efile GRAPHIC print - DO NOT PROCESS | ORIGINAL DATA - Production DLN: 93493319057039 OMB No. 1545-0047 Form 990 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) 9 Do not enter social security numbers on this form as it may be made public. Department of the Treasury Open to Public ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service Inspection A For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 C Name of organization B Check if applicable: D Employer identification number Amer cans for Prosperity Foundation ☐ Address change 52-1527294 ☐ Name change Doing business as ☐ Initial return A Final return/termin. E Telephone number Amended return Number and street (or P.O. box if mail is not delivered to street address) 1310 N Courthouse Rd No 700 C Application pending (703) 224-3200 City or town, state or province, country, and ZIP or foreign postal code Arlington, VA 22201 G Gross receipts \$ 17,933,099 Name and address of principal officer: H(a) Is this a group return for Emily Seidel Yes No subordinates? 1310 N Courthouse Rd No 700 Are all subordinates Arlington, VA 22201 H(b) ☐ Yes ☐No included? Tax-exempt status: **☑** 501(c)(3) **☐** 501(c)() **◄** (insert no.) 4947(a)(1) or 527 If "No," attach a list. (see instructions) Website: www.americansforprosperityfoundation.org H(c) Group exemption number > L Year of formation: 1987 M State of legal domicile: DE K Form of organization: Corporation Trust Association Other Part I Summary 1 Briefly describe the organization's mission or most significant activities: Educate US persons to increase awareness about a free economy Governance Check this box > ____ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) Activities & 4 Number of independent voting members of the governing body (Part VI, line 1b) . 4 4 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) . 5 85 6 Total number of volunteers (estimate if necessary) . 6 113 7a Total unrelated business revenue from Part VIII, column (C), line 12 . 7a 0 b Net unrelated business taxable income from Form 990-T, line 34 . 71) 0 **Current Year Prior Year** 8 Contributions and grants (Part VIII, line 1h) . 17,660,453 17,070,811 Ravenue 9 Program service revenue (Part VIII, line 2g) . . 249,769 158,577 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 38,893 51,015 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 17,949,115 17,280,403 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . 284,100 43,850 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 10,178,717 8,592,093 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 b Total fundraising expenses (Part IX, column (D), line 25) \$\sum_{254,183}\$ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 9,829,978 10,200,222 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 20,292,795 18,836,165 19 Revenue less expenses. Subtract line 18 from line 12 . -2,343,680 -1,555,762 Assets of Balances **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) . . 7,842,841 10,157,247 5,244,121 4,485,477

Signature Block

Part II

22 Net assets or fund balances. Subtract line 21 from line 20 .

3,357,364

4,913,126

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Sig	mature of off cer			2019-11-15 Date	
		tor E Bernson Jr Secretary, VP pe or print name and title				
Paid	- Dimmin	Print/Type preparer's name	Preparer's signature	Date	Check D if	PTIN P00721951
Prepar	er	Firm's name 🕨 Capin Crouse LLF			Firm's EIN 🕨 3	6-3990892
Use Or	nly	Firm's address > 1330 Avenue of t 23A New York, NY 10			Phone no. (212	.) 653-0681
May the II	RS disc	uss this return with the preparer	shown above? (see instructions) .	S	* * ** *	. Yes 🗆 No
For Pape	rwork	Reduction Act Notice, see the	separate instructions.	Cat.	No. 11282Y	Form 990 (2018

Form	990 (2018)				Page 2
Pa	ırt III	Statement of Program S	ervice Accomplis	hments		
_				any line in this Part III	** * * * * * * * * * * *	
1		y describe the organization's mis				
Educ	ate US	persons to increase awareness o	the operation and v	alue of a free economy		
2	Did t	he organization undertake any sig	nificant program ser	vices during the year w	hich were not listed on	
	the p	rior Form 990 or 990-EZ?				🗌 Yes 🗹 No
	If "Y	es," describe these new services o	n Schedule O.			
3	Did t	he organization cease conducting,	or make significant	changes in how it cond	ucts, any program	
	servi	ces?				Yes Vo
	If "Y	es," describe these changes on Sc	hedule O.			
4	Secti	ribe the organization's program so on 501(c)(3) and 501(c)(4) organ revenue, if any, for each program	izations are required	nts for each of its three to report the amount	largest program services, as meas of grants and allocations to others,	sured by expenses. the total expenses,
4a	(Code	:) (Expenses \$	13,342,324	including grants of \$) (Revenue \$	158,577)
	Nat o	nal office - educate the American Public	to increase awareness	of the federal government's	s impact on the operation and value of a	free economy.
4b	(Code	:) (Expenses \$	1,436,310	including grants of \$	43,850) (Revenue \$)
	State	chapters - educate the American Public	to increase awareness	of state government impac	t on the operat on and value of a free ec	onomy.
4c	(Code	:) (Expenses \$		including grants of \$) (Revenue \$	У
	=					
	\					
4d	Othe	r program services (Describe in S	chedule O.)			
	(Ехр	enses \$	including grants of	\$) (Revenue \$)
4e	Tota	l program service expenses 🕨	14,778,6	34		

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
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		No
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	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 😼	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
	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	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
Ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
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 1, Parts I and III	22		No
			orm QQ	0 /2019

Checklist of Required Schedules (continued)

Part IV

			Yes	No			
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes				
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No			
Ь	Did the organization invest any proceeds of tax-exempt bonds beyonc a temporary period exception?	24b					
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c					
đ	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d					
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No			
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No			
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No			
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No			
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):						
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No			
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No			
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes				
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes				
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Nο			
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No			
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No			
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		No			
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes				
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No			
b	If 'Yes' to line 35a, did the organization receive any payment from or angage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line $2 \cdot \cdot .$	35Ь					
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	Yes				
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI						
38	Did the organization complete Schedule O and provide explanations ir Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes				
Pa	statements Regarding Other IRS Filings and Tax Compliance						
	Check if Schedule O contains a response or note to any line in this Part V		· ·	<u> </u>			
1 >	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 124		Yes	No			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0						
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming						
	(gambling) winnings to prize winners?	1c	Yes				
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2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No			
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					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No			
b	If "Yes," enter the name of the foreign country:						
E	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	_		No			
		5b		140			
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b					
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b					
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No			
d	If "Yes," indicate the number of Forms 8282 filed during the year						
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No			
f	7f		No				
g	7g						
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8					
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a					
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b					
10	Section 501(c)(7) organizations. Enter:	- ''					
а	Initiation fees and capital contributions included on Part VIII, line 12 10a						
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities						
11	Section 501(c)(12) organizations. Enter:						
	Gross income from members or shareholders						
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)						
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year, 12b						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.						
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a					
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						
С	Enter the amount of reserves on hand						
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No			
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b					
	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? If "Yes," see instructions and file Form 4720, Schedule N	15		No			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No			
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Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No	" respo	onse to i	ines
10	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			✓
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 year 1a			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 4			
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?	2		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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4	Yes	
5	Did the 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			
b	members of the governing body?	7a 7b	Yes	No
8	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by			
	the following:			
	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	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
_Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code		
10-	Did the averagination have been been bounded on 600 to 2		Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
D	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?	10ь	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in 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 in 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 in 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
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			
	List the States with which a copy of this Form 990 is required to be filed			
	AK , AL , AR , AZ , CA , CT , CO , DC , DE , ID , IL , IN , KS , KY , LA , MA , MD , ME , MT , NC , ND , NE , NH , NJ , NM , NV , NY , RI , SC , SD , TN , TX , UT , VA , VT , WA ,	MI , MI , OH ,	N,MO, OK,OF	MS,
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
10	Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records: ►Alex Varban 1310 N Courthouse Rd No 700 Arlington, VA 22201 (703) 224-3200			

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount
 of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - ◆ List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- **★** List all of the organization's former officers, key employees, 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.

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

(A) Name and Title	(B) Average hours per week (list any hours for related	pers and	an on on is	e bo boti	t che x, u h an	eck mentess office ustee)	er)	compensation from the organization	Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and related organizations
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		MISC)	
(1) Mark Holden	2.00									
Chairman	****************	Х						0	0	C
(2) Dav d Koch Chairman (part year)	2,00	×						0	0	6
(3) Nancy Pfotenhauer	2.00									
Director	2.00	Х						0	0	o
(4) Cy Nobles Director	2.00	х						0	0	d
(5) Dr Walter Williams Director	2.00	х						0	0	0
(6) Emily Seidel President & Chief Executive Officer	15.00 35.00			x				199,096	464,556	35,553
(7) Christopher Fink President (part year)	50.00			x				24,709	Ð	4,292
(8) Gary Castellaw Treasurer, VP of Financial Planning	2.00			x				0	0	o
(9) Robert Heaton Treasurer (part year)	2.00	- 41		x				0	0	Ō
(10) Josh Fisher	2.00			x						
Treasurer (part year)	2.00			^					0	0
(11) V ctor Bernson	15.00			×				76,907	179,449	25,093
Secretary, VP & General Counsel	35.00							, , , ,	30.54.35	23,050
(12) Chase Downham Sr. VP State Ops & Grassroots Strat.	15.00 35.00			x				97,167	226,724	32,613
(13) Teresa Oelke Senior VP of State Ops. (part year)	15.00			×				45,283	105,662	17,628
(14) Slade O'Brien VP, Grassroots Leadership	35.00					×		223,241	24,805	41,229

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the	
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
-	45,00						Н			-	
	5.00										
(15) David Johnson Sr. Director of Training/Cir. Dev.	45.00					x		164,250	18,250	27,911	
(16) Daniel Garza	15.00							0.5		10.000	
Executive Director	35.00					X		85,249	198,913	18,899	
(17) Jorge Lima Senior VP of Policy	15.00 35.00					x		84,592	197,384	43,362	

Form 990 (2018)

Part VII Section A. Officers, Directors	, Trustees, K	ey Em	ploy	ees	, ar	ıd Hig	he	st Compensated	Employees (d	onti	nued)	, age
(A) Name and Title	(B) Average hours per week (list any hours	than o	ne b	ox, i in of	it ch unle fficei	eck mess pers r and a ree)	son	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations		Estimated amount of other compensation from the	
	for related organizations below dotted line)	or director	Institutional Trustee	Officer	Kay employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)		organizal rela organiz	ted
		the second	rustee		Ф	pensated		-				
(18) Brent Gardner	15.00					x		96,562	225,	311		24,316
VP/Government Affairs	35.00								2			
F	92		_							-		
										1		
										1		
										1		
									-	-		
										4		
										+		
1b Sub-Total			340	•)				1			
d Total (add lines 1b and 1c)	t not limited to				ve) i	_	celv	1,097,056 ed more than \$100	1,641,054			270,896
3 Did the organization list any former office		rugtee	kevi	emn	love	e orb	niah.	ect compensated as	moloves on F		Yes	No
line 1a? If "Yes," complete Schedule 1 for 4 For any individual listed on line 1a, is the	such individua		•	•	*		Ξ	· • • • •		3		No
organization and related organizations gr	eater than \$15	0,000?	if "Ye	S, " (com	plete S	Sche	dule J for such		4	Yes	
5 Did any person listed on line 1a receive o services rendered to the organization?If '								ganization or indivi	dual for	5		No
Section B. Independent Contractors 1 Complete this table for your five highest	compensated in	depend	lent o	ontr	acto	ors tha	t re	celved more than \$	100,000 of com	pens	ation	
from the organization. Report compensat	ion for the cale	ndar ye	ar en	ding	wit	h or w	ithir	the organization's	tax year.	T.	CAREE	
	(A) ousiness address							Descrip	(B) tion of services		Comper	
2300 Wilson Blvd Ste 500 Arlington, VA 22201								Media Services			1	,546,848
Quinn Emmanuel Urquhart & Sullivan						77		Legal Serv ces		\dashv		290,082
865 S Figueroa St 10th FI Los Angeles, CA 90017 Westgate Las Vegas Resort Casino	,							Conference Se	ru coc	_		160,167
3000 Paradise Road Las Vegas, NV 89109		3						Consistence 25				100,107
										4		
2 Total number of independent contractors (in	ncluding but no	t limited	i to t	hose	e list	ed abo	ove)	who received more	than \$100,000	of		
compensation from the organization > 3				-	_	_					Form 99	0 (2018)

Part			111				;a
79	Check if Schedule O	contains a respon	se or note to an	y line in this Part VII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	a Federated campaigns. b Membership dues. c Fundraising events. d Related organizations e Government grants (contributions, gifts, and similar amounts not include above 9 Noncash contributions in in lines 1a - 1f:\$ h Total. Add lines 1a-1f.	tib 1c 1d 1d 1d 1d 1d 1d 1d	17,070,811	17,070,811		ž.	iii
Revenue	2a Program Serv de Charge		Busines		158,577 1	58,577	
Program Service Revenue	d e f All other program service 9 Total. Add lines 2a-2f.	e revenue.		158,577			
Other Revenue	3 Investment income (inclusimilar amounts). 4 Income from investment 5 Royalties 6a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (k	of tax-exempt bon	of proceeds	52,63	58		52,658
	7a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) d Net gain or from fund (not including \$ contributions reported o See Part IV, line 18	raising events of n line 1c).	(ii) Other	~1,6	43		-1,643
	b Less: direct expenses c Net income or (loss) froi 9a Gross income from gam See Part IV, line 19 b Less: direct expenses c Net income or (loss) froi 10aGross sales of inventory returns and allowances	m fundraising ever ing activities. a b m gaming activitie , less					
	b Less: cost of goods sold	. ». b					

Miscellaneous Revenue	Business Code			
11a				
b				
c				
d All other revenue				
e Total. Add lines 11a-11d		17,280,403	158,577	0 51,015

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any	line in this Part IX		1 1 1 1	🖳
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	43,850	43,850		
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, line 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	481,223	421,074	48,624	11,525
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	35,061	27,935	5,122	2,004
7 Other salaries and wages	6,627,909	6,103,212	406,318	118,379
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	174,087	114,589	51,434	8,064
9 Other employee benefits	794,213	523,106	234,291	36,816
10 Payroll taxes	479,600	423,084	43,337	13,179
11 Fees for services (non-employees):				
a Management			,	
b Legal	556,215	28	556,187	
c Accounting	35,700		35,700	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,396,382	297,694	1,098,261	427
12 Advertising and promotion	2,270,072	2,270,072		
13 Office expenses	592,151	354,032	231,912	6,207
14 Information technology	33,395	30,893	2,352	150
15 Royalties				
16 Occupancy	1,346,909	571,391	741,037	34,481
17 Travel	3,194,729	2,948,723	229,771	16,235
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	726,087	612,841	108,214	5,032
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	27,426	19,410	6,833	1,183
23 Insurance				
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 Membership Dues	16,091	15,654		437
b Taxes, licenses, fees	5,065	1,046	3,955	64
C				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	18,836,165	14,778,634	3,803,348	254,183
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 Fig. 1 if following SOP 98-2 (ASC 958-720).				

Form **990** (2018)

Part X

Balance Sheet

		(A) Beginning of year		(B) End of year
1	Cash-non-interest-bearing	1,366,632	1	738,13
2		7,566,497	2	6,059,77
Э	Pledges and grants receivable, net		3	
4	Accounts receivable, net	150,304	4	360,08
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	- 288	5	
2 _	contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use ,		8	
9	Prepaid expenses and deferred charges	827,805	9	209,28
10	a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 1,176,823			
Ι.	Less: accumulated depreciation 10b 1,109,609	110,994	10c	67,21
11	Investments—publicly traded securities .	110,054	11	07,21
12	Investments—other securities. See Part IV, line 11		12	
13	Investments—program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	135,015	15	408,34
16	Total assets. Add lines 1 through 15 (must equal line 34)	10,157,247	15	7,842,84
17	Accounts payable and accrued expenses	822,711	17	1,534,73
18	Grants payable	\$22,1 (1	18	1,004,10
19	Deferred revenue		_	
20			19	
	Tax-exempt bond liabilities , , , , , , , , , , , , , , , , , , ,		20	
21 22	Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified		21	
<u> </u>	persons, Complete Part II of Schedule L		22	
تّ ₂₃	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	·
25	Other liabilities (Including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	4,421,410	25	2,950,73
26	Total liabilities.Add lines 17 through 25	5,244,121	26	4,485,47
27 28 29 30 31 32	Organizations that follow SFAS 117 (ASC 958), check here > and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	3,307,086	27	2,288,79
28	Temporarily restricted net assets	0,000,1000	28	2,200,13
2 29	Permanently restricted net assets	1,606,040	29	1,068,570
	Organizations that do not follow SFAS 117 (ASC 958),	1,000,010	29	1,000,01
30	check here and complete lines 30 through 34. Capital stock or trust principal, or current funds , .		30	
31	Paid-in or capital surplus, or land, building or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	
F3	Total net assets or fund balances	4,913,126	33	3,357,364
33	Total liabilities and net assets/fund balances	10,157,247	34	
124	- Stor modified time that expectly fully definited to a part of the part of th	10, 137,247	94	7,842,84 Form 990 (201

Page **12**

Pa	rt XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			¥ 5¥6	
1	Total revenue (must equal Part VIII, column (A), line 12)	1			,280,403
2	Total expenses (must equal Part IX, column (A), line 25)	2		18	,836,165
3	Revenue less expenses. Subtract line 2 from line 1	3		-1	,555,762
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		4	,913,126
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		3	,357,364
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				Y
				Yes	No
1	Accounting method used to prepare the Form 990:			ľ	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.				
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both:	basis,			
	☐ Separate basis ☐ Both consolidated and separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho	edule C	10		
_					
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S Audit Act and OMB Circular A-133?	-	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	ired	3b		
			F	orm 99	0 (2018)

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SCHEDULE A (Form 990 or 990EZ)

Public Charity Status and Public Support

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service				▶ Go to	Attach to Form				Open to Public Inspection
	Name of the organization Under cans for Prosperity Foundation 52-1527294								
	rt I				us (All organization				
	organiz				e it is: (For lines 1 thro		17 CT (0.00 M)		
1	П	A church, c	onvention of	churches, or as	ssociation of churches	described in sec	tion 170(b)(1)	(A)(i).	
2		A school de	scribed in se	ection 170(b)((1)(A)(li). (Attach Sci	nedule E (Form 9	90 or 990-EZ).)		
3		-	-	-	vice organization desc			-	
4		name, city,	and state:		ed in conjunction with				
5		An organiza (b)(1)(A)	ition operate (iv). (Compl	d for the benefi ete Part II.)	it of a college or unive	rsity owned or of	perated by a gov	ernmental unit descri	bed in section 170
6					r governmental unit de	scribed in section	on 170(b)(1)(A	i)(ν).	
7	V			rmally receives (vi). (Complete	a substantial part of it Part II.)	s support from a	governmental u	init or from the gener	al public described in
8		A communi	ty trust desc	ribed in section	n 170(b)(1)(A)(vì).	(Complete Part I	I.)		
9		An agriculti n <u>on-land q</u> ı	ıral research ant college (organization do of agriculture. S	escribed in 170(b)(1) iee instructions. Enter	(A)(ix) operate the name, city, a	d in conjunction and state of the	with a land-grant coll college or university:	ege or university or a
10		from activit investment	les related to income and	o its exempt fur unrelated busin	: (1) more than 331/39 nctions—subject to cen ness taxable income (komplete Part III.)	tain exceptions,	and (2) no more	than 331/a% of its su	
11		An organiza	ition organiz	ed and operated	d exclusively to test fo	r public safety. S	ee section 509	(a)(4).	
12		more public	ly supported	organizations	d exclusively for the be described in section 5 the type of supporting	09(a)(1) or sec	ction 509(a)(2). See section 509(a	e purposes of one or a)(3). Check the box
a		organizatio	n(s) the pow	ganization oper er to regularly a tions A and B.	rated, supervised, or o appoint or elect a majo	ontrolled by its s ority of the direct	upported organi ors or trustees o	zation(s), typically by of the supporting orga	giving the supported nization. You must
b		manageme	nt of the sup	rganization sup porting organizations A and C.		n connection with ne persons that	h its supported o control or manaç	organization(s), by ha ge the supported orga	ving control or nization(s). You must
C		Type III for supported of	inctionally organization(integrated. A s s) (see instruct	supporting organizatio ions). You must com	n operated in cor plete Part IV, S	nnection with, ar lections A, D, a	nd functionally integra nd E.	ted with, its
d		functionally	integrated.	The organizatio	d. A supporting organi in generally must satis rt IV, Sections A and	fy a distribution	requirement and	th its supported orgar an attentiveness req	nization(s) that is not ulrement (see
e					ved a written determin integrated supporting		RS that it is a Ty	pe I, Type II, Type II	I functionally
f	Enter		**	d organizations	integrated supporting				
g	Provi	de the follow	ing informat	on about the su	upported organization(- LII		=======================================
	(i) N	Name of supp organization		(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
Fota	1								

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

Cat. No. 11285F

Schedule A (Form 990 or 990-EZ) 2018

	2010						Page 2
ŗ	Part II Support Schedule for (b)(1)(A)(ix) (Complete only if you c						
	III. If the organization i	ails to qualify ur	nder the tests lis	ted below, plea:	se complete Par	t III.)	ry dilaci rait
	Section A. Public Support						
	Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not	21,461,641	20,108,429	25,147,503	17,660,453	17,070,811	101,448,837
2	include any "unusual grant.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to						
4	the organization without charge Total. Add lines 1 through 3	21,461,641	20,108,429	25,147,503	17,660,453	17,070,811	101,448,837
5	The portion of total contributions by each person (other than a	21,401,041	20,108,429	23,147,303	17,000,433	17,070,611	101,446,637
	governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						7,238,206
6	Public support. Subtract line 5 from line 4.						94,210,631
<u>S</u>	Section B. Total Support		4				
	Calendar year (or fiscal year beginning in)	(a)2014	(b) 2015	(c) 2016	(d)2017	(e)2018	(f)Total
7		21,461,641	20,108,429	25,147,503	17,660,453	17,070,811	101,448,837
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,417			17,117	52,658	71,192
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						
11	Total support. Add lines 7 through 10						101,520,029
12		etc. (see instructi	ons)	2 01 02 02 01 01 02 02 03	3339.	12	6,424,021
13	First five years. If the Form 990 is f	or the organization	n's first, second, th	ird, fourth, or fifth	tax year as a sec	tion 501(c)(3) org	anization,
_	check this box and stop here			*****		> D	
5	Section C. Computation of Publi						
14	Public support percentage for 2018 (I					14	92.800 %
	Public support percentage for 2017 S					15	92.360 %
16	$_3$ 33 $_{1/3}\%$ support test—2018. If the						
1	and stop here. The organization qua 33 1/3% support test—2017. If th	ie organization did	not check a box o	n line 13 or 16a, a	and line 15 is 33 _{1/}	3% or more, check	this
17	box and stop here. The organization a 10%-facts-and-circumstances tes is 10% or more, and if the organization neets in Part VI how the organization meets	st—2018. If the or on meets the "fact	ganization did not s-and-circumstanc	check a box on lir es" test, check thi	ne 13, 16a, or 16b s box and stop he	, and line 14 ere. Explain	_
ı	organization	st—2017. If the o	organization did no 'facts-and-circums	t check a box on li tances" test, checl	ine 13, 16a, 16b, o k this box and sto	or 17a, and line p here.	▶□
18	supported organization						▶□

P	art III Support Schedule for	Organization	s Described in	Section 509(a)(2)			
	(Complete only if you c						ify unde	er Part II. If
S	the organization fails to ection A. Public Support	quality under	the tests listed	below, please co	ompiete Part II.)			
- 36	Calendar year							
	(or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2	018	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received. (Do not						1	
-	include any "unusual grants.") . Gross receipts from admissions,							
2	merchandise sold or services							
	performed, or facilities furnished in							
	any activity that is related to the							
	organization's tax-exempt purpose							
3	Gross receipts from activities that are							
	not an unrelated trade or business under section 513			35				
4	Tax revenues levied for the							
7	organization's benefit and either paid							
	to or expended on its behalf							
5	The value of services or facilities							
	furnished by a governmental unit to							
_	the organization without charge							
6	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and							
/a	3 received from disqualified persons							
ь	Amounts included on lines 2 and 3							
_	received from other than disqualified							
	persons that exceed the greater of				l'			
	\$5,000 or 1% of the amount on line							
_	13 for the year.							
	Add lines 7a and 7b Public support. (Subtract line 7c							
8	from line 6.)							
Se	ection B. Total Support	-	-					
	Calendar year	/						
	(or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2	018	(f) Total
9	Amounts from line 6						Î	
10a	Gross income from interest,				17			
	dividends, payments received on							
	securities loans, rents, royalties and							
_	income from similar sources Unrelated business taxable income							
b	(less section 511 taxes) from							
	businesses acquired after June 30,							
	1975.							
С	Add lines 10a and 10b.							
11	Net income from unrelated business							
	activities not included in line 10b,							
	whether or not the business is							
12	regularly carried on. Other income. Do not include gain or							
	loss from the sale of capital assets							
	(Explain in Part VI.)							
13	Total support. (Add lines 9, 10c,							
	11, and 12.) First five years. If the Form 990 is fo	r the organization	le first second H	aird forgeth or Off	h tay your == = = =	tion FO1	(2)(2)	
14								- Annual Control of the Control of t
-	check this box and stop here							يالم بيين
	ection C. Computation of Public							
15	Public support percentage for 2018 (lin					15		
16	Public support percentage from 2017 S					16		
Se	ection D. Computation of Invest	ment Income	Percentage			***		
17	Investment income percentage for 20:	l8 (line 10c, colu	mn (f) divided by			17		
18	Investment income percentage from 2					18		
	331/3% support tests-2018. If the o						and line	17 is not
٠.'	more than 33 1/3%, check this box and s 33 1/3% support tests—2017. If the	cop nere. The of	yanızation qualific	s as a publicly su	pported organizati	on		/ 15 40 /
D								
	not more than 33 1/3%, check this box	-	_	•				
20	Private foundation. If the organization	on did not check a	box on line 14, 1	9a, or 19b, check	this box and see i	nstructio	ns	. ▶□
								r 990-EZ) 2018

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

_56	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination	5.0		
	edel.mmbb.ii	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or	4b		
С	supervised by or in connection with its supported organizations Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support			
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by			
	amendment to the organizing document)	5a	_	
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
L0a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations)? If "Yes," answer line 10b below			
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	10a		
		10b		
	Schedule A (Form 990	or 99	U-EZ)	2018

P	ar	t IV Supporting Organizations (continued)							
_				Yes	No				
11	L	Has the organization accepted a gift or contribution from any of the following persons?							
ā	1	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a						
	,								
		A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11b						
-:	_	ction B. Type I Supporting Organizations							
				Yes	No				
1		Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year							
2		Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2						
_	_	-		((<u> </u>					
	Se.	ction C. Type II Supporting Organizations							
		We are the second of the secon		Yes	No				
1		Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the							
		supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1						
_ :	Se	ction D. All Type III Supporting Organizations							
1		Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing		Yes	No				
		documents in effect on the date of notification, to the extent not previously provided?	1						
2		Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	1						
			2						
3		By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3						
_	2-	skian E. Tuna III Eurakianally Internet J.Computing Computing	٠						
	<u>se</u>	ction E. Type III Functionally-Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)							
•	а	The organization satisfied the Activities Test. Complete line 2 below.	ons):						
	b	land -							
	С		instru	rtione)					
_		_	.,,50 0						
2		Activities Test. Answer (a) and (b) below.		Yes	No				
	а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	,						
	b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's	2a						
3		involvement Parent of Supported Organizations. Answer (a) and (b) below.	2b						
٠	2	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of	2-						
		the supported organizations? Provide details in Part VI.	3a						
	D	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3b						
		Schedule A (Form 990	_	0-EZ)	2018				

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting C)rgani	zations	Pag
1	Check here if the organization satisfied the Integral Part Test as a qualifying trainstructions. All other Type III non-functionally integrated supporting organizations.	ust on I	Nov. 20. 1970 (explain in	Part VI). See A through E.
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount		7	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-in instructions)	tegrate	ed Type III supporting or	ganization (see

Schedule A (Form 990 or 990-EZ) 2018

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Section D - Distributions			Current Year			
1 Amounts paid to supported organizations to accomplish	exempt purposes					
2 Amounts paid to perform activity that directly furthers excess of income from activity	exempt purposes of supported	organizations, in				
3 Administrative expenses paid to accomplish exempt pur	poses of supported organization	ons				
4 Amounts paid to acquire exempt-use assets						
5 Qualified set-aside amounts (prior IRS approval require	d)					
6 Other distributions (describe in Part VI). See instructio	ns					
7 Total annual distributions. Add lines 1 through 6.	LIM 2					
8 Distributions to attentive supported organizations to wh details in Part VI). See Instructions	ich the organization is respons	sive (provide				
9 Distributable amount for 2018 from Section C, line 6						
10 Line 8 amount divided by Line 9 amount						
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018			
1 Distributable amount for 2018 from Section C, line 6						
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required explain in Part VI). See instructions.						
3 Excess distributions carryover, if any, to 2018:						
a From 2013						
b From 2014						
c From 2015						
d From 2016						
e From 2017						
f Total of lines 3a through e						
g Applied to underdistributions of prior years						
h Applied to 2018 distributable amount i Carryover from 2013 not applied (see						
instructions)						
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4 Distributions for 2018 from Section D, line 7: \$						
Applied to underdistributions of prior years						
b Applied to 2018 distributable amount						
c Remainder. Subtract lines 4a and 4b from 4.						
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI. See instructions.						
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.						
7 Excess distributions carryover to 2019. Add lines 3j and 4c.						
8 Breakdown of line 7:						
a Excess from 2014.						
b Excess from 2015						
c Excess from 2016						
d Excess from 2017.						
e Excess from 2018.						

Schedule A (Form 990 or 990-EZ) (2018)

	(Form 990 of 990-EZ) 2018	Page
Part VI	Section A, lines 1, 2, 3b, 3 Part IV, Section D, lines 2	on. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V b; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See
		Facts And Circumstances Test
F	deturn Reference	Explanation
		Celedula 3 (Form 000 or 000 EZ) 20

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DLN: 93493319057039

SCHEDULE C

Political Campaign and Lobbying Activities

OMB No. 1545-0047

(Form 990 or 990-EZ)	For Organizations Exempt From Inc	come Tax Under section 501	(c) and section 527	2018
Department of the Treasury Internal Revenue Service	►Complete if the organization is descri ►Go to <u>www.irs.gov/Form990</u>			Open to Public Inspection
 Section 501(c)(3) org Section 501(c) (other Section 527 organization answ Section 501(c)(3) org Section 501(c)(3) org Section 501(c)(3) organization answ (Proxy Tax) (see separate 	wered "Yes" on Form 990, Part IV, Line 3, tanizations: Complete Parts I-A and B. Do nor then section 501(c)(3)) organizations: Conations: Complete Part I-A only. wered "Yes" on Form 990, Part IV, Line 4, ganizations that have filed Form 5768 (elect genizations that have NOT filed Form 5768 wered "Yes" on Form 990, Part IV, Line 5 ate instructions), then b), or (6) organizations: Complete Part III.	ot complete Part I-C, nplete Parts I-A and C below. Do , or Form 990-EZ, Part VI, line 4: tion under section 501(h)): Compl (election under section 501(h)): C	not complete Part I-B. 7 (Lobbying Activities), ete Part II-A. Do not comp complete Part II-B. Do not	then blete Part II-B. complete Part II-A
Name of the organization	on		Employer identif	ication number
Americans for Prosperity Fo	oundation			
Part I-A Complete	e if the organization is exempt und	ler section 501(c) or is a s	52-1527294 ection 527 organiza	tion.
	ion of the organization's direct and indirect			
"political campaign	activities")			
	activity expenditures (see instructions)			
Part I-B Complete	r political campaign activities (see instruction if the organization is exempt und	ons)		
	of any excise tax incurred by the organizati		b 4	
	of any excise tax incurred by organization n		-	
3 If the organization	Incurred a section 4955 tax, did it file Form	n 4720 for this year?		☐ Yes ☐ No
4a Was a correction n	nade?			
b If "Yes," describe i				☐ Yes ☐ No
Part I-C Complete	if the organization is exempt und	ler section 501(c), except	section 501(c)(3).	
1 Enter the amount	directly expended by the filing organization	for section 527 exempt function a	activities > \$	
	of the filing organization's funds contributed		n 527 exempt	
3 Total exempt funct	tion expenditures. Add lines 1 and 2. Enter	here and on Form 1120-POL, line	17b	This continue is a second of the second of t
4 Did the filing organ	nization file Form 1120-POL for this year?	***************************************	····	☐ Yes ☐ No
organization made of political contribu	addresses and employer identification numb payments. For each organization listed, en itions received that were promptly and dire action committee (PAC). If additional space	ter the amount paid from the filin otly delivered to a separate politic	g organization's funds. Al	the filing
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
1	ic .			
2				
3				
4				
5				
6				
or Paperwork Reduction	Act Notice, see the instructions for Form 990	or 990-EZ. Cat. No.	S0084S Schedule C (For	m 990 or 990-EZ) 2018

Sch	edule C (Form 990 or 990-EZ) 2018						Page :
Р	art II-A Complete if the organization section 501(h)).	is exemp	ot under section	on 501(c)(3)	and filed Forn	1 5768 (electi	ion under
A	Check • if the filing organization belongs to expenses, and share of excess lobb	ying exper	nditures).		ffiliated group me	ember's name, a	ddress, EIN,
В	Check 🕨 🗌 if the filing organization checked b	ox A and "	limited control" pr	ovisions apply.			
	Limits on Lobby (The term "expenditures" me	ing Exp	enditures nts paid or incur	red.)		a) Filing anization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	ninion (gra	ss roots Johhvina)	2000200000			
Ь	Total lobbying expenditures to influence a legisla					0	
c	Total lobbying expenditures (add lines 1a and 1b					0	
d	Other exempt purpose expenditures					18,836,165	
е	Total exempt purpose expenditures (add lines 10					18,836,165	
f	Lobbying nontaxable amount. Enter the amount columns.					1,000,000	
	If the amount on line 1e, column (a) or (b)	is: The lo	bbying nontaxa	ble amount is:			
	Not over \$500,000	20% of	the amount on line 1	.e.		- 1	
	Over \$500,000 but not over \$1,000,000	\$100,00	00 plus 15% of the ex	cess over \$500,00	0.	4	
	Over \$1,000,000 but not over \$1,500,000	\$175,00	00 plus 10% of the ex	cess over \$1,000,0	000.	1	
	Over \$1,500,000 but not over \$17,000,000	\$225,00	00 plus 5% of the exc	ess over \$1,500,00	00.		
	Over \$17,000,000	\$1,000,	,000,				
h j	Subtract line 1g from line 1a. If zero or less, enter Subtract line 1f from line 1c. If zero or less, enter If there is an amount other than zero on either lisection 4911 tax for this year?	r -0 ne 1h or lir	ne 1i. did the orga	nization file Form	4720 reporting	0	Yes No
	(Some organizations that made columns below. Se	e a section ee the se		tion do not ha tions for lines	ive to complet 2a through 2		ve
	Calendar year (or fiscal year beginning in)		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
 2a	Lobbying nontaxable amount		1,000,000	1,000,000	1,000,000	1,000,000	4,000,00
b	Lobbying ceiling amount (150% of line 2a, column(e))						6,000,00
_с	Total lobbying expenditures						
d	Grassroots nontaxable amount		250,000	250,000	250,000	250,000	1,000,00
e	Grassroots ceiling amount (150% of line 2d, column (e))						1,500,00

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2018

	rt II-B Complete if the organization is exempt under section 501(c)(3) and has NOT file	ed	P		age 3
	Form 5768 (election under section 501(h)).				
For e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)		(b)	Ñ.
activ	ity	Yes	No	Amou	int
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
a	Volunteers?		8		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?	<u> </u>			
đ	Mailings to members, legislators, or the public?				_
e	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?				
1	Other activities?				
ĵ	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 501(c) 501(c)(6).	(5), or	section	ì	
				Yes	No
	Were substantially all (90% or more) dues received nondeductible by members?		1		
1					
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
2 3	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year?	*********	. 3		
2 3 Pai	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? THI-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."	(5), or	section	n 501(c)(6)
2 3 Par	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members	(5), or	section	n 501(c)(6)
2 3 Pai	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	(5), or III-A,	section	n 501(c)(6)
2 3 Pai 1 2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	(5), or III-A,	section	n 501(c)(6)
2 3 Pai 1 2	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	(5), or III-A,	section	n 501(c)(6)
2 3 Pai 1 2 a b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	(5), or III-A, 1 2a 2b 2c	section	n 501(c)(6)
2 3 Par 1 2 a b c	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	(5), or III-A,	section	n 501(c)(6)
2 3 Pai 1 2 a b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	(5), or III-A, 1 2a 2b 2c	section	n 501(c)(6)

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

Explanation

The organization has an election under section 501(h) in effect, however it did not have any lobbying expenditures during the tax year ended 12/31/18.

Schedule C (Form 990 or 990EZ) 2018

Return Reference

Form 990, Schedule C

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SCHEDULE D

(Form 990)

Supplemental Financial Statements

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

2018

OMB No. 1545-0047

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Department of the Treasury Attach to Form 990. Open to Public ► Go to www.lrs.gov/Form990 for the latest information. Internal Revenue Service Inspection Name of the organization Employer identification number Americans for Prosperity Foundation 52-1527294 Part 1 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year Total number of conservation easements . . 2a 2b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic 2dstructure listed in the National Register . . . 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located >> Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, ☐ Yes ☐ No Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) ☐ Yes □ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

https://eup.eps.irs.gov/mef/rrdprd/sdi/proxy/printSub

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

Cat. No. 52283D Schedule D (Form 990) 2018

-		(FOITH 990) 2010								277					Page 2
	tIII	Organizations M							-						
3		the organization's acq (check all that apply):		n, and other	records,		any of	the fo	llowing	that are a	significant	use of it	s colle	ction	
a		Public exhibition				d				iange prog					
b		Scholarly research				е	Ш	Othe	T:::::::::::::::::::::::::::::::::::::	XXXIIIXXXXXXXXXXXXXXXXXXXX		***************************************			
С		Preservation for future	e generations												
4	Part >								_			ose in			
5		g the year, did the org s to be sold to raise fur											es		0
Pa	rt IV	Escrow and Cust Complete if the or X, line 21.			on For	m 990	, Part	IV, li	ine 9, d	r reporte	ed an amo	unt on	Form	990,	Part
1a		e organization an agent led on Form 990, Part										☐ Y (es	□ N	o
Ь	If "Ye	es," explain the arrange	ement in Part XIII	and complet	te the fo	llowing	table:					Amount			-
С	Begin	ning balance						20 30		1c					
d	Addit	ions during the year .								1d					=
е		butions during the yea								1e					
f	Endin	g balance						(5 (5)	* 9t	1f					=
2a	Did th	ne organization include	an amount on Fo	rm 990, Part	X, line	21, for	escrow	or cu	ıstodial	account lia	ability?	. □ Y	25		0
_ b	If "Ye	s," explain the arrange													
Pa	rt V	Endowment Fun	ds. Complete if	the organi	zation a	nswer	ed "Ye								
1-	D = =!= =	:		(a)Current	year	(b)Pr	rior year		(c)Two y	ears back	(d)Three ye	ears back	(e)Fo	our year	s back
	_	ing of year balance .						-	_						
		outions	na and lagger					-					-		
		estment earnings, gair	ŕ					-	_						
		or scholarships						-							
е		expenditures for facilition	es												
f	Admini	strative expenses .													
g	End of	year balance													
2	Provid	de the estimated perce	ntage of the curre	ent year end	balance	(line 1g	g, colur	nn (a)) held a	as:					-
а	Board	l designated or quasi-e	ndowment 🛌												
b	Perm	anent endowment 🕨													
c	Temp	orarily restricted endo													
	The p	ercentages on lines 2a	, 2b, and 2c shou	ld equal 100	%.										
3а		nere endowment funds dization by:	not in the posses	sion of the o	rganizati	on that	are h	eld an	d admin	istered fo	r the		i i	Van I	N.
	_	related organizations										[3	a(i)	Yes	No
		elated organizations .											a(ii)		
b		s" on 3a(ii), are the re	_		•			? .			• 80 0	.	3b		
4	Descr	ibe in Part XIII the inte	ended uses of the	organization	ı's endov	ment f	unds.						-		
Pa	rt VI	Land, Buildings,			_				. 3	o massassana	50000000000000000000000000000000000000	vinanses .			
_	Descri	Complete if the or ption of property	(a) Cost or oth		(b) Cost						rm 990, P. lepreciation			ok value	
	Descri	paidle of property	(investme		, = , = 030	o. o.n.	Jusis (C	and)	(5) AC	-amanated (repreciation		(4) 000	∧ value	=
1a	Land														
b	Buildin	gs													
c	Leaseh	old improvements					13	4,735			103,031				31,704
d	Equipm	nent					68	8,726			653,243				35,483
								3,362			353,335				27
Tota	II. Add	lines 1a through 1e.(Co	olumn (d) must e	qual Form 99	00, Part)	(, colun	nn (B),	line :	10(c))	• 15	>				67,214

Schedule D (Form 990) 2018

(a) Description of security or category	(b)	(c) Method of valuation:
(including name of security)	Book value	Cost or end-of-year market value
(1) Financial derivatives	× /# (9K #	
(2) Closely-held equity interests		
(3)Other		
(A)		
(8)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII Investments—Program Related. Complete if the organization answered 'Yes' or	n Form 990. Part IV. line 1	1c. See Form 990, Part X, line 13.
(a) Description of Investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		A CONTRACTOR OF THE PARTY OF TH
(2)		
(2)		
(2) (3) (4)		
(2) (3) (4) (5)		
(2) (3) (4) (5)		
(2) (3) (4) (5) (6)		
(1) (2) (3) (4) (5) (6) (7) (8)		

			Commission of the Commission o	Form 990, Part X, line 15.
11, 20, 10, 10, 10, 10, 10, 10, 10, 10, 10, 1	(a) Description			(b) Book value
(1) Deposits				121,111
(2) Due from subsidiary	1111-2-1			287,22
(2)				
(3)				
(4)				
(5)				
(6)	WWW.			
(7)				
(8)		101		
(9)				
Total. (Column (b) must equal Form	n 990, Part X, col (B) line 15)			▶ 408,343
Part X Other Liabilities. C See Form 990, Part	Complete if the organization ans	wered 'Yes' on	Form 990, Part IV, I	ine 11e or 11f.
	escription of liability	(b) Book value	
(1) Federal income taxes				
Due to subsidiary			914,392	
Deferred rent	*		2,036,346	
(3)			2,030,340	
			I	
(4)	The state of the s			
(4) (5)	1101			
(6)			T. A.M. W.L. T.	
(5) (6) (7)				
5) 6) 7) 8)				
(5)				
(5) (6) (7) (8) (9) (Odumn (b) must equal Form 990,			2,950,738	
(5) (6) (7) (8) (9) (Odumn (b) must equal Form 990,	Part X, col.(B) line 25.) S. In Part XIII, provide the text of the	▶ Is footnote to the		statements that reports the

Explanation

Return Reference

efile GRAPHIC	print - DO NO	JI PRUCES	S UKI	JINAL DATA	Troducti	011			UL	N: 93	4933	190	0,00.
Schedule L Form 990 or 990	-EZ) Comple			ns with Ir				5a. 2	5h 26		MB No.	1545	-0047
	, dample	27, 2 8 a,	28b, or 26 ► Attac	Bc, or Form 99 th to Form 990 aov/Form990	0-EZ, Part V 0 or Form 99	, line 38a or 4 O-EZ.	40b.	.04, 2	.50, 20	"	20	1	8
epartment of the Treasu ternal Revenue Service			· ALALAMA			or timorinazio					Open Inst		
Name of the orga Americans for Prosp				41.6			1	nploy	/er ide 7294	ntifica	ntion n	umb	er
Compl	ss Benefit Trai ete if the organiza	tion answere											
1 (a) Name of disquali	fied person	(b)	Relationship be	tween disqua organization	lified person a	nd		escript ansacti				rected? No

							-						
4958 3 Enter the ar	nount of tax, if an ans to and/or labelete if the organ	y, on line 2, a	bove, reimbested Per	oursed by the o	rganization .		90. Pa	rt IV.	. *	\$ \$	the ord	ianiza	tion
4958 3 Enter the ar Part II Loa Con repo (a) Name of	mount of tax, if an	From Interization answern Form 990, (c) Purpose	ested Per ered "Yes" or Part X, line (d) Loan	oursed by the orsons. In Form 990-EZ, In Form 990-EZ, In Form 990-EZ,	rganization .		(g)	In	line 26	n) ved by rd or	(janiza I)Wrii jreem	tten
4958 3 Enter the ar Part II Loa Con repo (a) Name of	nount of tax, if an ans to and/or l aplete if the organ orted an amount o (b) Relationship	From Interization answern Form 990, (c) Purpose	ested Per ered "Yes" or Part X, line (d) Loan	sons. n Form 990-EZ, 5, 6, or 22 to or from the	Part V, line 3	8a, or Form 99	(g)	In ult?	line 26	n) ved by rd or	(i)Wrii įreem	tten
4958 3 Enter the ar Part II Loa Con repo (a) Name of	nount of tax, if an ans to and/or l aplete if the organ orted an amount o (b) Relationship	From Interization answern Form 990, (c) Purpose	ested Per ested Per ered "Yes" or Part X, line (d) Loan orga	oursed by the o	Part V, line 3	8a, or Form 99	(g) defa	In ult?	line 26	ved by d or ottee?	(ag	i)Wrii įreem	tten ent?
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4958 3 Enter the ar Part II Loa Con repo (a) Name of	nount of tax, if an ans to and/or l aplete if the organ orted an amount o (b) Relationship	From Interization answern Form 990, (c) Purpose	ested Per ested Per ered "Yes" or Part X, line (d) Loan orga	oursed by the o	Part V, line 3	8a, or Form 99	(g) defa	In ult?	line 26	ved by d or ottee?	(ag	i)Wrii įreem	tten ent?
4958 3 Enter the ar Part II Loa Con repo (a) Name of	nount of tax, if an ans to and/or l aplete if the organ orted an amount o (b) Relationship	From Interization answern Form 990, (c) Purpose	ested Per ested Per ered "Yes" or Part X, line (d) Loan orga	oursed by the o	Part V, line 3	8a, or Form 99	(g) defa	In ult?	line 26	ved by d or ottee?	(ag	i)Wrii įreem	tten ent?
4958 3 Enter the ar	nount of tax, if an ans to and/or l aplete if the organ orted an amount o (b) Relationship	y, on line 2, a From Inter Ization answe n Form 990, (c) Purpose of loan	ested Per red "Yes" or Part X, line (d) Loan orga	poursed by the or sons. In Form 990-EZ, 5, 6, or 22 to or from the nization? From	Part V, line 3	8a, or Form 99	(g) defa	In ult?	line 26	ved by d or ottee?	(ag	i)Wrii įreem	tten ent?
4958 3 Enter the ar Part II Loa Con repe (a) Name of the rested person otal .	nount of tax, if an ans to and/or in plete if the organization (b) Relationship with organization	ry, on line 2, a From Interization answern Form 990, (c) Purpose of loan	ested Per red "Yes" or Part X, line (d) Loan organ	sons. In Form 990-EZ, In Form	Part V, line 3 (e)Original principal amount	(f)Balance due	(g) defa	In ult?	line 26	ved by d or ottee?	(ag	i)Wrii įreem	tten ent?
4958 3 Enter the ar Part II Loa Comrepo (a) Name of Interested person otal	nount of tax, if an ans to and/or in plete if the organized an amount of (b) Relationship with organization with organization of the organization	ry, on line 2, a From Interization answern Form 990, (c) Purpose of loan	ing Interessed between and the	sons. In Form 990-EZ, In Form	(e)Original principal amount	(f)Balance due	(g) defa	In ult?	line 26 (I'Approvation boar comm	n) ved by ed or ilttee? No	Yes	i)Wrii	tten ent?
4958 3 Enter the ar Part II Loa Con repe (a) Name of interested person Total .	nount of tax, if an ans to and/or in plete if the organized an amount of (b) Relationship with organization with organization of the organization	ry, on line 2, a From Interization answer ization answer ization answer ization and izatio	ing Interessed between and the	poursed by the or sons. In Form 990-EZ, 5, 6, or 22 to or from the nization? From ested Person 98 on Form 98	(e)Original principal amount	(f)Balance due	(g) defa	In ult?	line 26 (I'Approvation boar comm	n) ved by ed or ilttee? No	Yes	i)Wrii	No
4958 3 Enter the ar Part II Loa Con report (a) Name of other ested person Total	nount of tax, if an ans to and/or in plete if the organized an amount of (b) Relationship with organization with organization of the organization	ry, on line 2, a From Interization answer ization answer ization answer ization and izatio	ing Interessed between and the	poursed by the or sons. In Form 990-EZ, 5, 6, or 22 to or from the nization? From ested Person 98 on Form 98	(e)Original principal amount	(f)Balance due	(g) defa	In ult?	line 26 (I'Approvation boar comm	n) ved by ed or ilttee? No	Yes	i)Wrii	No

Part IV	Ruciness Transac	tions Inv	olving Interested Pers				rage z
raitav	Complete if the are	inization	olving Interested Pers	000 Davit IV line 50	201- 20		
			inswered "Yes" on Form				
(a)	Name of interested per	son	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sł organiz rever	ation's
				, J		Yes	No
(1) IPO			Controlled entity of substantial contributor, The Seminar Network	1,546,848	Fees paid for media services		No
Part V	Supplemental Info		responses to questions on t	Schedule L (see instruction	ons).		
Re	eturn Reference			Explanation	on		
Schedule L, I	Part IV	Per the Schedu	IRS instructions, a 35% co le L, Part IV. Therefore, IPC	ntrolled entity of a subst I has been included in ac	antial contributor is required to be cordance with the instructions.	disclosed	l on

Schedule L (Form 990 or 990-EZ) 2018

efile GRAPHIC print - DO NOT PROCESS | ORIGINAL DATA - Production DLN: 93493319057039 OMB No. 1545-0047 Noncash Contributions (Form 990) ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization Employer identification number Amer cans for Prosperity Foundation 52-1527294 Types of Property (b) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 19 1 Art-Works of art Art—Historical treasures . 3 Art—Fractional interests . 4 Books and publications . Clothing and household Cars and other vehicles . . . Boats and planes Intellectual property . . . 9 Securities—Publicly traded . 652,696 Selling price 10 Securities—Closely held stock 3 Securities—Partnership, LLC, or trust interests . . . Securities-Miscellaneous . . Qualified conservation contribution—Historic structures Qualified conservation contribution-Other . . . 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 Scientific specimens . . 23 24 Archeological artifacts . . . 25 Other ▶ (____ 26 Other ▶ (... 27 Other ▶ (= 28 Other ► (.... Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 0 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt 30a No b If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a No b If "Yes," describe in Part II. 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

Cat. No. 512271

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

Schedule M (Form 990) (2018)

Schedule M (Form 990) (2018)

Page 2

Part II Supplemental Information.

Provide the information required by Part I, lines 30b, 32b, and 33, and whether the 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
Part I, Column (b):	The number of contributions represent the number of contributions received, not the number of items donated.

Schedule M (Form 990) (2018)

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OMB No. 1545-0047

SCHEDULE 0 (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

Department of the Treasury

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

Attach to Form 990 or 990-EZ. ► Go to www.irs.aov/Form990 for the latest information.

Inspection

Internal Revenue Service Name of the organization Amer cans for Prosperity Foundation

Employer identification number

52-1527294

	52-152/294
Return Reference	Explanation
Form 990, Part V, Line 2a, Part VII, Part IX, Lines 5-10 and Schedule J	Certain employees of Americans for Prosperity Foundation may perform services for Americans for Prosperity, a related organization, through a service contract between the organizations where the service recipient organization pays the service provider organization arm's length payments for such services; and certain employees of Americans for Prosperity may perform services for Americans for Prosperity Foundation through a service contract between the organizations where the service recipient organization pays the service provider organization arm's length payments for such services. To reflect the service arrangement, compensation has been shown in proportion to the hours provided by respective organization employees in proportion to the hours performed for each organization through the service contracts and aggregate compensation amounts are reported on the employees' Form W-2 issued by his or her employer.
Form 990, Part VI, Section A, line 4	The bylaws were updated to reflect the organization's name as changed through resolution in a previous filing year. Board member requirements and officer descriptions were also updated.
Form 990, Part VI, Section A, line 7a	The members have the right to elect and remove the directors of Americans for Prosperity Foundation.
Form 990, Part VI, Section B, line 11b	The Form 990 is prepared by an independent CPA firm. The Treasurer and General Counsel review in detail Form 990 prior to sending to the board. The 990 is then distributed to the audit committee, acting on behalf of the board for review and questions prior to filing with the IRS.
Form 990, Part VI, Section B, line 12c	The organization has in place a conflict of interest policy covering all staff, directors and officers that it monitors through the quarterly meetings of the Board of Directors' Audit Committee and an annual employee survey. Should a conflict be disclosed, it is addressed by company management or the board, as appropriate.
Form 990, Part VI, Section B, line 15	Line 15a - The President & Chief Executive Officer's compensation is reviewed and approved by the board. Comparability data is used and this process is documented in the employee's personnel file. Line 15b - The President & Chief Executive Officer reviews compensation for officers and other key employees. Substantiation of compensation is included in personnel files. This process was last completed during the tax year for all officers of the organization.
Form 990, Part VI, Section C, line 19	The organization makes available to the public documents required by law to be made publicly available in accordance with IRS procedures.
Form 990, Part VIII, Line 7a/7b	The organization has a policy whereby all contributed securities are immediately sold through the broker that receives those contributions on the organization's behalf.
Form 990, Part X, Lines 27-29:	In accordance with the principles of FASB ASU 2016-14 (ASC 958), the organization has implemented required changes to its audited financial statements for the period ended 12/31/18. To date, Form 990 and its associated schedules have not been updated to reflect changes made by this standard. Thus, we have reported the revised net asset categories from the audited financial statements as follows on Form 990, Part X, Lines 27-29: Line 27 - Net assets without donor restrictions \$2,288,794 Line 29 - Net assets with donor restrictions \$1,068,570 Total net assets \$3,357,364
Form 990, Part XII, Line 2c	The organization's Audit Committee assumes respons bility for oversight of the audit of its financial statements and selection of its independent accountant. This process has not changed since the prior year.
or Paperwork Reduc	tion Act Notice, see the Instructions for Form 930 or 990-EZ. Cat. No. 51056K Schedule O (Form 990 or 990-EZ) 2018

Schedule O (Form 990 or 990-EZ) 2018

Schedule Grants and Other Assistance to Organizations, Complete if the organization number Canapte the o	efile GRAPHIC print - DO NOT PROCESS	NOT PROCESS	ORIGINAL DATA - Production	- Production			8	DLN: 93493319057039
nount of the grants or assistance, the grantees' eligibility for the grants or assistance, and stitutes are of grant funds in the United States. The office of grant funds in the United States. The office of grant funds in the United States. The office of grant funds in the United States. The office of grant funds in the United States. The office of grant funds in the United States. The office of grant funds in the United States. The organization answered "Yes" on Form 990, Part IV, fine 21 action of Gash assistance on the office of Amount of non- (f) Method of valuation of Gash assistance on the office of Gash assistance on the office of Gash assistance on the office of Gash assistance of Gash assistance on the office of Gash assistance of Gash assistance on the office of Gash assistance of Ga	iote: To capture the full ochedule I Form 990)	content of this d	Grants and C Governments :	lect landscape mode ther Assistanc and Individuals tion answered "Yes," o Attach to Form	te to Organize to Organize in the Unite Pate 1390, Part IN 990, the latest information	en printing. :ations, id States /, line 21 or 22.		2018 Open to Public Inspection
nount of the grants or assistance, the grantees' eligibility for the grants or assistance, and nount of the grants or assistance, and grant funds in the United States. ations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21 ations and Domestic Governments Cash (e) Amount of non-grant (f) Method of valuation (g) Description of assistance assistance (assistance assistance assistance assistance assistance (cash (c)(3)) 25,000 16,000 16,000 16,000 16,000 16,000 16,000 16,000 16,000 16,000 16,000 16,000 16,000 17,000 18,000 19,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000	nericans revenue service ame of the organization mericans for Prosperity Founda	tion					Employer identifi 52-1527294	cation number
nount of the grants or assistance, the grantees' eligibility for the grants or assistance, and be use of grant funds in the United States. stions and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21 ted if additional space is needed. Ation (d) Amount of cash (e) Amount of non- (book, FNV, appraisal, agrant assistance other) 16,000 16(c)(3) 16,000 16. 16,000 17. 16,000 18. 16,000 19.		sation on Grants	and Assistance					
ations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21 ted if additional space is needed. Ition (d) Amount of cash grant dash grant assistance other) 25,000 16,000 16,000 16,000 Cat No. 500559	Does the organization mai the selection criteria used	ntain records to sub: to award the grants	stantiate the amount of to	he grants or assistance, i	the grantees' eligibility	for the grants or assistan	ice, and	S
ations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21 ced if additional space is needed. Tion (d) Amount of cash (e) Amount of non-grant (book, FMV, appraisal, cash assistance other) O1(c)(3) 25,000 16,000		anization's procedur	es for monitaring the use	of grant funds in the Un	ited States.			
tion (d) Amount of cash (e) Amount of non- (f) Method of valuation of cash grant cash assistance other) 01(c)(3)		Assistance to Dom than \$5,000. Part II	restic Organizations an	d Domestic Governme tional space is needed.	nts. Complete if the o	rganization answered "Yes	s" on Form 990, Part IV, fin	21, for any recipient
01(c)(3) 25,000 16,000 16,000 Cat No. 500559	(a) Name and address of organization or government	(b) en	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance			(h) Purpose of grant or assistance
01(c)(3) Inizations listed in the line 1 table. Car. No. S00559	(1) John K Madver Institute For Public Policy 44 Miffilin Street Ste 201 Madison, WI 53703	26-2639114	501(0)(3)	25,600				Program Support
nizations listed in the line 1 table.	(2) SM Wright Foundation 9213 Sovereign Row Dallas, TX 75247	31-1613179	501(c)(3)	16,000				Program Support
able	Enter total number of secti	ion 501(c)(3) and gc	wernment organizations	isted in the line 1 table.			▲ •	2
Cat. No. S0055p		organizations lister	d in the line 1 table.					0
	r Paperwork Reduction Act Notic	e, see the Instruction	ns for Form 990.		Cat. No. 5005:	d.	438	Schedule I (Form 990) 2018

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(f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed. (d) Amount of noncash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Ξ (5) (3) 4 (5)

Grant funds were paid pursuant to an agreement requiring the recipient to expend the funds exclusively for 501(c)(3) purposes and may require the grantee to furnish a report to the organization describing the charitable activities in connection with the organization's programs fulfilled by the use of the grant funds. The organization reviews the recipient's form 990, IRS tax-exemption letter, articles of incorporation, by-laws, and validates the recipient's tax ID #. Explanation Return Reference Part I, Line 2:

(9)

Schedule I (Form 990) 2018

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https://eu

 Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe If "Yes," describe If "Yes," describe If "Yes," described in Regulations section 59 	_	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7 Yes	Yes	
If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958–6(c)?	m	Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
			œ		Š
		If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	0		

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Schedule J (Form 990) 2018

Part II

0 (F) Compensation in column (B) reported as deferred on prior Form 990 0 0 0 0 0 0 0 0 0 0 0 0 0 0 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 the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual. (E) Total of columns (B)(i)-(D) 28,968 212,462 228,039 209,898 489,762 197,332 249,856 118,143 84,572 107,081 260,712 167,076 43,680 103,994 242,652 50,632 91,056 97,730 (D) Nontaxable benefits 21,684 20,978 13,549 9,293 3,024 7,055 7,111 16,592 3,725 8,691 23,701 2,633 18,475 5,807 7,918 2,851 6,652 2,331 (C) Retirement and other deferred compensation 1,530 1,509 3,522 4,641 10,828 6,540 1,624 3,790 13,770 4,452 12,180 10,689 2,803 5,220 4,581 495 0 0 (iii) Other reportable compensation (B) Breakdown of W-2 and/or 1099-MISC compensation 44,688 52 19,152 193 36 84 83 59 67 464 446 193 20 83 76 32 . 92 32 (ii) Bonus & incentive compensation 297,500 127,500 28,000 42,000 98,000 8,500 5,000 59,500 73,500 37,500 87,500 12,000 25,500 76,500 45,000 31,500 0 0 (i) Base compensation 166,972 151,256 55,138 128,657 26,131 71,560 59,030 137,735 64,824 16,253 13,200 999'69 139,220 53,060 146,277 118,804 123,808 (iii \equiv ε \equiv Ξ Ξ \equiv Ξ € Ξ Ξ ε Ξ Ξ \equiv Ξ \equiv 4Teresa Oelke Senior VP of State Ops. (part 1Emily Seidel President & Chief Executive 6David Johnson Sr. Director of Training/Cir. (A) Name and Title 5Slade O'Brien VP, Grassroots Leadership 2V ctor Bernson Secretary, VP & General 9 Brent Gardner VP/Government Affairs See Additional Data 3Chase Downham Sr. VP State Ops & 8 Jorge Lima Senior VP of Policy 7Daniel Garza Executive Director Grassroots Strat. Counsel Officer Table year)

12/2/2019

Schedule J (Form 990) 2018

First class travel may be provided if there are last minute flight changes or there is no other available travel alternative. All travel is for a bona fide business purpose. Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. Return Reference Part I, Line 4a Part I, Line 7 Part I, Line 1a

Teresa Oelke, Senior VP of State Operations, received a separation of services payment in the amount of \$63,750. The organization pays out discretionary bonuses.

Schedule J (Form 990) 2018

Software ID:

Software Version:

EIN: 52-1527294

Name: Americans for Prosperity Foundation

Form 990, Schedule	e J,	Form 990, Schedule J, Part II - Officers, Directors, Trustee	irectors, Trustees, K	ey Employees, and h	s, Key Employees, and Highest Compensated Employees	d Employees		
(A) Name and Title		(B) Breakdown	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefils	(B)(i)-(D)	column (B) reported as deferred on prior Form 990
1Emily Seidel President & Chief Executive Officer	8 8	71,560	127,500			:	209,898	0
	Ξ		000,182	83	3,522	2 024	489,762	
Secretary, VP & General Counsel	€ (151,256	28,000			7,055	197,332	0
3Chase Downham Sr. VP State Ops &	Ξ	55,138	42,000	53	2,803	7,111	102,081	0
Grassroots Strat.	€	128,657	98,	29	6,540	16,592	249,856	0
4Teresa Oelke Senior VP of State Ops.	€	26,131	0	19,152	1,624	3,725	50,632	0
(part year)	€	60,974	0	44,688	3,790	8,691	118,143	
SSlade O'Brien VP, Grassroots Leadership	€	146,277	76,	464	13,770	23,701	260,712	0
	<u>(ii)</u>		8,500	52	1,530	2,633	28,968	0
6David Johnson Sr. Director of Training/Cir.	(E)	118,804	45,	446	495	2,331	167,076	0
Dev.	(E)	13,200	2,000	50	4,452	20,978	43,680	0
7Daniel Garza Executive Director	€	999'65	25,	83	0	5,807	91,056	0
	€	139,220	29,500	193	0	13,549	212,462	0
8Jorge Lima Senior VP of Policy	(E)	090'85	31,500	32	5,220	7,918	02,730	0
	(E)	123,808	73,	92	12,180	18,475	228,039	0
9Brent Gardner VP/Government Affairs	Ξ	29,030		32	4,581	2,851	103,994	0
	€		87,500	76	10,689	6,652	242,652	0

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

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

age hip		Ĩ	Ĭ	ľ	I	Î	rolled	No		No.		No	Ĭ	N _o	ĺ	Î		<u>_</u>
(k) Percentage ownership							Sect on 512(b) (13) controlled entity?	_		_		_		_				2018
	2					34												066 m
I Gene	Yes	-				V, line	(h) Percentage ownership											R (For
(h) Disproprtionate Code V-UBI General or allocat ons? amount in box managing 20 of Schedule K-1 (Form 1065)						30, Part I												Schedule R (Form 990) 2018
tionate ons?	2					ırm 99	(g) Share of end-of- year assets											"
(h Dispropr allocat	Yes					on Fc	Share											
(f) (g) Share of Share of D total income end-of-year assets						ered "Yes"	(f) Share of total income											
(f) Share of total income			5			ation answ	Type of ent ty (C corp, S corp, or trust)			20								2
inant inant slated, ted, I from der 512-						ganiza ar.	Type (C cor	υ		U		U		υ				
Predominant income(related, unrelated, excluded from tax under sections 512-514)						if the or he tax ye	(d) Direct controlling entity											
(d) Direct controlling entity						Complete during the	Direc	N/A		N/A		N/A		N/A				
(c) Legal domicile (state or foreign						or Trust	(c) Legal domicile (state or foreign country)	DE		ĐĒ		DE		DE				
(b) Primary activity						as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line ated as a corporation or trust during the tax year.	Le don (state o	۵		Δ		О		Δ				
							ivity							_				
						Taxable ations tre	(b) Primary activity	Holding Company		Consulting		ulting		Holding Company				
						tions ganiză		Holdi		Consi		Consulting		Holdir				
(a) Name, address, and EIN of related organization						Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organ because it had one or more related organizations treated as a corporation or trust during the tax year.												
(a) me, address, and EIN related organization						f Relate e or mor	Jo N.											
Nan L		J.				t had on	(a) Name, address, and EIN of related organization											
						dentific ecause i	lame, addr related o	õ	2200 Wilson Blvd Ste 500 Arlington, VA 22201 46-3335308		2300 Wilson Blvd Ste 500 Arlington, VA 22201 46-3309110		2200 Wilson Blvd Ste 500 Arlington, VA 22201 46-3325739		2300 Wilson Blvd Ste 500 Arlington, VA 22201 45-3147042			
						I.	-	(1)CAVHOCO INC	2200 Wilson Blvd Ste Arlington, VA 22201 46-3335308	(z)DBLDBL INC	/ilson Blv // VA 2 9110	(3)KNSLT INC	2200 Wilson Blvd Ste Arlington, VA 22201 46-3325739	ပ္ပ	filson Blv in, VA 2: 7042			
						Part IV		(1)CA	2200 V Arlingt 46-333	(2)DBI	2300 V Arlingto 46-330	(3)KNS	2200 W Arlingto 46-332	(4)THOCO	2300 W Arlingto 45-314			

a Receipt of (1) interest, (fill annultes, (fill) royalties, or (inv) rent from a controlled entity. a Receipt of (1) interests, (fill annultes, (fill) royalties, or (inv) rent from a controlled entity. Giff, grant, or capital contribution from related organization(s). c Giff, grant, or capital contribution from related organization(s). c Loans or loan guarantees to or for related organization(s). c Loans or loan guarantees by related organization(s). c Dividends from related organization(s). p Sale of assets from related organization(s). Exchange of assets from related organization(s). Exchange of assets from related organization(s). Exchange of assets with related organization(s). R Lease of facilities, equipment, or other assets from related organization(s). B Performance of services or membership or fundralising solicitations for related organization(s). B Performance of services or membership or fundralising solicitations by related organization(s). Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) or Sharing of related organization(s) for expenses.	10 11 11 11 11 11 11 11 11 11 11 11 11 1	N
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oursement paid by related organization(s) for expenses . • • • • • • • • • • • • • • • • • •		2
		I
Other transfer of cash or property to related organization(s)	11	S
Other transfer of cash or property from related organization(s)	115	ž
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.	esholds.	
(a) (c) (c) Name of related organizat on the control of the contro	(d) Method of determining amount involved	volved
(1)Americans for Prosperity Narket Value		
(2)Americans for Prosperity 0 372,501 Market Value		
(3) Americans for Prosperity P 726,692 Cost		Ξ

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

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.

(k) Percentage ownership				7		ı	V			0) 2018
(j) General or managing partner?	Yes No		-							Schedule R (Form 990) 2018
Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)								-		Schedule
	ž								-	
(h) Disproprt onate allocations?	Yes									
(g) Share of end-of-year assets										
(f) Share of total income										
(e) Are all partners section 501(c)(3) organizat ons?	No									
	Yes									
Predominant income (related, unrelated, excluded from tax under sections 512-	514)									
(c) Legal domicile (state or foreign country)										
(b) Primary activity										
(a) Name, address, and EIN of ent ty										
Name, address				2,9,2						

12/2/2019

Schedule R (Form 990) 2018

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions).

Return Reference

Explanation

Schedule R (Form 990) 2018

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