respect to such arrangements?		16b		L
Secti	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 (1024 or 1024-A if applicable),	990, and 990-T	(Sec	tion 5	501(c)
	(3)s only) available for public inspection Indicate how you made these available Check all that ap	ply	, = = =		(3)
	Own website Another's website X Upon request Other (explain in Sch				
40	Describe in Schedule O whether (and if so, how) the organization made its governing document	•	araet	nolic	, and
19		is, commet or me	CICOL	Polic)	, 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 lary gruver po box 34566 WASHINGTON, DC 20043	Jooks and record	5 P		

Form **990** (2018)

FUIII 330 (2010)											
Part VII	Compensation	of	Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	and
	Independent Co	ontr	actors								
	Check if Schedule	e O e	contains a r	esponse or n	ote to any line	e in this	s 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	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 week (list any hours for related organizations below dotted line)	box office Individu	unle	ss pe	ition more	han both ust Highest compensated employee	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	x		x				0.	0.	0.
(2)ERIC ROSSO	40.00		_	^					0.	
EXECUTIVE DIRECTOR	0.	1		х				93,000.	0.	0.
(3)										
(4)										
(5)										_
(6)					ļ <u>.</u>					
(7)										
(8)	-									
(9)			-							
(10)		-								
(11)										
(12)		-								
(13)							-			
(14)					-					

Form 990 (2018)

JSA

Part VII Section A. Officers, Directors, Tr	ustees, Ke	y Em	iplo			and F	ligi	-			
(A) Name and title	(B) Average hours per week (list any hours for	box, office	unles r and	Pos heck ss pe	rson Litect	than o	an ee)	(D) Reportable compensation from the	(E) Reportable compensation fr related organizations	Estin om amou	nated unt of ner nsation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MIS	organi and re	ızatıon
						ä					
					 -						_
		-									
											
1b Sub-total	Section A .						* * *	93,000. 0. 93,000.		0.	0
Total number of individuals (including but not reportable compensation from the organization)	limited to t		liste				re	ceived more than	\$100,000 of		
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched										a	es No
4 For any individual listed on line 1a, is the organization and related organizations grandvidual	sum of represents	oortab	ole (com	per	satior "Yes	n ai	nd other compens	sation from the le J for sucl	e h	X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y	accrue co	mpen	satı	on	fron	n any	un	related organization	on or individua		x
Section B. Independent Contractors	es, compic	10 001	7000	,,,,	, 101	34011	por		<u> </u>	·	
Complete this table for your five highest com- compensation from the organization. Report of year.	npensated i compensati	ndepe on fo	ende the	ent e ca	con	tracto dar ye	rs t ar e	hat received more ending with or with	than \$100,00 nin the organiza	0 of ation's tax	
(A) Name and business ad	dress					_		(B) Description of se	ervices	(C) Compensa	tion
									-		
Total number of independent contractors (if more than \$100,000 in compensation from the contractors of				nıte	_	thos	e li	sted above) who	received		
JSA BE1055 1 000	io organiza										90 (201
4764ME 7165		V	18	-7	.1F	,					PAGE

				(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	Federated campaigns					
Contribut and Othe	g	All other contributions, gifts, grants, and similar amounts not included above . 1f Noncash contributions included in lines 1a-1f \$			•	•	
	<u>h</u> 2a	Total. Add lines 1a-1f	Business Code	335,000.			
Program Service Revenue	b c d e						
Progr	f g	All other program service revenue Total. Add lines 2a-2f		0.			
	3 4 5	Investment income (including divided and other similar amounts)	nd proceeds .	0. 0.			
	ę́а b с	Gross rents	(II) Personal		· · · · ·		 , ,
	ศ 7a	Gross amount from sales of assets other than inventory (i) Secunites	(ii) Other	0	_	,	
	<i>Б</i>	Less cost or other basis and sales exponses Gain or (loss)		0.		ans t	
Other Revenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18		d=	er sa		
oth	b	Less direct expenses		0.	<u> </u>		
	e 9a	Gross income from gaming activities See Part IV, line 19					
	ь с	Less direct expenses		0.	-		
	10a	Gross sales of inventory, less returns and allowances					
	c b	Less cost of goods sold	0	0.			
	11a						
	b					 	
	d	All other revenue		0.			
			·				

Part IX Statement of Functional Expenses

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

Do not include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1 Grants and other assistance to domestic organizations				
and domestic governments. See Part IV, line 21	0.			
2 Grants and other assistance to domestic individuals See Part IV, line 22	0.			
3 Grants and other assistance to foreign				
organizations, foreign governments, and foreign				
individuals See Part IV, lines 15 and 16	0.			
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	93,000.	83,700.		9,300.
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.	12.000		
7 Other salaries and wages	43,800.	43,800.		
8 Pension plan accruals and contributions (include	_			
section 401(k) and 403(b) employer contributions)	0.			
9 Other employee benefits	11 242	10 500		753.
10 Payroll taxes	11,343.	10,590.		/53.
11 Fees for services (non-employees)	14 040		14,040.	
a Management	14,040.		10,725.	
b Legal	6,415.		6,415.	
c Accounting	0,415.		0,413.	
d Lobbying	0.			
e Professional fundraising services See Part IV, line 17,	0.			·
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column	39,000.	39,000.		
(A) amount, list line 11g expenses on Schedule O).A.T.C.H2.	0.			
12 Advertising and promotion	1,568.	673.	895.	
13 Office expenses	0.			
14 Information technology	0.	_		
16 Occupancy	0.			
17 Travel	5,268.	5,268.		· ·
18 Payments of travel or entertainment expenses				
for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	515.	515.		
20 Interest	0.			
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	2,000.	2,000.		
23 Insurance	2,546.		2,546.	
24 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)				
a PAYROLL FEES	2,997.	2,997.		
b MEDIA	2,097.	2,097.		
c TELEMARKETING	200.	200.		
dDIGITAL ADS/BILLBOARDS	20,280.	20,280.		
e All other expenses				- 10 050
25 Total functional expenses Add lines 1 through 24e	255,794.	211,120.	34,621.	10,053.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and				
fundraising solicitation. Check here if	_			
following SOP 98-2 (ASC 958-720)	0.			

		Check if Schedule O contains a response or note to any line in this P	art X		<u> </u>
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	18,564.		99,770.
	2	Savings and temporary cash investments	0.		0.
	3	Pledges and grants receivable, net	0.	,	0.
	4	Accounts receivable, net	0.	4	0.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees			
		Complete Part II of Schedule L	0.	5	0.
	6	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary	· · · · · · · · · · · · · · · · · · ·	6	0.
ts		organizations (see instructions) Complete Part II of Schedule L		7	0.
Assets	7	Notes and loans receivable, net			0.
Ä	8	Inventories for sale or use	0.		0.
	9	Prepaid expenses and deferred charges		-	
	iva	Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D. 10a 10,000.			
	h	other basis Complete Part VI of Schedule D 10a 10,000. Less accumulated depreciation	7,000.	100	5,000.
	11	Investments - publicly traded securities	0.	11	0.
	12	Investments - other securities See Part IV, line 11	0.	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		15	0.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	25,564.	16	104,770.
_	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	0.	20	0.
	21	Escrow or custodial account liability Complete Part IV of Schedule D	0.	21	0.
Ś	22	Loans and other payables to current and former officers, directors,	· 		
İŧ		trustees, key employees, highest compensated employees, and		_	
Liabilities	ŀ	disqualified persons Complete Part II of Schedule L		22	0.
Ë	23	Secured mortgages and notes payable to unrelated third parties	0.	~~	0.
	24	Unsecured notes and loans payable to unrelated third parties	0.	24	0.
	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	0.	25	0.
_	26	Total liabilities. Add lines 17 through 25	0.	26	0.
ses		Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34.			
and	27	Unrestricted net assets	25,564.		104,770.
Fund Balances	28	Temporarily restricted net assets	0.	28	0.
2	29	Permanently restricted net assets	0.	29	0.
or Fu		Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.			- •
ţţ	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	25,564.		104,770.
_	34	Total liabilities and net assets/fund balances	25,564.	34	104,770.
					Form 990 (2018)

Form 99	90 (2018)			Pa	ge 12
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>	<u>.</u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	_	335,0	
2	Total expenses (must equal Part IX, column (A), line 25)				794.
3	Revenue less expenses Subtract line 2 from line 1			•	206.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		25,	564.
5	Net unrealized gains (losses) on investments	5		_	0.
6	Donated services and use of facilities	6			0.
7	Investment expenses	7			0.
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		104,	<u> 170.</u>
Part					$\overline{}$
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>		1	┸┸
				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 ı	n		
	Schedule O				احيبا
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a	—	X
	If "Yes," check a box below to indicate whether the financial statements for the year were con	npiled o)r		
	reviewed on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis			.	- <u>-</u> _J
b	Were the organization's financial statements audited by an independent accountant?			1	
	If "Yes," check a box below to indicate whether the financial statements for the year were aud	ited on	а		}
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis			·	لــــا
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for				
	of the audit, review, or compilation of its financial statements and selection of an independent ac			 	 ,
	If the organization changed either its oversight process or selection process during the tax year,	explaın ı	n		
	Schedule O			·	
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as se			1	x
	the Single Audit Act and OMB Circular A-133?		. <u>3a</u>		 ^-
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	dergo th			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such at	idits	3b	000	10015
			Form	990	(2018)

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

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► Complete if the organization is described below. ▶ 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

		that have NOT filed Form 5/68 (elec			
	e organization answered "Yes," (see separate instructions), the	' on Form 990, Part IV, line 5 (Prox n	y Tax) (see separate i	nstructions) or Form 990-	EZ, Part V, line 35c (Proxy
•	Section 501(c)(4), (5), or (6) org	anizations Complete Part III			
Nam	e of organization			1	entification number
PEN	NNSYLVANIA SPOTLIGHT	1		32-049	95654
Pa	rt I-A Complete if the	organization is exempt unde	r section 501(c) or	is a section 527 orga	nization.
1	Provide a description of the	organization's direct and indirect	political campaign a	ctivities in Part IV (see i	nstructions for
	definition of "political campa				
2		expenditures (see instructions)			
3	Volunteer hours for political	campaign activities (see instructi	ons)		
Pai		organization is exempt under			
1	Enter the amount of any ex	cise tax incurred by the organizat	ion under section 495	55 ▶ \$	
2		cise tax incurred by organization i	-		
3	If the organization incurred	a section 4955 tax, did it file Form	n 4720 for this year?		Yes No
4a	Was a correction made?				Yes . No
	If "Yes," describe in Part IV				
Pai		organization is exempt unde			3).
1		expended by the filing organization			20 200
					20,280.
2		ng organization's funds contribute			
		ies			· · · · · · · · · · · · · · · · · · ·
3		enditures Add lines 1 and 2 E			20,280.
4 5	Did the filing organization file	le Form 1120-POL for this year? . s and employer identification num	bor (FIN) of all soct	on 527 political organia	X Yes No
5	organization made paymen	ts For each organization listed, e	enter the amount par	d from the filing organi	zation's funds. Also enter
	the amount of political con	tributions received that were pro	mptly and directly d	elivered to a separate p	olitical organization, such
		nd or a political action committee			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and
				funds If none, enter -0-	promptly and directly delivered to a separate
					political organization if
					none, enter -0-
(1)		···-			
١٠,			7		
(2)			<u> </u>		
ν-,					
(3)					
(-/					
(4)					
. ,			7		
(5)					
•					
(6)					
For	Panerwork Reduction Act Notic	e see the Instructions for Form 990	or 990-EZ.	Schedu	le C (Form 990 or 990-EZ) 2018

V 18-7.1F

Schedule C (Form 990 or 990-EZ) 2018	PENNSYLVANIA	SPOTLIGHT		32-0	495654	Page 2
			on 501(c)(3) and	filed Form 5768 (elec	ction under	
	zation belongs to an penses, and share of			ach affiliated group mem	ber's name,	
B Check ► if the filing organi	zation checked box	A and "limited cont	rol" provisions app	ly		
Limits (The term "expendi	on Lobbying Expentures" means amou		d.)	(a) Filing organization's totals	(b) Affilia group to	
1a Total lobbying expenditures to	influence public opin	ion (grass roots lol	obying)			
b Total lobbying expenditures to			<u></u>			
c Total lobbying expenditures (ac	dd lines 1a and 1b).		[
d Other exempt purpose expend	ıtures		[
e Total exempt purpose expendi	tures (add lines 1c ai	nd 1d)	[
f Lobbying nontaxable amount columns	Enter the amount	from the following	g table in both			
If the amount on line 1e, column (a) or (h) is: The Johnii	na nantavahla amaun	t ic:			
Not over \$500,000		amount on line 1e	115.			
Over \$500,000 but not over \$1,00		lus 15% of the exces	s over \$500 000			
Over \$1,000,000 but not over \$1,50		lus 10% of the exces				
Over \$1,500,000 but not over \$17		lus 5% of the excess				
Over \$17,000,000	\$1,000,000	*				
g Grassroots nontaxable amoun						
h Subtract line 1g from line 1a li	· ·					,-
i Subtract line 1f from line 1c If						
j If there is an amount other t	han zero on either	line 1h or line 1i,	did the organiza	tion file Form 4720		
reporting section 4911 tax for					Yes	No
	4-Year Ave	raging Period Und	er Section 501(h)			
(Some organizations that					ns below.	
	See the separa	te instructions for	lines 2a through	2f.)		
	Lobbying Expe	nditures During 4-	Year Averaging Pe	riod		
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) To	tal
2a Lobbying nontaxable amount						
b Lobbying ceiling amount (150% of line 2a, column (e))						
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount (150% of line 2d, column (e))						

Schedule C (Form 990 or 990-EZ) 2018

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2018

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity			68		
description of the lobbying activity Ye	(a)		(b)	
	s N	0	Amo	unt	
1 During the year, did the filing organization attempt to influence foreign, national, state, or local					
legislation, including any attempt to influence public opinion on a legislative matter or					
referendum, through the use of					
a Volunteers?	-	-			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?.					
c Media advertisements?	+	<u> </u>			
d Mailings to members, legislators, or the public?	\neg	_			
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?		<u> </u>			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities?					
					
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b If "Yes," enter the amount of any tax incurred under section 4912					
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d if the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), 0	r sectio	on		
				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			. 1	Х	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?					Х
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from to Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).		-			X
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OF answered "Yes."	(b)			3, is	
1 Dues, assessments and similar amounts from members		· -			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts	5 01				
political expenses for which the section 527(f) tax was paid). a Current year		2a			
b Carryover from last year					
c Total				•	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues.					
4 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 lobb					
and political expenditure next year?		. 4			
5 Taxable amount of lobbying and political expenditures (see instructions)		. 5			
Part IV Supplemental Information		hat Da	- II A 1	1	
	roup	list), Par	t II-A, II	ines i	ano
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated g					
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated g					
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated g					
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated g					
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated g 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information PART 1 -A LINE 1					
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated g 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.					
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated g 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information PART 1 -A LINE 1					
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated g 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information. PART 1 -A LINE 1					
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated g 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information PART 1 -A LINE 1					
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated g 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information PART 1 -A LINE 1		•		-	

Schedule C (Form 990 or 990-EZ) 2018

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.

Internal Revenue Service Name of the organization ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

Employer identification number 32-0495654 PENNSYLVANIA SPOTLIGHT 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) . . 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? 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 Yes Conservation Easements. Part II 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 Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 Held at the End of the Tax Year easement on the last day of the tax year 2a Total number of conservation easements 2b 2c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d historic structure listed in the National Register........... 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III 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

Schedule D (Form 990) 2018

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

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Pai	rt III Organizations Maintaini											
3	Using the organization's acquisition	n, access	sion, and	other recor	ds, check	c any o	f the	follow	ing that a	ire a sign	ificant us	e of its
	collection items (check all that app	ly)			_							
а	Public exhibition			d	Loand	or excha	ange	prograi	ms			
b _.	Scholarly research			e	Other							
С	Preservation for future gene											
4	Provide a description of the organ	nization's	collections	s and expla	in how t	hey fur	ther	the or	ganızatıon'	s exemp	purpose	ın Part
	XIII											
5	During the year, did the organization									_		
	assets to be sold to raise funds rath			ained as pa	rt of the o	organiza	ation'	s collec	ction?		Yes	No
	art IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21											
1 a	Is the organization an agent, truste											
	included on Form 990, Part X?									<u>L</u>	Yes	No
b	If "Yes," explain the arrangement i	n Part XIII	I and comp	plete the fol	lowing tab	ole ,						
										Amount	_	
С	Beginning balance											
d	Additions during the year											
е	Distributions during the year											
f	Ending balance							-11-1		Lua I	lv.	
	Did the organization include an am										Yes	No
	If "Yes," explain the arrangement i	n Part XII	Check n	ere if the ex	φianation.	nas be	en pr	ovided	on Part XII	<u> </u>	<i></i>	
Pa	t V Endowment Funds. Complete if the organization	ation and	wered "V	es" on For	m aan F	Part IV	line	10				
	Complete if the organiza		rent year	(b) Prio		(c) Two			(d) Three y	ears hack	(e) Four ye	ars hack
		(a) Cui	Tent year	(0) 1 110	, year	(0,	- ,		(d) Times y	- Duck	(6) (64))6	
1 a	Beginning of year balance											
b	Contributions				-							
С	Net investment earnings, gains,					1						
	and losses					·						
	Grants or scholarships					-						
е	Other expenditures for facilities											
_	and programs					· · · · · ·			_			•
	Administrative expenses									"		
	End of year balance			and balance	- /line 1a	a a luman	(0)	hold on	l			
2 a	Provide the estimated percentage Board designated or quasi-endown				e (ime 1g,	Column	i (a))	neiu as				
	Permanent endowment ▶	<u></u>										
С	Temporarily restricted endowment	>	%									
	The percentages on lines 2a, 2b, a	and 2c sho	ould equal	100%								
3 a	Are there endowment funds not in	the posse	ession of t	he organiza	ition that	are held	d and	d admir	nistered for	the		
	organization by										Y	es No
	(i) unrelated organizations										3a(i)	
	(ii) related organizations										3a(ii)	\perp
b	If "Yes" on line 3a(ii), are the relate	ed organiz	zations liste	ed as require	ed on Sch	edule R	?				3b	
4	Describe in Part XIII the intended			itio <u>n's endo</u>	wment fur	nds						
Pa	rt VI Land, Buildings, and Equal Complete if the organiz	uipment.	wered "V	'es" on For	m 990 I	Part I\/	line	11a !	See Form	990 Pa	rt X line	10
	Description of property	ation ans		r other basis	(b) Cost				cumulated) Book value	
			(inves	tment)	(0	ther)		depr	eciation		,	
1a	Land	r					+					
b	Buildings											
C	Leasehold improvements	Г		•			+			<u> </u>		
d	Equipment	r		10,000.			+		5,000.			5,000.
	Other		ogual Fa-		V 00/:	n /P) 1	10 10	<u> </u>				5,000.
ota	I. Add lines 1a through 1e (Column	i (a) must	equal Fori	ii 990, Part	∧, coiumi	ı (<i>0),</i> III	10	·/	<u> , . , ▶</u>			,, 000.

Part VII	Investments - Other Securities.) D-+ IV b 44b, C Form 000	Dark V. Line 42
	Complete if the organization answere	ed "Yes" on Form 990		
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuat Cost or end-of-year mark	
(1) Financia	al derivatives			
	-held equity interests			
(3) Other_				
(A)				
(B)				
(C)				
(D)				
(E)				·
(F)				· · · · · · · · · · · · · · · · · · ·
(G)				
(H)				
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII	Investments - Program Related.			
	Complete if the organization answere	ed "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 valua Cost or end-of-year mark	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 13)			
Part IX	Other Assets.	- d IIV II F 000	2 Deat IV line 11d See Form 000	Dort V. lino 15
	Complete if the organization answere		J, Part IV, line 110 See Form 990	1
	(a) L	Description		(b) Book value
(1)				
(2)				
(3)				
_(4)				
_(5)				
(6)				
<u>(7)</u>				
(8)		·-·		
_(9)				
	umn (b) must equal Form 990, Part X, col_(B,) line 15)	<u> </u>	
Part X	Other Liabilities.			000 5 434
	Complete if the organization answere	ed "Yes" on Form 990), Part IV, line 11e or 11f See For	m 990, Part X,
	line 25	-		
1.	(a) Description of liability	(b) Book value	ue	
(1) Fede	ral income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col (B) line 25	5) ▶		
_ 	or uncertain tax positions. In Part XIII, provide th		ne organization's financial statements that re	enorts the
organization	of uncertain tax positions in Fart Am, provide the o's liability for uncertain tax positions under FIN 4	18 (ASC 740) Check here	e if the text of the footnote has been pro	vided in Part XIII

Pane	. 4

Part >	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	n	
	Total revenue, gains, and other support per audited financial statements	1	
	Amounts included on line 1 but not on Form 990, Part VIII, line 12 Not unrealized gains (losses) on investments		
	Tet unleanzed gains (1035cs) of investments	1	
	Donated Services and use of lacinities	1	
С	Recoveries of prior year grants	1	
d	Other (Describe in Part XIII)		
е	Add lines 2a through 2d	2e 3	
3	Subtract line 2e from line 1	-3 	
	Amounts included on Form 990, Part VIII, line 12, but not on line 1	}	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	}	
b	Other (Describe in Part XIII)	- <u>-</u> -	
С	Add lines 4a and 4b		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		
Part 2	Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ırn.	
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities]	
b	Prior year adjustments	1 1	
С	Other losses	1 1	
d	Other (Describe in Part XIII)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
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)	5	
Part 2	XIII Supplemental Information.		
2, Part	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part III, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform	nation	
			<u> </u>
			<u> </u>
	•		
		_	

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.

► Attach to Form 990 or 990-EZ.

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047 Open to Public Inspection

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 1

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 2

FORM 990, PART IX - OTHER FEES

	(A) TOTAL	(B) PROGRAM	(C) MANAGEMENT	(D) FUNDRAISING
DESCRIPTION	FEES	SERVICE EXP.	AND GENERAL	EXPENSES
COMMUNICATION SERVICES	39,000.	39,000.		
TOTALS	39,000.	39,000.		