990

Department of the Treasury

Return of Organization Exempt From Income Tax

2021

OMB No. 1545-

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundation:) Do not enter social security numbers on this form as it may be made public.

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

endar year, or tax year beginning 01-01-2022 , and ending 12-31-2022

C Name of organization Susan B Anthony List Inc

A Item	for the	2021	alendar year, or tax year beginning 01-01-2022 , and ending 12-31-202	2					
	eck if ap	plicable:	C Name of organization Susan B Anthony List Inc		D Employe	er identi	fication number		
	lame cha	-			54-185	0126			
	nitial retu	urn	Doing business as						
retu	inal ırn/termin	nated	Susan B Anthony Pro-Life America		E Telephone	e number	•		
	mended pplicatio	return on pendin	Number and street (or P.O. box if mail is not delivered to street address) Room/sui 2776 S Arlington Mill Drive 803	te	(202) 2	223-80	73		
			City or town, state or province, country, and ZIP or foreign postal code Arlington, VA 22206		G Gross rec	eipts \$ 4	1,204,143		
			F Name and address of principal officer:	H(a) ⊺	s this a group re				
			Marjorie Dannenfelser	S	ubordinates?		☐ Yes 🗸 No		
			2776 S Arlington Mill Drive 803 Arlington, V A 22206		are all subordina ncluded?	tes	Yes No		
т т	ax-exem	npt status	5:	I	f "No," attach a				
I V	Vebsite	e: 🕨 w	ww.sbaprolife.org	H(C) (Group exemption	numbe	r▶		
(Fo	rm of or	ganizatio	n: 🔽 Corporation 🦳 Trust 🦳 Association 🦳 Other 🕨	L Year of	formation: 1997	M State	of legal domicile: VA		
F	Part I	Sur							
			escribe the organization's mission or most significant activities:						
e c	<u>A</u>	dvancii	ng pro-life legislation and pro-life women, training activists and candidat	es					
Ĕ	-								
E	-		_						
Activities & Governance	_		this box 🔭 if the organization discontinued its operations or disposed of		than 25% of its r	1	ets.		
ø			r of voting members of the governing body (Part VI, line 1a)			3	9		
es.			r of independent voting members of the governing body (Part VI, line 1b)			4	8		
Ē			umber of individuals employed in calendar year 2021 (Part V, line 2a) .			5	67		
5			umber of volunteers (estimate if necessary)			6	8		
-			nrelated business revenue from Part VIII, column (C), line 12 · · ·			7a	(
	ь	Net unr	related business taxable income from Form 990-T, Part I, line 11 · ·	<u> </u>	<u> </u>	7b	(
			(D-4)/III II II II		Prior Year	4.0	Current Year		
9			utions and grants (Part VIII, line 1h)	15,070,2	_	21,278,220			
Revenue		-	n service revenue (Part VIII, line 2g)	973,1		719,14			
å			nent income (Part VIII, column (A), lines 3, 4, and 7d) · · · ·	13,3	_	60,01			
			evenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		8,3		62,77		
			evenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12))	16,065,1	_	22,120,15		
			and similar amounts paid (Part IX, column (A), lines 1–3)		871,7	2 /	1,71		
			s paid to or for members (Part IX, column (A), line 4)	0)	2.012.0	4.2	4 441 42		
Ses				· ·	3,913,0	-	4,441,42		
Expenses			sional fundraising fees (Part IX, column (A), line 11e)		339,9	35	194,65		
ă			draising expenses (Part IX, column (D), line 25) 4,029,306		13,266,79	0.5	17 014 10		
			expenses (Part IX, column (A), lines 11a-11d, 11f-24e) · · · · · · · · · · · · · · · · · · ·		18,391,4	_	17,014,194 21,651,978		
			e less expenses. Subtract line 18 from line 12		-2,326,3		468,170		
e or		revenu	c less expenses. Subtract line 10 from line 12	Beg	ginning of Current		End of Year		
Net Assets or Fund Balances		Totala	cooks (Part V. line 16)		Year 6 100 2	0.4	0.000.80		
AB.	20		ssets (Part X, line 16)		1,287,1	-	9,909,804		
-Fet	21		tets or fund balances. Subtract line 21 from line 20		4,822,0	-	5,290,209		
	22 art II		nature Block		7,022,0	55	3,230,20		
		_	perjury, I declare that I have examined this return, including accompan	vina sche	edules and state	ments.	and to the best of		
ny I	knowle	dge and	I belief, it is true, correct, and complete. Declaration of preparer (other the knowledge.						
		<u> </u>	ature of officer		2023-11-07 Date	-			
Sig		,							
Hei	re		orie Dannenfelser President or print name and title						
		7	<u> </u>						
			Print/Type preparer's name Preparer's signature Da	ate	Check If P	TIN 0107479!	5		
Pai		}	Firm's name Capin Crouse LLP	Self-IIP Firm					
	epare		o name = capin croade LLI	7 IIIII 5 LIN = 30-3	ïrm's EIN ► 36-3990892				
Js	e Onl	ly	Firm's address 1330 Avenue of the Americas Suite 2		Phone no. (505) 5	02-2746	·		
			New York, NY 10019						
		_							

May the IRS discuss this return with the preparer shown above? (see instructions)

16,579,164

Total program service expenses

Form	n 990 (2021)			Page 3
Pa	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions. 🗐	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	Yes	
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
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? <i>If "Yes," complete Schedule D, Part I</i>	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III </i>	8	Yes	
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	٥		No

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 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII,

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete

its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 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 d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of

reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 🗐 e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X

Did the organization's separate or consolidated financial statements for the tax year include a footnote that

12a Bid the Granication of the tax year? If "Yes," complete

. If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🐒

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

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for

b Was the organization included in consolidated, independent audited financial statements for the tax year?

14a Did the organization maintain an office, employees, or agents outside of the United States?

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other

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. 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 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If

assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

negotiation services? If "Yes," complete Schedule D, Part IV

addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

any foreign organization? If "Yes," complete Schedule F, Parts II and IV

VIII, IX, or X, as applicable.

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Form **990** (2021)

Yes

Yes

Yes

11a

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11e

11f

12a

12b

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14a

14b

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20a

20b

21

Yes

"Yes," complete Schedule L, Part I

If "Yes," completeSchedule L,Part III

conservation contributions?

sections 301.7701-2 and 301.7701-3?

30

Part V

entity or family member of any of these persons?

Form 990 (2021) Page 4 Checklist of Required Schedules (continued) Yes No

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

25a 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 . . .

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

Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled

哲道學語》的發現別是說過程的時間發表 智利制力 or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member,

or to a 35% controlled entity (including an employee thereof) or family member of any of these persons?

Was the organization a party to a business transaction with one of the following parties (see the Schedule L,

c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes,"

 $\overline{ extsf{Did}}$ the organization receive contributions of art, historical treasures, or other similar assets, or qualified

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

Holly the organization field all the sterminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete

ฟิลัร์ เพื่อ Graphiza เอกาย์และ เลือง เลือง tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV,

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

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 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable

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 related

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

Statements Regarding Other IRS Filings and Tax Compliance

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes,"

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?

Part IV instructions for applicable filing thresholds, conditions, and exceptions):

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable

b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable

b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV .

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

23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's

current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes,"

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24a

24b

24c

24d

25a

25b

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28a

28b

28c

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Form **990** (2021)

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Nο

Nο

Νo

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No

26 Each reference of employees regarded on form V-2. Transmitted of Wage and Tax Statements, field for the calender year ending with or within the year covered 2	Form	990 (2021)			Page 5				
Tax Statements, flied for the calendar year ending with or within the year covered by this return. It is teast one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2 is greater than 250, you may be required to effect a employment tax returns? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority as the programation of the programation in party to a prohibited tax sheller transaction in clinical section 1900 in the programation approximation approxy to a prohibited tax sheller transaction at any lime during the tax year? 5a Did any taxable party notify the organization file Form 8966-1? 6b If "Yes," to line 5a or 50, did the organization file Form 8966-1? 6c If "Yes," to line 5a or 50, did the organization file Form 8966-1? 6c If "Yes," to line 5a or 50, did the organization file Form 8966-1? 6c Ves If "Yes," to did the organization include with every salidation at expension statement that such contributions or gifts were not tax deductible? 6c Ves If "Yes," to line 5a or 50, did the organization file Form 8966-1? 6c Ves If "Yes," to line 5a or 50, did the organization file Form 8966-1? 6d Under the organization received eductible contributions under section 170(c). 8d Under the organization shall may receive deductible contributions under section 170(c). 8d Under the organization shall may receive deductible contributions under section 170(c). 9d Under the organization shall may receive deductible contributions under section 170(c). 10d the organization shall may receive deductible contributions under section 1700(c). 10d the organization received a contribution of cars, beats, arplanes, or other vehicles, old the organization file form 800 in licus of the organization file form 800 in licus of form	Pa	Statements Regarding Other IRS Filings and Tax Compliance (continued)							
b If at least one is reported on line 2a, old the organization file all required feetral employment tax returns? Note. If the sum of lines 1a and 2a is gravate than 250, you may be required to efficie. See instructions. 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 4b 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; 8cm as bank account, securities account, or other financial account in a foreign country; 8cm as bank account, securities account, or other financial accounts in foreign country; 8cm as bank account, securities account, or other financial accounts in foreign country; 8cm as bank account, securities account, or other financial Accounts 5a (Martha graphization party to a prohibitorium, securities account, or other financial Accounts 5a (Martha graphization party to a prohibitor of the progradization than the organization has the was not a party to a prohibitor set whether transaction at any time during the tax year? 5b Did any taxobil party northy the organization file form 8886-70. 6c If Yes, "in time 5a or 5b, did the organization file form 8886-70. 6c If Yes," to lime 5a or 5b, did the organization file form 8870 that were not tax deductible as charitable contributions or gifts were not tax deductible? 7c Organization state may contribution in maximum than a party for goods and services provided to the payor? 7d Organization state may contribution of the value of the goods or services provided? 8 Did the organization make any funds, directly or indirectly, on a personal benefit contract? 9 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9 Sponsoring organizations maintaining doner advised funds. 10 Did the organization funds and the party of the organization file or form 1098-C? 17 Did the organization semination of contributions included on Part VIII, line 12, f	2a	Tax Statements, filed for the calendar year ending with or within the year covered							
b) If "Yes," has it filed a form 990 I for this year?!" "90" to low 3b, provide on explanation in Schedule 0. At any time during the calendary year, dit the organization have an interest in, or a signature or other authority ower, a financial account in a foreign country. See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts 8. 686/89% comparization a party to a prohibited tex whether transaction at any time during the tax year? 5	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		Yes					
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country; less has a bank account, securities account, or other financial be ECountry to the foreign country; lesses instructions for filing requirements for filing requirements for filing requirements for filing requirements. Sa (MS*Hb organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5a Did any taxeble party notify the organization file Form 8886.17 5b Did any taxeble party notify the organization file Form 8886.17 5c I**Yes,** to line Sa or Sb, did the organization file Form 8886.17 5c I**Yes,** of the organization include with very solicitation is express statement that such contributions or girls were not tax deductible? 5c I**Yes,** of the organization include with very solicitation is express statement that such contributions or girls were not tax deductible? 5c I**Yes,** of the organization include with very solicitation is express statement that such contributions or girls were not tax deductible? 5c I**Yes,** of the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 5c 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? 5c Did the organization may receive deductible contributions under section 170(c). 6c Yes 7d Organization funds are section of the value of the goods or services provided? 7d I**Yes,** did the organization may receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor of the value of the goods or services provided? 6c Yes 7d Organization funds are serviced as a contribution of contribution of contributions for indirectly, to pay premiums on a personal benefit contract? 7d I**If the organization indirectly according to the payor of the organiza	3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Νo				
over, a financial account in a foreign country (such as a bank account, securities account, or other financial bit NECKNEPS better the name of the foreign country. See instructions for filing requirements for FINCEN Form 114, Report of Foreign Bank and Financial Accounts SWAPMS comparization approach to a prohibited that shelter transaction? 5 WAPMS comparization approach to a prohibited that shelter transaction? 5 If Yes, 7 to line Sa or 50, did the organization that it was or is a party to a prohibited that shelter transaction? 5 Does the organization bave annual gross receipts that are normally greater than \$100,000, and did the organization bave annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that the was or is a party to a prohibited that shelter transaction? 5 Does the organization bave annual gross receipts that are normally greater than \$100,000, and did the organization shelt with every solicitation an express statement that such contributions or gifts were not tax deductible as chartable contributions or gifts were not tax deductible as chartable and that the such contribution of a services provided to the payor? 7 Organizations that may receive deductible contributions under section 170(c). 8 Did the organization sell, exchange, or otherwise dispose of tanglish personal property, did the size of the payor? 9 Did the organization received a contribution of undersided the payor of the payor of the payor? 10 Did the organization received a contribution of cars, beats, arplanes, or other vehicles, did the organization file a form 1998-C? 11 Did the organization make any taxable distributions under section 4966? 12 Section \$01(c)(7) organizations maintaining donor advised funds. 13 Did the sponsoring organizations make any taxable distributions under section 4966? 14 Did the sponsoring organizations make a distribution of cars, beats, arplanes, or other vehicles, did the organization for section 501(c)(27) organizations. Enter:	b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b						
See instructions for filing requirements for FinCEN Form 11.4, Report of Foreign Bank and Financial Accounts 5 & MR3PMs organization appears to a profit that on a profit that the was or is a party to a prohibited tax shelter transaction? 5 MR3PMs organization for a profit that it was or is a party to a prohibited tax shelter transaction? 6 If "Yes," to line 5 ar 5 b, did the organization file Form 8886-17 organization solicit any contributions that was enough gross receipts that are normally greater than \$100,000, and did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 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? 9 If "Yes," did the organization notify the donor of the value of the goods or services provided? 10 If the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 10 If the organization notify the donor of the value of the goods or services provided? 11 If "Yes," did the organization notify the donor of the value of the goods or services provided? 12 If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 13 If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 14 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a form 10 If the organization have excess business holdings at any time during the year? 15 Section \$01(c)(27) organizations. Enter: 16 If the organization is maintaining door advised funds. 17 If the organization is provided to the sponsoring organization make a distribution to a donor, donor advised fund maintained by the sponsoring organization have excess business holdin		over, a financial account in a foreign country (such as a bank account, securities account, or other financial	4a		No				
5a (MAPA) organization a porty to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxoble party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes," to line 5a or 5b, did the organization file Form 8866-T? 5a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solical any contributions that were not tax deductible as charitable contributions. b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization to notify the donor of the value of the goods or services provided to the payor? b If "Yes," indicate the number of Forms 8292 filed during the year. c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization received a contribution of qualified intellectual property, did the organization file or forms 8292 filed during the year pay premiums, directly or indirectly, on a personal benefit contract? 7 The property of the organization received a contribution of qualified intellectual property, did the organization file or promises on the payor or indirectly, on a personal benefit contract? 7 The property of the organization received a contribution of qualified intellectual property, did the organization file or promises on the payor or indirectly on a personal benefit contract? 7 The property of the organization received a contribution of qualified intellectual property, did the organization file or promises holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations make any taxable distribution to a donor, donor advised fund the property of the property of the property of the property of the pro	b								
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes," to line Sa or 5b, did the organization file Form 8886-T? 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? b If "Yes," did the organization include with very solicitation are express attement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7 Did the organization notify the donor of the value of the goods or services provided? 6 Did the organization notify the donor of the value of the goods or services provided? 7 Did the organization notify the donor of the value of the goods or services provided? 6 Did the organization neceived a payment in excess of \$75 made partly as a contribution and partly for goods and services provided? 7 Did the organization neceive any funds, directly or indirectly, or payment property for which it was required to file Form 8282? 6 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7 Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organization make any taxable distributions under section 4966? 9 Sponsoring organization make any taxable distributions under section 4966 9 Sponsoring organization make any taxable distributions under section 4966 9 Sponsoring organization make any taxable distributions under section 4966 9 Section 501(c)(27) organizations. Finter: 1 In Initiation fees and capital	5a		5a		No				
Sea 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 oschributions?			5b		No				
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Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9								
Initiation fees and capital contributions included on Part VIII, line 12	а	Did the sponsoring organization make any taxable distributions under section 4966?	9a						
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Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans									
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	а		13a						
in which the organization is licensed to issue qualified health plans		Note. See the instructions for additional information the organization must report on Schedule O.							
Did the organization receive any payments for indoor tanning services during the tax year?		in which the organization is licensed to issue qualified health plans							
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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 No 16 If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?					IN O				
16 If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?		Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			No				
that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	16		16		No				
II YOU COMPLOTO FORM BUBY	17	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17						

Form	990 (2021)			Page 6					
Par	Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" re 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	espons	e to line	s . 🔽					
Se	ction A. Governing Body and Management								
			Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax 9								
	Yeare 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.								
b	Enter the number of voting members included in line 1a, above, who are independent 1b 8								
2	2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?								
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? .								
4	4 Did the organization make any significant changes to its governing documents since the prior Form 990 was								
5	5 blad the organization become aware during the year of a significant diversion of the organization's assets? .								
6	Did the organization have members or stockholders?	6		Νo					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		Νo					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
а	The governing body?	8a	Yes						
b	Each committee with authority to act on behalf of the governing body?	8b	Yes						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.	9		Νo					
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ue Cod	e.)					
			Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							

	other officer, director, trustee, or key employee?			NO
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		Νo
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was	4		Νo
5	filed: organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	organization o maning dual coor in 100, provide the names and dual cooco in confedere of 1 1 1 1 1 1 1 1 1 1 1			
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	le.)
Se		evenu	ie Cod Yes	(e.)
		evenu 10a		·
10a	ection B. Policies (This Section B requests information about policies not required by the Internal R			No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b		No No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes	No No

	more members of the governing body?	7a		Νo								
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No								
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:											
а	The governing body?	8a	Yes									
b	Each committee with authority to act on behalf of the governing body?	8b	Yes									
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No								
Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)												
			Yes	No								
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo								
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b										
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Νo								
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.											
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes									
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes									
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	Yes									
13	Did the organization have a written whistleblower policy?	13	Yes									
14	Did the organization have a written document retention and destruction policy?	14	Yes									
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?											
а	The organization's CEO, Executive Director, or top management official	15a	Yes									
b	Other officers or key employees of the organization	15b	Yes									
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.											
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νo								
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b										
Se	ction C. Disclosure											
17	List the states with which a copy of this Form 990 is required to be filed											

12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	_
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	_
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No

CT, DE, FL, GA, AL, IL, KS, KY, LA, ME, AK, MD, MA, MN, MS, MO, NH, NJ, NM, NY, NC, OH, OK, OR, PA,

RI, SC, TN, UT, VA, AR, WV, WI Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that

apply.

▶Jennifer Gross 2776 S Arlington Mill Drive Arlington, V A 22206 (202) 223-8073

Own website Another's website Vpon request Other (explain in Schedule O)

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records:

Form 990 (2021)

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 ${\sf VII}$. .

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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations. • List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
- organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(C) (D)

(A) Name and title	(B) Average hours per week (list any hours for related	more t	tion (than on is l	one both ecto	box an or/tr	office	ess er e)	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W-2/1099-	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC/1099- NEC)	MISC/1099- NEC)	related organizations
(1) Jane Abraham	2.0	Х		Х				0	0	0
Chairman										
(2) Marjorie Dannenfelser	40.0	Х		Х				424,827	0	14,003
President	16.0							12 1/627		1.,000
(3) Susan Hirschmann	2.0	Х		Х				0	0	0
Vice Chair								,		
(4) Carol Moore	2.0	Х						0	0	0
Director								3	9	
(5) Diane Black	2.0	Х						0	0	0
Director								3	9	
(6) Ellen Barrosse	2.0	Х						0	0	0
Director								3	9	
(7) Maura Mudd	2.0	X						0	0	0
Director								3	9	
(8) Richard Alvord	2.0	X						0	0	0
Director		^						0	3	·
(9) Sean Fieler	2.0	X						0	0	0
Director		^						0	3	·
(10) Emily Midgette	40.0			Х				333,792	0	40,997
Executive VP/Acting Secretary	16.0			^				333,792	0	40,937
(11) Jennifer Gross	25.0			v				195,434	0	33,688
VP of Administration/Treasurer	20.0			Х				193,434	U	33,066
(12) William Valentine II	40.0				Х			250,631	0	38,848
Vice President of Political Affairs	15.0				^			230,031	U	30,040
(13) Charles Donovan	5.0					Х		0	225 505	21.012
CLI President	45.0					^		0	235,585	21,813
(14) Mallory Carroll	35.0					Х		172.010	0	17 502
Vice President of Communications	10.0					^		172,810	0	17,503
(15) Marilyn Musgrave	40.0					V		102.065	0	10.126
VP, Government Affairs	0.0					Х		193,965	0	10,136
(16) Michael Bars	40.0					v		205 220	-	24 222
ED, Election Transparency Initiative						Х		205,339	0	21,222
(17) Stephen Billy	26.0					v		77 275	120 111	20.452
VP of State Affairs	19.0					Х		77,275	136,114	29,152
										Form 990 (2021)

3001 Washington Blvd 7th Floor Arlington, VA 22201

\$100,000 of compensation from the organization \triangleright 26

Blue Raven Inc

PO Box 320112 Alexandria, VA 22320

	(A) Name and title	(B) Average hours per week (list any hours for	more pers	than on is	one bot	not bo: h ar	check x, unle n office rustee	ess er	Repo compe froi	D) ortable ensation m the ation (W-	(E) Reportable compensation from related organizations	amount of other compensation		
		related organizations below dotted line)	Individual trustae or director	Institution	Officer	Key employee	Highest o	Former	MISC	.099- /1099- EC)	(W-2/1099- MISC/1099- NEC)		rganizat relat organiz	ed
			trustee	Institutional Trustee		oyee	Highest compensated employee							
												_		
												_		
												+		
												-		
	Sub-Total	art VII. Section A		•	•		* *					1		
	Fotal (add lines 1b and 1c)	•			<u>. </u>		•		1	,854,073	371,69)9		227,362
2	Total number of individuals (included) \$100,000 of reportable compensations.	-					bove)	who	received	l more tha	n			
											-		Yes	No
3	Did the organization list any form on line 1a? <i>If "Yes," complete Sche</i>				, ke	y er •	nploye • •	ee, o	r highest	t compens	ated employee	3		No
4	For any individual listed on line 1a organization and related organiza individual	•								•		4	Yes	
5	Did any person listed on line 1a re	eceive or accrue		• satio	• on fr	• om	anv III	• nrela	• •	• • ·	 r individual for		163	
	services rendered to the organiza						•		_			5		No
	cction B. Independent Cont Complete this table for your five I		ated in	depe	nder	nt c	ontrac	tors	that rec	eived mor	e than \$100.000			
	compensation from the organization													
		and business addre	ess								ription of services		Compe	nsation
	zer Media Grey Fox Court									Voter Educa	tion			929,320
Bel A	r, MD 21015 Benefits									Billing and e	nrollment services	_		607,850
1 Kel	ly Way									J 22 C				. ,
	Advisors Inc									Public relation	ons consulting	+		543,821
	Eisenhower Avenue First Floor ndria, VA 22314													
	Strategies LLC									Voter Educa	tion			446,219

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

390,193

Security services

Part				Revenu			and the De	-4 \ /!!!		
	Cne	eck if Sche	eaure	O contain	is a res	sponse or note to	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under section
Contributions, gifts, grants, and other similar amounts	c Fundra d Relate	ited camp ership due sising ever d organiza nent grants	es . nts . ation		1a 1b 1c 1d 1e	179,785 640,147		revenue		512 - 514
	and sim	contributior contribution contribution 11:\$	not i	ncluded	1f	20,458,294				
		Add lines	1a-1	f	1g	5,628,263	21,278,226			
						Business Code	21,270,220			
ne	2a Members	ship Dues				900099	719,140	719,140		
ever	b									
Program Service Revenue	c					_				
Serv										
gram	e									
Pro						_	0	0	0	
				vice reven 2f		719,140				
	-					s, interest, and	43,74	19	T	43,74
	other 49imilara	maunits)_c	etm <i>e</i>	nt of tay-e	evement	bond proceeds		10		43,74
	5 Royaltie					I				
				(i) Re	eal	(ii) Personal				
	6a Gross i	rents	6a		25,082	2				
	b Less: r expens		6b		25,082	2				
	c Rental income	or	6c		(0	0			
	d (Ness)e	ntal incom	ne or	(loss).						
	_			(i) Secu	ırities	(ii) Other				
	7a Gross am from sale assets of than inve	es of her	7a	18	3,599,019	9				
	b Less: cos other bas sales exp	sis and	7b	18	3,582,750	0				
	c Gain or (7 c		16,269	9	0			
	_	in or (loss	-			▶	16,26	59		16,26
Other Revenue	See Par b Less: d	uding \$ ions reported t IV, line 18 lirect expe	d on I • ense	640,147 of ine 1c).	8a 8b	495,00 476,15 events		13		18,84
Oth		es. rt IV, line : lirect expe	19 . ense	 s	9a 9b	vitica				
	c Net inc	ome or (Ic	oss) i	rom gami	ng acti	vities 🍃				
	10a Gross s	ales of in	vent	ory, less						

returns and allowances	10a					
b Less: cost of goods sold	10b					
c Net income or (loss) from sales of	inve	ntory				
		▶				
Miscellaneous Revenue		Business Code				
11a						
ь						
c						
d All other revenue			43,928	43,928	0	0
e Total. Add lines 11a-11d			43,928			
12 Total revenue. See instructions .	•		22,120,154	763,068	0	78,860

78,860 Form **990** (2021)

	m 990 (2021)				Page 10
Р	art IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must	st complete all colum	ns All other organ	izations must comple	ete column (A)
	Check if Schedule O contains a response or note to			· · · · ·	A COLUMN (A).
	not include amounts reported on lines 6b, 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	1,713	1,713		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,332,220	987,137	204,834	140,249
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,621,966	1,964,122	380,290	277,554
	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	63,893	51,378	7,110	5,405
9	Other employee benefits	166,088	116,078	31,514	18,496
	Payroll taxes	257,254	187,885	41,283	28,086
	Fees for services (non-employees):				
	a Management				
	b Legal	305,779	211,691	47,044	47,044
	c Accounting	49,993		49,993	
	d Lobbying	1,509,387	1,509,387		
	e Professional fundraising services. See Part IV, line 17	194,650			194,650
	f Investment management fees				
	g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,286,408	972,408	35,629	278,371
12	Advertising and promotion	63,145	61,600	I	1,545
	Office expenses	523,988	290,111	51,647	182,230
	Information technology	243,574	178,964	7,958	56,652
	Royalties				
16	Occupancy	750,010	548,634	97,489	103,887
17	Travel	2,460,231	2,289,727	37,941	132,563
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings	25,302	25,271	31	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	45,501	33,956	6,773	4,772
23	Insurance	82,024	63,823	9,231	8,970
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 Grassroots Operation	4,732,615	4,710,546		22,069
	b Mailings/Communications	4,135,199	2,063,287	10,041	2,061,871
	c Other Events	567,405	110,370		457,035

233,633

21,651,978

1,053,648

e All other expenses

25 Total functional expenses. Add lines 1 through 24e **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 \blacktriangleright $\boxed{\checkmark}$ if following SOP 98-2 (ASC 958-720). 201,076

747,617

16,579,164

24,700

1,043,508

7,857

4,029,306

Form **990** (2021)

306,031

		(2021)				Page 11
Р	art X	Balance Sheet				_
		Check if Schedule O contains a response or	note to any line in this Part IX .			
				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		487,290	1	547,511
	2	Savings and temporary cash investments	Γ	144,112	2	300,110
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net	11,776	4	39,547	
	5 6	Loans and other receivables from any current trustee, key employee, creator or founder, su controlled entity or family member of any of t Loans and other receivables from other discussions 4058(6)(1)), and present details	bstantial contributor, or 35% hese persons alified persons (as defined		5	0
	_	under section $4958(f)(1)$), and persons desc	_		6	0
sts	7	Notes and loans receivable, net	F		7	
Assets	8	Inventories for sale or use	<u> </u>	400 700	8	100.745
Ä	9	Prepaid expenses and deferred charges .	; • ,• • •	196,700	9	182,715
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 412,816			
	b	Less: accumulated depreciation	10b 315,186	124,520	10c	97,630
	11	Investments—publicly traded securities .	-52	2,939,480	11	1,768,762
	12	Investments—other securities. See Part IV, li	0	12		
	13	Investments—program-related. See Part IV, I	0	13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11		2,205,326	15	6,973,529
	16	Total assets: Add lines 1 through 15 (must e	6,109,204	16	9,909,804	
	17	Accounts payable and accrued expenses .	1,285,095	17	794,532	
	18	Grants payable		18		
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
S	21	Escrow or custodial account liability. Comple	<u> </u>		21	
Liabilities	22	Loans and other payables to any current or fo key employee, creator or founder, substantial controlled entity or family member of any of t	rmer officer, director, trustee, I contributor, or 35%		22	0
	23	Secured mortgages and notes payable to unre	elated third parties		23	
	24	Unsecured notes and loans payable to unrela	-		24	
	25	Other liabilities (including federal income tax parties, and other liabilities not included on I Complete Part X of Schedule D		2,076	25	3,825,063
	26	Total liabilities. Add lines 17 through 25 .		1,287,171	26	4,619,595
es		Organizations that follow FASB ASC 958, che	ck here 🕨 🔽 and complete			
Fund Balances	27	lines 27, 28, 32, and 33. Net assets without donor restrictions		4,822,033	27	5,290,209
B		No	1			1
Pu	28	Net assets with donor restrictions			28	
Ŧ		Organizations that do not follow FASB ASC 9	58, check here 🕨 📙 and			
S or	29	complete lines 29 through 33. Capital stock or trust principal, or current fun	-		29	
Assets	30	Paid-in or capital surplus, or land, building or	· · ·		30	
	31	Retained earnings, endowment, accumulated	income, or other funds		31	
Net	32	Total net assets or fund balances		4,822,033	32	5,290,209
~	33	Total liabilities and net assets/fund balances		6,109,204	33	9,909,804

Both consolidated and separate basis

2c

За

3b

Yes

Νo

Form 990 (2021)

Consolidated 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?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

If the organization changed either its oversight process or selection process during the tax year, explain in

Separate basis

Single Audit Act and OMB Circular A-133?

Schedule O.

Form 990 (2021) **Additional Data** Return to Form **Software ID: 22016089** Software Version: 2022v5.0 Form 990, Special Condition Description: **Special Condition Description**

SCHEDULE C (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Susan B Anthony List Inc

Part I-A

6

Political Campaign and Lobbying Activities

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

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

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

OMB No. 1545-0047 2021

Open to Public Inspection

Employer identification number

54-1850126

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

- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.
- If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then
- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V,

Complete if the organization is exempt under section 501(c) or is a section 527 organization.

line 35c (Proxy Tax) (see separate instructions), then Section 501(c)(4), (5), or (6) organizations: Complete Part III.

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

1	Provide a description of the definition of "political can	struct	ions for				
2			ictions	b	\$		706,561
3	Volunteer hours for politic	cal campaign activities. Se	ee instructions		•		0
Par	t I-B Complete if the	e organization is exe	empt under section 50)1(c)(3).			
1	Enter the amount of any e	excise tax incurred by the	organization under section	4955	\$		
2	Enter the amount of any	excise tax incurred by orga	anization managers under se	ection 4955	\$		
3	If the organization incurre	ed a section 4955 tax, did	it file Form 4720 for this ye	ar?		Yes	☐ No
4a	Was a correction made? .					Yes	☐ No
b	If "Yes," describe in Part	IV.	mnt under costion E	O1(c), except section 5	-01/	۵۱/۵۱	
	•						
1	3.3						706,561
2	Enter the amount of the fi exempt function activities	\$		0			
3	Total exempt function exp	1120-POL, line 17b	\$		706,561		
4	Did the filing organization	file Form 1120-POL for th	is year?			V Yes	No
5	organization made payme amount of political contrib	nts. For each organization butions received that were	listed, enter the amount pai promptly and directly delive	ction 527 political organization d from the filing organization ered to a separate political on ace is needed, provide inforn	ı's fun rganiz	ds. Also er ation, such	nter the n as a
(a)	Name	(b) Address	(c) EIN	(d) Amount paid filing organization funds. If none, e -0	on's	political c receive promptly delive separat organizati	mount of ontributions ved and and directly red to a e political ion. If none, er -0
1							
2							
3							
4							
5							

Cat. No. 50084S

Schedule C (Form 990) 2021

Part II-B

Page 3

For e	or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying		(a)		(b)	
activ		Yes	No		Amoun	t
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:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total. Add lines 1c through 1i					
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?					
Par	t III-A Complete if the organization is exempt under section $501(c)(4)$, section section $501(c)(6)$.	501 (c))(5),	or		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		Ĺ	1	Yes	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		Νo
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		Νo
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
		2a	l			

Carryover from last year

Return Reference

Schedule C, Part I-A, Line 1

Description of Political Activities

Part IV

3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .

Supplemental Information

If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?

Taxable amount of lobbying and political expenditures. See Instructions

2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

filed Form 5768 (election under section 501(h)).

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and

The organization made expenditures to educate voters on life issues.

Explanation

2b

2c

3

4

5

Schedule C (Form 990) 2021

Software Version: 2022v5.0

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.

2021
Open to Public

OMB No. 1545-0047

Open to Public Inspection

	me of the organization an B Anthony List Inc		Employer identification number
Jus	an a chalony list inc		54-1850126
Pa	rt I Organizations Maintaining Donor A		
	Complete if the organization answered		
		(a) Donor advised funds	(b) Funds and other accounts
	Total number at end of year		
	Aggregate value of contributions to (during year)		
	Aggregate value of grants from (during year)		
	Aggregate value at end of year		
5	Did the organization inform all donors and donor ad the organization's property, subject to the organization	<u> </u>	
•	Did the organization inform all grantees, donors, and charitable purposes and not for the benefit of the do impermissible private benefit?	nor or donor advisor, or for any other purpo	se conferring
Pa	Conservation Easements. Complete if the organization answered		
	Purpose(s) of conservation easements held by the o		
	Preservation of land for public use (e.g., recreat	ion or education) Preservation of an	historically important land area
	Protection of natural habitat	Preservation of a c	ertified historic structure
	Preservation of open space		
		ld a gualified concentration contribution in th	as form of a concentration
2	Complete lines 2a through 2d if the organization he easement on the last day of the tax year.	id a qualified conservation contribution in tr	Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements	5	2b
c	Number of conservation easements on a certified his	storic structure included in (a)	2c
d	Number of conservation easements included in (c) a historic structure listed in the National Register		2d
3	Number of conservation easements modified, transfetax year		d by the organization during the
	Number of states where property subject to conserv	vation easement is located	
ļ 5			ling of
•	Does the organization have a written policy regarding violations, and enforcement of the conservation eas	- · · · · · · · · · · · · · · · · · · ·	Yes No
•	Staff and volunteer hours devoted to monitoring, in: year	specting, handling of violations, and enforci	ng conservation easements during the
,	Amount of expenses incurred in monitoring, inspect \$ \\$	ing, handling of violations, and enforcing co	onservation easements during the year
3	Does each conservation easement reported on line $(B)(i)$ and section $170(h)(4)(B)(ii)$?		tion 170(h)(4) . Yes No
)	In Part XIII, describe how the organization reports balance sheet, and include, if applicable, the text of		·
aı	the organization's accounting for conservation ease till Organizations Maintaining Collecti	ons of Art, Historical Treasures, o	or Other Similar Assets.
_	Complete if the organization answered If the organization elected, as permitted under FAS	•	toment and halance cheet works
.a	of art, historical treasures, or other similar assets h service, provide, in Part XIII, the text of the footno	eld for public exhibition, education, or rese	arch in furtherance of public
b	If the organization elected, as permitted under FAS art, historical treasures, or other similar assets held provide the following amounts relating to these item	I for public exhibition, education, or research	
((i) Revenue included on Form 990, Part VIII, line 1		🕨 \$ 0
(1	i) Assets included in Form 990, Part X		▶ \$ 18,000
2	If the organization received or held works of art, his following amounts required to be reported under FA	torical treasures, or other similar assets for	
а	Revenue included on Form 990, Part VIII, line 1.		• \$
	Assets included in Form 990, Part X		

3	Using the organization's acquisition, access collection items (check all that apply):	ion, and othe	r records,	check a	ny of t	he following	that are a signific	cant use o	of its
а	Public exhibition			d $ abla$	Loan	or exchange	programs		
b	Scholarly research			е 🗀	Other				
c	Preservation for future generations								
4	Provide a description of the organization's of Part XIII.	collections and	d explain l	how the	y furthe	er the organiz	zation's exempt p	urpose in	
5	During the year, did the organization solicit assets to be sold to raise funds rather than							Yes	▼ No
Pa	rt IV Escrow and Custodial Arrange Complete if the organization and Part X, line 21.		s" on Fori	m 990,	Part I	V, line 9, o	r reported an a	mount o	n Form 990,
1a	Is the organization an agent, trustee, custo included on Form 990, Part X?							Yes	□ No
ь	If "Yes," explain the arrangement in Part X	III and compl	ete the fo	llowing	able:		An	nount	
С	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year								
f	Ending balance								
	•							- Voc	□ No
2a	Did the organization include an amount on	Form 990, Pa	rt X, line	21, for 6	escrow	or custodial a	account liability?	res	□ IAO
ь	If "Yes," explain the arrangement in Part X	III. Check he	re if the e	xplanati	on has	been provide	ed in Part XIII .	□	
Pa	rt V Endowment Funds.								
	Complete if the organization and	wered "Yes	" on Fori	m 990,	Part I	V, line 10.			
		(a) Current	year	(b) Prior	year	(c) Two years	back (d) Three yea	rs back (e) Four years back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and losses								
А	Grants or scholarships	1	1		ĺ		1	I	
	Other expenditures for facilities								
Ū	and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the cur	rent year end	d balance	(line 1g	colum	n (a)) held a	s:		
а	Board designated or quasi-endowment								
b	Permanent endowment								
С	Term endowment								
	The percentages on lines 2a, 2b, and 2c sh	ould equal 10	00%.						
3а	Are there endowment funds not in the posse	ession of the o	organizati	on that	are held	d and adminis	stered for the		
	organization by:							2-73	Yes No
	(i) Unrelated organizations							3a(i) 3a(ii	
b	(ii) Related organizations		required	on Sche	· · · dule R?			3b	'
-									
4	Describe in Part XIII the intended uses of t		on's endo	wment f	unds.				
Pa	rt VI Land, Buildings, and Equipm Complete if the organization and	swered "Yes							
	Description of property (a) Cost or oth (investme		b) Cost or o	ther basis	(other)	(c) Accumula	ated depreciation	(d)	Book value
1a	Land								
b	Buildings								
c	Leasehold improvements								
d	Equipment				349,816		270,186		79,630

18,000

97,630

45,000

63,000

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

Complete if the organization answered "Yes" on Form 99 (a) Description of security or category	(b) Bo	ok	(c) Method of v	/aluation:
(including name of security) (1) Financial derivatives	value	e Cost	or end-of-yea	r market value
(2) Closely-held equity interests				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	•			
Part Investments - Program Related. VIII Complete if the organization answered 'Yes' on Form 9	90. Part	IV, line 11c. Se	ee Form 990,	Part X, line 13.
(a) Description of investment	<i>y</i>	(b) Book value	(c) Me	thod of valuation: -of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.) Part IX Other Assets.	٠			
Complete if the organization answered 'Yes' on Form 99	0, Part	IV, line 11d. Se	e Form 990, Pa	
(a) Description (1)Due from subsidiaries				(b) Book value 3,598,913
(2)Security deposits (3)Operating lease right-of-use asset				45,943 3,328,674
(3)				.,,
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)				6,973,529
Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 99 See Form 990, Part X, line 25.	0, Part 1	IV, line 11e or 1	11f.	
1. (a) Description of liability				(b) Book value
(1) Federal income taxes (3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)			•	3,825,063
2. Liability for uncertain tax positions. In Part XIII, provide the text of the foorganization's liability for uncertain tax positions under FIN 48 (ASC 740).		-		ements that reports the
XIII	CON HEI	the text of th		provided in rail

Return.

2	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:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
C	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
			_	
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	12.)	5	
Part	XII Reconciliation of Expenses per Audited Financial Sta		s per	Return.
	Complete if the organization answered 'Yes' on Form 990, F		1	
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	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
	,			
			2e 3	
e 3	Add lines 2a through 2d		_	
e 3 4	Add lines 2a through 2d		_	
e 3 4	Add lines 2a through 2d	2d	_	

Reconciliation of Revenue per Audited Financial Statements With Revenue per

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Part XIII

Add lines **4a** and **4b**

Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line

collections

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

Schedule D, Part III, Line 4 Collections of art - description of

2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. Explanation

The organization's work of art consists of a donated painting used as office decoration.

4c

SCHEDULE G (Form 990)

Supplemental Information Regarding Fundraising or Gaming Activities

organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the

2022

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Inspection Go to www.irs.gov/Form990 for instructions and the latest information Name of the organization **Employer identification number** Susan B Anthony List Inc 54-1850126 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations e Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising Ves No services? If Yes, list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of (ii) Activity (vi) Amount paid to (iii) Did (iv) Gross receipts (v) Amount paid to individual fundraiser have from activity (or retained by) (or retained by) or entity (fundraiser) fundraiser listed in organization custody or control of col. (i) contributions? Yes Mail Solicitations The Lukens Company 2800 Shirlington Rd 9th 1,792,954 1,987,604 194,650 Nο Floor Arlington, V A 22206 1,987,604 194,650 1,792,954 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

C A, C O, C T, D E, D C, FL, G A, A L, H I, I D, I L, I N, I A, KS, KY, L A, M E, A K, M D, M A, M I, M N, M S, M O, M T, N E, N V, N H, N J, N M, N Y, N C, N D, O H, O K, O R, P A, A Z, R I, S C, S D, T N, T X, U T, V T, V A, A R, W A, W V, W I, W Y

	edule G (Form 990) 2022				Page 2
Pa	rt II Fundraising Events. Com				
	more than \$15,000 of fundr		ions and gross incom	e on Form 990-EZ, li	nes 1 and 6b. List
	events with gross receipts g				1
		(a)Event #1	(b) Event #2	(c)Other events	(d) Total events
		Gala	Dallas Summit		(add col. (a) through col. (c))
		(event type)	(event type)	(total number)	55 (5))
d)					
Revenue					
Vel					
Re					
	1 Gross receipts	854,146	281,001		1,135,147
		031/110	201/001		1/133/11/
	2 Less: Contributions	574,146	66,001		640,147
	3 Gross income (line 1 minus line 2)	280,000	215,000	0	495,000
		200,000	213,000	0	473,000
	4 Cash prizes				
**	5 Noncash prizes				
Direct Expenses	6 Rent/facility costs	96,008	20,714		116,722
en	,	,	,		
X	7 Food and beverages	291,199	42,471		333,670
せ	8 Entertainment	17,800	7,965		25,765
9	9 Other direct expenses				
	·	4.16	`		
	10 Direct expense summary. Add lines	4 through 9 in column (a)		476,157
	11 Net income summary. Subtract line 1				18,843
Pai	rt IIII Gaming. Complete if the or		"Yes" on Form 990, P	art IV, line 19, or rep	orted more than
	\$15,000 on Form 990-EZ, li	ne 6a.		<u> </u>	1
ne		(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming (add
Revenue		(a) bingo	bingo/progressive	(c) other gaming	col.(a) through col.(c))
Sel			bingo		
ш	1 Gross revenue				
98					
Sus	2 Cash prizes				
Direct Expenses	3 Noncash prizes				
m					
9	4 Rent/facility costs				
ā	5 Other direct expenses				
	3 Other direct expenses	Yes %	Yes%	☐ Yes%	
		res		_	
	6 Volunteer labor	No	No	□ No	
	7 Direct expense summary. Add lines 2	2 through 5 in column (d)		
	8 Net gaming income summary. Subtra	act line 7 from line 1 colu	ımn (d)		
	A Net gaining meome summary. Subtre	ice mic 7 mom mic 1, con	, , , , , , , , , , , , , , , , , , ,	<u> </u>	_
9	Enter the state(s) in which the organiz	ation conducts gaming a	ctivities:		
а	Is the organization licensed to conduct	t gaming activities in eac	ch of these states? .		Yes No
b	If "No," explain:				
					;
10a	Were any of the organization's gaming				Yes No
b	If "Yes," explain:				
		-			

Sche	dule G (Form 990) 2022					Page 3
11	Does the organization conduct gamin	ng activities with nonmemb	pers?		Yes No	
12			a member of a partnership or other entity		Yes No	
13	Indicate the percentage of gaming a	ctivity conducted in:				
а	The organization's facility			13a		%
b	An outside facility			13b		%
14	Enter the name and address of the p	erson who prepares the or	ganization's gaming/special events books a	and rec	ords:	•
	Name 🕨					
	Address					
15a	Does the organization have a contract		hom the organization receives gaming		Yes No	
b	If "Yes," enter the amount of gaming amount of gaming revenue retained by		rganization ▶ \$ and	1 the		
С	If "Yes," enter name and address of	the third party:				
	Name					
	Address					
16	Gaming manager information:					
	Name 🕨					
	Gaming manager compensation ▶ \$					
	Description of services provided					
	•					
	Director/officer	Employee	☐ Independent contractor			
	E Directory officer	Employee	macpendent contractor			
17	Mandatory distributions:					
а	•	ate law to make charitable	distributions from the gaming proceeds to			
	retain the state gaming license? $\ .$				☐Yes ☐No	
b			ibuted to other exempt organizations or sp	ent		
	in the organization's own exempt act				(···) 1 ()	
Pal			nations required by Part I, line 2b, co as applicable. Also provide any additi			
	instructions.	155, 156, 10, and 175,		onan n	mormacioni se	
	Return Reference	THE LINKENG COMPANY	Explanation	T W.T.		
	dule G, Part I, Line 2b(v) payment of or payment of expenses	PROFESSIONAL FUNDRA PROFESSIONAL FUNDRA STIPULATES THAT THEY		R PROV GREEM LIES A	/IDING IENT ALSO .ND RELATED NSES EQUALED)
Α.	Iditional Data		Sched	ıle G (F	orm 990) 2022	1
AC	IUILIOIIAI DALA				Return to For	m
		Software	• ID: 22016089			

Software Version: 2022v5.0

Form 990) For certain Officers,		For certain Officers, D	pirectors, Trustees, Key Employees, and Highe Compensated Employees				
	tternal Revenue Service		► Attach to Form 990.		Open	to Pu	blic
		ion			fication nu	mber	
For m 990) For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990. Department of the Treasury Internal Revenue Service Name of the organization Susan B Anthony List Inc Part I Questions Regarding Compensation							
1a						Yes	No
	Travel for cor	mpanions ation and gross-up payments	Payments for business use of personal Health or social club dues or initiat	onal residence ion fees			
b	•	The state of the s			1b		
2		on require substantiation prior to	reimbursing or allowing expenses incurred by	all	İ	1	

	Tax idemnification and gross-up payments		Health or social club dues or initiation fees		
	Discretionary spending account		Personal services (e.g., maid, chauffeur, chef)		
b	If any of the boxes on Line 1a are checked, did the orga reimbursement or provision of all of the expenses desc			1b	
2	Did the organization require substantiation prior to reim directors, trustees, officers, including the CEO/Executiv			2	
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director. Check all that a used by a related organization to establish compensation	pply	. Do not check any boxes for methods		
	Compensation committee Independent compensation consultant Form 990 of other organizations		Written employment contract Compensation survey or study Approval by the board or compensation committee		
4	During the year, did any person listed on Form 990, Parorganization or a related organization:	rt VII	I, Section A, line 1a, with respect to the filing		
а	Receive a severance payment or change-of-control pay	/men	it?	4a	Νo
L	Participate in or receive nayment from a supplemental	non	qualified retirement plan?	4h	N o

	• • • •				
Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.					
	Compensation committee Written employment contract				
	✓ Independent compensation consultant ✓ Compensation survey or study				
	Form 990 of other organizations Approval by the board or compensation committee				
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:				
а	Receive a severance payment or change-of-control payment?	4a		Νo	
b	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?				
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No	
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:				
а	The organization?	5a		Νo	
b	Any related organization?	5b		Νo	
	If "Yes," on line 5a or 5b, describe in Part III.				
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:				
а	The organization?	6a		Νo	
b	Any related organization?	6b		Νo	
	If "Yes," on line 6a or 6b, describe in Part III.				
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed				

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

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal (A) Name and Title			of W-2, 1099-MIS		(C) Retirement	(D)	(E) Total of	(F)
(A) raine and rate			(ii) Bonus & incentive compensation		and other deferred compensation	Nontaxable benefits	columns (B)(i)-(D)	Compensation i column (B) reported as deferred on prio Form 990
1Marjorie Dannenfelser	(i)	377,327	47,500	0	12,200	1,803	438,830	0
President								
	(ii)	0	0	0	0	0	0	0
2Emily Midgette	(i)	298,792	35,000	0	12,200	28,797	374,789	0
Executive VP/Acting Secretary	(ii)							
	(11)	0	0	0	0	0	0	0
3 Jennifer Gross	(i)	187,434	8,000	0	8,094	25,594	229,122	0
VP of Administration/Treasurer	(ii)							
4William Valentine II		0	0	0	0	0	0	0
	(i)	235,631	15,000	0	10,415	28,433	289,479	0
Vice President of Political Affairs	(ii)							
5Marilyn Musgrave	/:\	193,965	0	0	0 7,769	0 2,367	0 204,101	0
	(i)					2,307	204,101	
VP, Government Affairs	(ii)			 0	 0	0	0	 0
6Mallory Carroll	(i)	172,810	0	0	7,072	10,431	190,313	0
Vice President of Communications								
	(ii)	0	0	0	0	0	0	0
7Michael Bars	(i)	195,339	10,000	0	0	21,222	226,561	0
ED, Election Transparency Initiative								
	(ii)	0	0	0	0	0	0	0
8Charles Donovan	(i)	0	0	0	0	0	0	0
CLI President	(ii)							
		235,585	0	0	6,798	15,015	257,398	0
9Stephen Billy	(i)	77,275	0	0	4,819	15,624	97,718	0
VP of State Affairs	(ii)	136,114			3,808	4,901	144,823	 0
			U U	, J	5,000	7,301	177,023	U
		I	I	I			Schedule 17	Form 990) 2022

Schedule J (Form 990) 2022

Return Reference Explanation

Schedule J (Form 990) 2022

Schedule J, Part I, Line 7 Non-fixed The organization made nonfixed payments in the form of discretionary bonuses.

payments



SCHEDULE M (Form 990)

Noncash Contributions

2022

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OMB No. 1545-0047

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Department of the Treasury Internal Revenue Service

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

▶ Attach to Form 990.

Inspection

	e of the organization B Anthony List Inc				Employer identificat	tion nu	mber	
	,				54-1850126			
Pa	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, lin	Method of o		_	ıts
1	Art—Works of art							
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	4	5,628,26	3 Selling cost			
10	Securities—Closely held stock							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
	Archeological artifacts							
	Other ► ()							
	Other ► ()							
27	Other ► ()							
28	Other ▶ ()				<u> </u>			
29	Number of Forms 8283 received by for which the organization complete				29			C
							Yes	No
30a	During the year, did the organizat it must hold for at least three yea exempt purposes for the entire ho	rs from the	date of the initial contribut					
	· · · · · · · · · · · · · · · · · · ·					30a		Νo
	If "Yes," describe the arrangemen	nt in Part II.				24	V	
31	Does the organization have a gift	acceptance	policy that requires the re	eview of any nonstandard	contributions?	31	Yes	
32a	Does the organization hire or use contributions?	third partie	s or related organizations	to solicit, process, or sell	noncash	32a		ı N.a

b If "Yes," describe in Part II.

describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

Page 2 Schedule M (Form 990) (2022) Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the Part II organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. Return Reference Explanation Schedule M, Part I Explanations of Securities - Publicly traded - The number of contributions represent the number of contributions reporting method for number of received, not the number of items donated. contributions Schedule M (Form 990) (2022)

Additional Data			Return to Form
	Software ID:	22016089	
	Software Version:	2022v5.0	

SCHEDULE O

Department of the Treasury

Internal Revenue Service

(Form 990)

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.

Open to Public

Inspection **Employer identification number**

OMB No. 1545-0047

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

Name of the organization Susan B Anthony List Inc 54-1850126 Return **Explanation** Reference Form 990. The Form 990 is prepared by an independent CPA firm. It is reviewed in detail by the Executive Vice President, Vice President Part VI. Line of Administration/Treasurer and legal counsel. The entire board receives a copy of the final 990 after it is filed with the IRS. 11b Review of form 990 by governing body Form 990. Officers, board members and key employees sign annual conflict of interest statements. The Executive Vice President and the Part VI. Line Vice President of Administration/Treasurer review all conflict of interest statements. If any conflicts are noted they are 12c Conflict elevated to the President and the Chairman of the Board. At board meetings, board members are reminded to abstain from of interest voting on matters where they may have a conflict. policy Form 990. The organization uses a compensation consultant along with a compensation study to determine and set the compensation for Part VI. Line its officers and key employees. The organization's board of directors reviews and approves the compensation study and sets 15a Process salary ranges for officers and key employees. The process is documented in the minutes. The final determination of to establish compensation for the President is determined by the compensation committee (consists of four board members). The committee discusses the appropriate compensation given the board approved salary range, performance, and the organization's overall compensation

of top management range and the decision is documented. official Form 990. See narrative for Form 990, Part VI, Line 15a.

financial health. The President determines the final salary of the Executive Vice President based on the board approved salary Part VI. Line 15b Process to establish compensation of other employees Form 990. The organization makes these documents available in accordance with applicable law. Part VI, Line 19 Required documents available to the public Form 990. Per the IRS filing instructions, the organization has reported, as applicable, the gross payments made to independent

Part VII. contractors that include the expenses and fees when the expenses have not been separately reported to the organization. Section B. Line 2 Form 990. Other Income - Total Revenue: 43928, Related or Exempt Function Revenue: 43928, Unrelated Business Revenue: , Revenue Part VIII. Line Excluded from Tax Under Sections 512, 513, or 514:; 11d Other Miscellaneous Revenue For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat. No. 51056K Schedule O (Form 990) 2021

SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.

▶ Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.

OMB No. 1545-0047 2021

Open to Public Inspection

Schedule R (Form 990) 2021

Name of the organization Susan B Anthony List Inc

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

Employer identification number

							54-	1850126				
Part I Identification of Disregarded Entities. Comple	ete if the	organization a	nswere	d "Yes" on	Form 99	0, Part IV,	line	33.				
(a) Name, address, and EIN (if applicable) of disregarded entity		(b) Primary activ	ity	(c) Legal domicile or foreign co	e (state ountry)	(d) Total incom	ne	(e) End-of-year asset	es Dir	(f) rect controlli entity	ng	
Part II Identification of Related Tax-Exempt Organiz or more related tax-exempt organizations during th			organ	ization ansv	vered "Y	es" on For	m 99	00, Part IV, line	e 34 because	e it had	one	
(a) Name, address, and EIN of related organization		(b) mary activity		(c) domicile (state reign country)	Exempt	(d) Code section		(e) blic charity status ection 501(c)(3))	(f) Direct cont entity	trolling	Sec 512 (1 contr enti	ity?
(1)Susan B Anthony List Inc Candidate Fund 2776 S Arlington Mill Drive 803	Political A	Action Committee		VA	527				Susan B Anthony	y List Inc	Yes	No
Arlington, VA 22206 91-1997518												
(2)Susan B Anthony List Education Fund 2776 S Arlington Mill Drive 803	Education	nal arm of SBA List		VA 501(c)		501(c)(3) 7			Susan B Anthony	y List Inc	Yes	
Arlington, VA 22206 26-4788700												
(3) Women Speak Out PAC 2776 S Arlington Mill Drive 803 Arlington, VA 22206	Political A	Action Committee		VA	527				Susan B Anthony	y List Inc	Yes	
46-1004594 (4)Susan B Anthony List Action PAC 2776 S Arlington Mill Drive 803	Political A	Action Committee		VA	527				Susan B Anthony	y List Inc	Yes	
Arlington, VA 22206 83-2112869												
(5)Pro-Life America General Purpose Committee 1707 1/2 Post Oak Blvd Box 663	Political A	Action Committee		TX	527				Susan B Anthony	y List Inc	Yes	
Houston, TX 770568073 84-5090996												
(6)Women Speak Out Virginia - 2021 2776 S Arlington Mill Drive 803	Political A	Action Committee		VA	527				Susan B Anthony	y List Inc	Yes	
Arlington, VA 22206 46-2196211												
												1

Cat. No. 50135Y

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34	٠,
because it had one or more related organizations treated as a partnership during the tax year.	

					, -							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predominant income(related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K- 1 (Form 1065)	part	ral or aging mer?	(k) Percentage ownership
							Yes	No		Yes	No	
Part IV Identification of Related Organ 34 because it had one or more rela	nizations Taxable ated organizations	as a Contreated as	rporation a corpora	or Trust. Contion or trust do	mplete if uring the	the orga tax year	nization	answered	"Yes" on	Form 9	90, Part	IV, line
(a)	(b)		c)	(d)	(e))	(f)	(a)	(t	1)		(i)

(a) Name, address, and EIN of related organization	related organization domicile		(d) Direct controlling entity	(e) Type of entity (C corp, S	(f) Share of total income	(g) Share of end- of-year	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?			
		(state or foreign country)		corp, or trust)			Yes	No			
							Schedule	R (Form 99	0) 2021		

Sche	dule R (Form 990) 2021		Pag	ge 3
Pa	Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to related organization(s)	1b		No
С	Gift, grant, or capital contribution from related organization(s)	1c		No
d	Loans or loan guarantees to or for related organization(s)	1d		No
е	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	1 f		No
g	Sale of assets to related organization(s)	1 g		No
h	Purchase of assets from related organization(s)	1h		No
i	Exchange of assets with related organization(s)	1i		No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No
1	Performance of services or membership or fundraising solicitations for related organization(s)	11		No
	Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o	Sharing of paid employees with related organization(s)	10	Yes	
р	Reimbursement paid to related organization(s) for expenses	1p	Yes	
q	Reimbursement paid by related organization(s) for expenses	1q	Yes	
•				
r	Other transfer of cash or property to related organization(s)	1r		No
s	Other transfer of cash or property from related organization(s)	1s		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			
	(a) Name of related organization (b) Transaction Transaction type (a-s) (c) Method of determining among type (a-s)	ount i	nvolved	i
(1) Su	ısan B Anthony List Education Fund N 1,281,788 Actual Cost			
(2) Su	usan B Anthony List Education Fund 0 1,338,617 Cost of Actual and Average Hours			
(3) Su	usan B Anthony List Education Fund Q 61,274 Actual Cost			

N

Q

150,709

183,117

Actual Cost

Actual Cost

(4)Women Speak Out PAC

(5)Women Speak Out PAC

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

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

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships. (a) (b) (c) (d) (e) (f) (g) (h) (i) (j) (k) Name, address, and EIN of entity Primary Legal Predominant Are all partners Share of Share of Share of Share of Disproprtionate Code V-UBI General or Percentage													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from	Are al se 501 orgar	(e) Are all partners section 501(c)(3) organizations?		(g) Share of end-of-year assets	re of Disproprtionat f-year allocations?		of Schedule K-1) ral or aging ner?	(k) Percentage ownership
			tax under sections 512- 514)	Yes	No			Yes	No	(Form 1065)	Yes	No	
										S	chedule F	? (Form 9	990) 2021