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Return of Organization Exempt From Income Tax

2018

Do not enter social security numbers on this form as it may be made public Social security numbers on the security numbers of the security numbe	*	Under section 301(2), 527, or 4917(3)(1) of the internal revenue code (except brivate roundarious)	
		Do not enter social security numbers on this form as it may be made public Go to www.frs.gov/Forin990 for instructions and the latest information	l

Open to Public Inspection

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۸	For the 2	2018 calen	dar year, or tax year beginning	2018, and ending		
В	** Fita	1 215	C		D Employer idea	ilification number
	Addre	Հ Հ բ ֆի լու յու	SECURE DEMOCRACY		82-384	5342
	H-Japa	i fra har	GII PENNSYLVANIA AVE SE #143		E Telegrore an	rber
	 	ti ki in	WASHINGTON, DC 20003		(202)	552-0221
	H		·		12027	
	\vdash	har Benga Fed		-	G Gross recess	\$ 625 001 .
		ale directoris			L .	
	X A.State	at on pending	F Have and address of principal officer HEATHER SMITH		t a 4 group ration for a	— —
			SAME AS C ABOVE	(a) 470	i al subcedeares ecud ho, amace a ist (see i	rstructions) Yes No
1	Tax exer	mpt status)(1) or 527 144		
J	Websi	ite: N/		(Kc) (v')	is everythe curter	>
K	firm it	tranzater	X Current on Trust Association Other	L four of format / 20	18 M State C	essi tomicle DC
		Summar		1		
1.6			be the organization's mission or most significant activities	CECHEE DENOCES	CV'S MISSIC	IN IS TO
			POLICYMAKERS AND THE PUBLIC ABOUT ST			70.13.19
5	<u>-</u> -	DOCKIE	LOUICIMAVERS WAD THE LABOUT ST	COVE UND LUID	EDDCTTONS.	
둳	-					
5	2 5.		ox I if the organization discontinued its operations of		25% 01 34 001 3	
ő	2 Ct	neck this bo	oting members of the governing body (Part VI, line 1a)	r disposed of more than)
∞5	4 1		dependent voting members of the governing body (Part \		· · · · · · · · · · · · · · · · · · ·	
S	5 To		of individuals employed in calendar year 2018 (Part V, II		<u> </u>	
Activities & Governance	6 To		of volunteers (estimate if necessary)		··	0
5	7a To		ed business revenue from Part VIII, column (C), line 12		. 7a	0.
•			business taxable income from Form 990-T, line 38		76	<u> </u>
_	 		Tooshess to the state of the st	· · · · · · · · · · · · · · · · · · ·	Prior Year	Current Year
	8 C	nntrihiilians	and grants (Part VIII, line 1h)	 	THOI TEG	625,001.
8						023,001.
5			ncome (Part VIII, column (A), lines 3, 4, and 7d)			
Ravonue			e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e			
			= - add lines 8 through 11 (must equal Part VIII, column			625,001.
					 	025,001.
	1		to or for members (Part IX, column (A), line 4).			
	1		er compensation, employee benefits (Part IX, column (A)			22 156
s	15 Sa		- · · · · · · · · · · · · · · · · · · ·	, intes 5-10)		21,156.
Šuč	16a Pr		fundraising fees (Part IX, column (A), line 11e)			
Expenses	b To		sing expenses (Part IX, column (D), line 25) >			
w	17 Ot	ther expens	ies (Part IX, column (A), lines 11a-11d, 11f-24e)			194,618.
	18 To	ital expensi	es. Add lines 13-17 (must equal Part IX, column (A), line	251		215,774.
	19 R	evenue less	expenses. Subtract line 18 from line 12.	ニシビン		409,227.
88			1 RES	TE Begin	ning of Current Year	
lancoe	20 To	tal assets	(Part X, line 16)	25 2019	0.	409, 227.
36	21 To	tal liabilitie	s (Part X, line 26)	2 3/2013 1021	Ö.	0.
Fig.	22 Ne		fund balances Subtract line 21 from line 2			
		Signatur	a Plant	DEN, UT	0.	409,227.
COUL	olete Decla	e: central ce	ictare that I have examined this return, including accompanying schedules at ign (other than ignormal is based on all information of which pleasaft has any	d statements, and to the best o knowledge	il my knowledge and be	fief it is true, correct, and
		1 3//	the had		I II to the	<u> </u>
Si.	100	400	re at pricer		Date /	4
Sig) ; PD	200	TUED CHIMU	•		•
116	16		THER SMITH print name and little	PRE	SIDENT	
						:
_		, —	reparer's name Preparer's agnoture	Date	Check if	PTIN
Pai		STEVE			seif employed	P00658269
Pre	parer	Firm's name	MBA CONSULTING GROUP	101-1		
Us	e Only	FFFFF's addre			Firms EIN - 4	7-1028527
		<u>වැ</u>	WASHINGTON, DC 20003			
May	the IRS	discuss th	is return with the preparer shown above? (see instruction	15)	Phone no 202	2-552-0221
BA	A For Pa	per ork P	eduction Act Notice, see the separate instructions.	TEEADIOIL		X Yes No
				(EEAU(U)L	Mary 2117 LT	Form MMH (3010)

-	990 (2018)		2-38463	42	F	age 2
Par		ement of Program Service Accomplishments			,	
		of Schedule O contains a response or note to any line in this Part III				L
1	-	ibe the organization's mission		CD CI	, ,	3.370
		DEMOCRACY'S MISSION IS TO EDUCATE POLICYMAKERS AND THE PUBLI	- AROUT	SEC	TKE -	AND_
	FAIR ELE	CTIONS.				
						- - -
	Did the organi	ization undertake any significant program services during the year which were not listed on the prior				
	Form 990 or		П	Yes	\mathbf{x}	No
	If "Yes," desc	ribe these new services on Schedule O	ب			
3	Did the organ	nization cease conducting, or make significant changes in how it conducts, any program service	s?	Yes	X	No
	If "Yes," desc	ribe these changes on Schedule O				
4	Describe the Section 501(and revenue	organization's program service accomplishments for each of its three largest program services, (c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to , if any, for each program service reported.	as measur others, the	ed by o	expen xpens	ses. ses,
4 a	(Code) (Expenses \$ 198,754. including grants of \$) (Rever	iue \$)
	LOBBYING	IN STATE LEGISLATURES TO PROTECT SECURE AND FAIR ELECTIONS				
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4 b	(Code) (Expenses \$ · including grants of \$) (Rever	ue \$			
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4.0	(Code) (Expenses \$ including grants of \$) (Rever)			
70		/ (Lapenses 4) (Novel	uc			—′
			-			
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					-	. – – –
	Other program	m services (Describe in Schedule O)				
40	Ctner program	m services (Describe in Schedule O) \$ \text{including grants of \$ \text{)}} \text{(Revenue \$ \text{)}})	
4 e		m service expenses ► 198,754.			/	
BAA	, , <u>, , , , , , , , , , , , , , , , , </u>	TEEA0102L 08/03/18		Form	990	(2018)



Form 990 (2018) SECURE DEMOCRACY Partity's Checklist of Required Schedules

4 1) le the average described in pasting 501(a)(2) or 4047(a)(1) (ather there a greate foundation) 2.16 (Ver.) complete	$\overline{}$		
	' Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part L	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
á	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If 'Yes,' complete Schedule D. Part VI	11 a		Х
I	b Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16° If 'Yes,' complete Schedule D, Part VII	11 b		Х
•	c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16° If 'Yes,' complete Schedule D, Part VIII	11 c		х
•	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	11 d		х
	e Did the organization report an amount for other liabilities in Part X, line 25° If 'Yes,' complete Schedule D, Part X	11 e		X
1	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
12 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		X
ı	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		
ł	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F. Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		_ X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes.' complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20 a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		X
	o If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х

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	41 L I V	VII	CCNII 3L VI	1166	uncu	JUILEUL	いてコ	(COMMINICO)

		r	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	,	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? <i>If 'Yes,' complete Schedule J</i>	23		Х
24;	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K If 'No, 'go to line 25a	24a		Х
١	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
•	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
(d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25 a		х
,	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	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 entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			_
ä	A current or former officer, director, trustee, or key employee? If 'Yes.' complete Schedule L, Part IV	28a	-	X
ı	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
(An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an			.,
20	officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c 29		$\frac{X}{X}$
	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		
	contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		
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		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ŀ	olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 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		Х
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Х	
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Vaa	N _C
1 :	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	b Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1 c	Х	
BAA	TEEA0104L 08/03/18	Form	990 (2018)

Form 990 (2018) SECURE DEMOCRACY

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

			Yes	No
2	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		1, 17	
	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)		14/00	
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	A 400 F 1 10	Х
	b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b		
4	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
	b If 'Yes,' enter the name of the foreign country		流騰	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)		<u> </u>	
5	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a	Х	
	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b	Х	
7	Organizations that may receive deductible contributions under section 170(c).		* *27 \$	
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and		ا مُسَسَم	
	services provided to the payor?	7 a		
	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		.7.4
	d If 'Yes,' indicate the number of Forms 8282 filed during the year 7 d	<u> </u>		
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring		S 23	e Alesan
	organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	1384 -	^ ';	
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b	i	
	Section 501(c)(7) organizations. Enter		1. (). ().	+
	a Initiation fees and capital contributions included on Part VIII, line 12		· , <	
	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter	2.0	1 1	
	a Gross income from members or shareholders			
	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		0.33
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b		Q. 6.3	Set D
	Section 501(c)(29) qualified nonprofit health insurance issuers.	. 16	300	
	a 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	īži.	,	: 2
	b Enter the amount of reserves the organization is required to maintain by the states in	4		
	which the organization is licensed to issue qualified health plans			4
	c Enter the amount of reserves on hand	(3)		
	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u>X</u>
	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		
75	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		X
	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		X
2 4 4	If 'Yes,' complete Form 4720, Schedule O	1	\$	
3AA	TEEA0105L 12/31/18	Form	990 C	2018)

Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

<u>se</u>	ction A. Governing Body and Management			
			Yes	No
1	a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O	3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		
	b Enter the number of voting members included in line 1a, above, who are independent	3		
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1"		,
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		х
4				<u> </u>
	since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7	a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7 a		Х
	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year bythe following			, ,
	a The governing body?	8 a	_X	
	b Each committee with authority to act on behalf of the governing body?	8 b	X	
	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		х
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Re	event	ie Co	ode.)
		\Box	Yes	No
	a Did the organization have local chapters, branches, or affiliates?	10 a		X
	b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 Ь		
11	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х	
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O		5 ² '\$"	
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	_X	ļ
	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	Х	
	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done SEE SCHEDULE Q	12 c	Х	
	Did the organization have a written whistleblower policy?	13		Х
14	Did the organization have a written document retention and destruction policy?	14		Х
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	لا شده		لعطيف
	a The organization's CEO, Executive Director, or top management official .	15a		Х
	b Other officers or key employees of the organization	15 b	dar en i i	X
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions)	3	Maria Storm	1843
16	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a	2.5.3	X
	b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16 b		
	ction C. Disclosure .			
	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 50 available for public inspection. Indicate how you made these available. Check all that apply)1(c)(3)s onl	y)
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available the public during the tax year SEE SCHEDULE O	ble to		
20				
	MBA CONSULTING GROUP 611 PENNSYLVANIA AVE SE NUM 143 WASHINGTON DC 20003 (202)	552	2-02

age 7

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

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

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

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

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

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

		(C)								
(A) Name and Title	(B) Average hours per	thar	one both	box, an o ector	unles officer trusti		son 1	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099 MISC)	from the organization and related organizations
(1) HEATHER SMITH	2									
PRESIDENT	0	Х		Х	ļ. —			0.	0.	0.
(2) MICHAEL SILBERMAN SECRETARY	2	х		Х				0.	0.	0.
(3) BRIANNA CAYO COTTER	2									
TREASURER	0	Х		X		-		0.	0.	0.
_(5)										
(6)										
									,	
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

[PartiVIII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)									
	(B)			(C)					
(A) Name and title	Average hours per week	box, unless person is both an officer and a director/trustee)			ee)	(D) Reportable compensation from	(E) Reportable compensation from	(F)' Estimated amount of other compensation	
		Individual trustee or director	Institutional trustee	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(15)				\dagger					
(16)									
(7)									
(18)	_								
(19)									
(20)									
(21)									
(22)									
(23)									
(24)									
(25)									
1 b Sub-total						>	0.	0.	0.
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)		•	_			>	0.	0. 0.	0.
2 Total number of individuals (including but not limited from the organization ► 0	to those I	isted a	above) who	receiv	ved	more than \$100,00	00 of reportable comp	pensation
 3 Did the organization list any former officer, direction line 1a? If 'Yes,' complete Schedule J for suc 4 For any individual listed on line 1a, is the sum of 	h individu	ıal							Yes No
the organization and related organizations greate such individual	er than \$1	50,00	ο̈́ If	'Yes	' com	ple	te Schedule J for		4 X
5 Did any person listed on line 1a receive or accrufor services rendered to the organization? If 'Yes Section B. Independent Contractors	e comper s,' comple	nsation ete Sc	n fror hedu	n any le J fo	unre or suc	late h p	d organization or erson	ındıvıdual	5 X
Complete this table for your five highest compen compensation from the organization. Report compensation.	sated indessation for	epend the ca	lent d	ontra ar yea	ctors endii	tha ng v	t received more t	han \$100,000 of ganization's tax year	ſ
(A) Name and business addi	ress	·	_	•			Description	of services	(C) Compensation
2 Total number of independent contractors (including t		ited to	thos	e liste	d abo	ve)	who received more	than	
\$100,000 of compensation from the organization	- 0								5 444 (0010)

1,

		Chęck if Schedule O	contains a res	ponse or note to ar	ny line in this Part V			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts	1	a Federated campaigns	1 a			Creation (Control of Control of C		
Contributions, Gifts, Grants and Other Similar Amounts		b Membership dues	1 b	ļ				
ts,		c Fundraising events	1 c	 				200
ig Gi		d Related organizations	1 d			3.4	4.00	and the state of
ns.		e Government grants (contribution	ons) 1 e		AVE. II		170	
ario e		f All other contributions, gifts, g similar amounts not included a	rants, and					
혈충	1		ــــــــــــــــــــــــــــــــــــــ			in the second		
<u> </u>		g Noncash contributions included	in lines 1a-1f \$		3100			
<u>۲۵ ه</u>	<u> </u>	h Total. Add lines 1a-1f		•	625,001.		###¥94.4	1 1 1 1 1 1 1 1 1 1
Program Service Revenue	1	_		Business Code				3.00
e	2	a 						
ě E		D ·		,				
<u>Ğ</u>	'	<u> </u>						· · · · · · · · · · · · · · · · · · ·
တ္တ	'	u 						
Tall		f All other program service					<u> </u>	
ဦ		g Total. Add lines 2a-2f	e revenue				777 (A.C. 22 <u>4-440</u> 173-440, 177-4	MARKET BOOK SAN TANAMED WITH
-	3	-	udina dividona	le untoract and		STAMORIZATI PROGRESSON		The standard state of
	3	other similar amounts)	danig dividend	is, interest and			İ	,
	4	Income from investment	of tax-exemp	t bond proceeds			****	
	5	Royalties		•		_		
			(i) Real	(ii) Personal	San Table Con B			
	6	a Gross rènts				1. E. S.		
		b Less rental expenses [
		c Rental income or (loss)					**************************************	
	۱ ۱	d Net rental income or (los						
	7 :	a Gross amount from sales of	(i) Securities	_ (ii) Other	1. 17 1.73	- THE		100
		assets other than inventory						
	ı	b Less cost or other basis						
	١.	and sales expenses Gain or (loss)		•	in mild in the			
	ı	d Net gain or (loss)				34.05		
ā		a Gross income from fund	raising events					
Ę		(not including \$						
ě		of contributions reported	on line (c)	•			100	
<u> </u>		See Part IV, line 18		a				
Other Reven		 Less direct expenses Net income or (loss) fror 	m fundraina	D	1.00		<u> </u>	
O			_	eveniz	V45111111111111111111111111111111111111	Maria Cara Cara Cara Cara Cara Cara Cara	De la Problème (Station Cerrolis)	Taran Islanda
	9 a	Gross income from gami See Part IV, line 19	ing activities	a	100	新年,新 花	14.4	. 7
		Less direct expenses		h				
		: Net income or (loss) from	n gaming activ	vities •				
•		• • •					N1000000000000000000000000000000000000	
	10 a Gross sales of inventory, less returns and allowances a							
	b Less cost of goods sold b				444			
	_ (Net income or (loss) from	n sales of inve	entory >			2000	AND THE PARTY OF T
		Miscellaneous Revenue	·	Business Code	10 March 18 18			
	11 a	·					,	
	t) 				,		
	c	;						
		All other revenue						
		Total. Add lines 11a-11d		*		and the second		"你看 你是我
	12	Total revenue. See instru	uctions	•	625,001.	0.	0.	0.

Form 990 (2018) SECURE DEMOCRACY Part IX Statement of Functional Expenses

Seci	tion 501(c)(3) and 501(c)(4) organizations must cor			omplete column (A)	· ,
	Check if Schedule O contains a	_ ` · _ · _ · 	·		, ,
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members			*	1, 1, 2, 3
5	Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	. 0.	0.	0.	0.
7	Other salaries and wages	19,375.	18,406.	969.	-
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	23,313.	10,100.		
9	Other employee benefits			· <u></u>	
10	Payroll taxes	1,781.	1,692.	89.	
11	Fees for services (non-employees)			,	
a	Management				
t	Legal ·				
c	Accounting	15,000.		15,000.	
c	Lobbying ·				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
, g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.)				
12	Advertising and promotion	51,970.	51,970.		
13	Office expenses	2,430.	1,468.	962.	
14	Information technology			. ,	,
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings Interest				,
21	Payments to affiliates			· · · · · · · · · · · · · · · · · · ·	
22	Depreciation, depletion, and amortization	·			
23 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)				
а	LOBBYISTS	112,643.	112,643.	Comment consistent + C. C.	A SECTION ASSESSMENT AND A TABLE
t	POLLING & SURVEYS	12,575.	12,575.		
c	; 	12,575.	12,373.		· ···.
c					
e	All other expenses	<u> </u>			
	Total functional expenses. Add lines 1 through 24e	215,774.	198,754.	17,020.	0.
		220, 4.	2307,041	2.,020.	
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)				
					L

Check if Schedule O contains a response or note to any line in this Part X						
	•		(A) Beginning of year		(B) End of year	
	1	Cash – non-interest-bearing		1	409,227.	
	2	Savings and temporary cash investments		2		
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net		4		
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6		
ts	7	Notes and loans receivable, net		7		
Assets	8	Inventories for sale or use		8		
As	9	Prepaid expenses and deferred charges		9		
	10a	Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D.				
	b	Less accumulated depreciation 10b		10 c		
	11	Investments – publicly traded securities		11		
	12	Investments – other securities. See Part IV, line 11		12		
	13	Investments - program-related See Part IV, line 11		13	• •	
	14	Intangible assets	,	14		
	15	Other assets See Part IV, line 11		15		
	16	Total assets. Add lines 1 through 15 (must equal line 34)	0.	16	409,227.	
,	17	Accounts payable and accrued expenses		17	100/11/	
	18	Grants payable		18		
	19	Deferred revenue		19	,	
	20	Tax-exempt bond liabilities		20	,	
es	21	Escrow or custodial account liability Complete Part IV of Schedule D		21		
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22		
_	23	Secured mortgages and notes payable to unrelated third parties		23		
	24	Unsecured notes and loans payable to unrelated third parties		24		
		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.		25		
	26	Total liabilities. Add lines 17 through 25	0.	26	0.	
Balances		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets		27	354,227.	
	28	Temporarily restricted net assets		28	55,000.	
힏	29	Permanently restricted net assets		29		
Net Assets or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.	第二十二十五			
	30	Capital stock or trust principal, or current funds		30		
	31	Paid-in or capital surplus, or land, building, or equipment fund		31		
	32	Retained earnings, endowment, accumulated income, or other funds		32		
	33	Total net assets or fund balances	0.	33	409,227.	
	34	Total liabilities and net assets/fund balances .	0.	34	409,227.	

Forn	m 990 (2018) SECURE DEMOCRACY 82-	3846342	, P	age 12	
Pa	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	625;	001.	
2	Total expenses (must equal Part IX, column (A), line 25)			<u>774.</u>	
3	Revenue less expenses Subtract line 2 from line 1	3	409,	227.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		0.	
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities .	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
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	409,		
Pa	Financial Statements and Reporting				
Check if Schedule O contains a response or note to any line in this Part XII					
	Chesh in Concedure & Contains a response of note to any fine in this rest Air		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,' explain in Schedule O				
2 a Were the organization's financial statements compiled or reviewed by an independent accountant?			2a	X	
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a					
separate basis, consolidated basis, or both					
Separate basis Consolidated basis Both consolidated and separate basis					
1	b Were the organization's financial statements audited by an independent accountant?				
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate					
basis, consolidated basis, or both					
Separate basis Consolidated basis Both consolidated and separate basis					
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?					
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O					
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?			3 a	х	
1	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required aud	ıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	_	3 b	1	
BAA	BAA TEEA0112L 08/03/18			(2018)	

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.

2018 Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

SECURE DEMOCRACY

Employer identification number

82-3846342

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

FORM 990 IS PROVIDED TO THE GOVERNING BODY AND LEGAL COUNSEL FOR REVIEW AND APPROVAL PRIOR TO FILING

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

ORGANIZATION INQUIRES ANNUALLY AS TO POSSIBLE CONFLICTS OF INTEREST

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

NO OTHER DOCUMENTS MADE AVAILABLE TO THE PUBLIC.