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Form	-	-		

Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.



Department of the Treasury Internal Revenue Service and ending A For the 2018 calendar year, or tax year beginning D Employer identification number C Name of organization B Check if applicable: X Address RE: POWER 33-1041433 X Name change Doing business as Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Initial 651-645-3939 2639 NICOLLET AVE #220 Final 1,263,883. G Gross receipts \$ City or town, state or province, country, and ZIP or foreign postal code termin-ated H(a) is this a group return]Amende]return MINNEAPOLIS, MN 55408 Yes X No F Name and address of principal officer: KARUNDI WILLIAMS for subordinates? Applica-H(b) Are all subordinates included? Yes No pending SAME AS C ABOVE If "No," attach a list. (see instructions) 527 1 Tax-exempt status: 501(c)(3) X 501(c) (4947(a)(1) or) 🗲 (insert no.) 4 H(c) Group exemption number 🕨 J Website: WWW.REPOWER.ORG L Year of formation: 2003 M State of legal domicile: MN Other Þ Association K Form of organization: X Corporation Trust Briefly describe the organization's mission or most significant activities: PROMOTE SOCIAL WELFARE WHILE Part I ADVANCING PROGRESSIVE SOCIAL CHANGE AND ECONOMIC JUSTICE. 1 Activities & Governance Check this box 🕨 🔄 if the organization discontinued its operations or disposed of more than 25% of its net assets. 122 Number of voting members of the governing body (Part VI, line 1a) 3 12 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 25 4 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 $\overline{12}$ 6 Total number of volunteers (estimate if necessary) 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, line 38 71 Current Year Prior Year 642,472. 944,208 Contributions and grants (Part VIII, line 1h) 621,411 715,562. 8 Revenue Program service revenue (Part VIII, line 2g) <u>0</u>. 9 1 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) Ò. 102. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,263,883. 11 1,659,873. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0. 12 0 Grants and similar amounts paid (Part IX, column (A), lines 1-3) Ō. 13 0 Benefits paid to or for members (Part IX, column (A), line 4) 657,767. 14 609,029. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. Ω. Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) 216,462. b Total fundraising expenses (Part IX, column (D), line 25) 🛛 🕨 _____ 903,391. 1,001,826. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) ,561,158. 1,610,855. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -297,275. 18 49,018 Revenue less expenses. Subtract line 18 from line 12 19 End of Year Beginning of Current Year 1,077,692. P. 1,375,577. Assets (Balano 20 Total assets (Part X, line 16) 191,943. 192,553 21 Total liabilities (Part X, line 26) 885,749. 1,183,024. 22 Net assets or fund balances. Subtract line 21 from line 20 ġę Under penaities of perjury, I declare tha) I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is Part II Signature Block true, correct, and complete. Declaration of premarer (other than officer) is based on all information of which preparer has any knowledge. 10/25/2019 Date Signature/of officer Sign EXECUTIVE DIRECTOR

Here	KARUNDI WILLIAMS, EXECUTIVE DIRECTOR	
	Type or print name and title Preparer's signature	Date Check PTIN
	Print/Type preparer s name	10/(7/19 if p01484710
Paid	DEIRDRE HODGSON	Firm's EIN 41-0746749
Preparer	Firm's name CLIFTONLARSONALLEN DIF	
Use Only	Firm's address A20 BOUTH DIMIN DIMENSE	Phone no.612-376-4500
		X Yes No
May the I	RS discuss this return with the preparer shown above? (see instructions)	Form 990 (2018)

		33-1041433	Page 2
n 990 (2	RE: POWER		[TTT]
rt III	D18) RE: POWER Statement of Program Service Accomplishments Statement of Program Service accomplishments Check if Schedule O contains a response or note to any line in this Part III		X
	in the contains a response of flute to any into a sur-		
	\mathbf{T}_{max} with a the properties of SIGN \mathbf{T}_{max}	LEADERSEIL	. <u> </u>
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COM	LSTONE ACTION'S MISSION IS TO IGNITE LEADERSHIP IN MUNITIES TO WIN CHANGE IN THE PROGRESSIVE TRADITION MUNITIES TO WIN CHANGE IN THE PROGRESSIVE TRADITION he organization undertake any significant program services during the year which were not listed on the		XNo
		⊥ Yes	
arior	Form 990 or 990-EZ?	2 Yes	XNo
If "Y€	is," describe these new services on Schedule O.	s?¥es	
	- respiration cease conducting, or make significant on any got a	()	
	I denoribe these changes on Schedule O.	as measured by expense	and
Desc	ribe the organization's program service accomplishments of the amount of grants and allocations to o	thers, the total expenses,	anu
Soct			
reve	nue, if any, for each program service reports 2.4.0 is training grants of \$ U •) (Re	venue\$, , , , , , , , , , , , , , , , , , , ,
a (Code			<u></u>
MO	VEMENT BUILDING:	TONG-T	ERM
	LLSTONE ACTION'S MOVEMENT BUILDING WORK CREATES POWE	REUL, DUNC IS	BLIC
WE	LLSTONE ACTION'S MOVEMENT BUILDING WORK CREATES POWE VEMENTS FOR CHANGE BY ENHANCING AND CONNECTING THE F	LECIORAD, 10.	
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TF	AININGS TO 130 NONPROFIT HEADING 121		
		<u></u>	
		Revenue \$ 138	.564.
		Revenue \$	
4b (Co	de:)(Expenses \$165,515. Including galactors DLITICAL LEADERSHIP:		
P	DEFTICAL HEADERONIZE	ON THE WELLST	TONE
	TTATIONE ACTION'S POLITICAL LEADERSHIP WORLDBLE TO	STEP FORWARD	OFF
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	THE AND BUILD IONDA SET AND BUILD IONDA		
	HE SIDELINES AND BUILD POWER IN COMMONITERS IN 2018. ROJECT PROVIDED TRAININGS TO 1,027 LEADERS IN 2018.		
<u>P</u>	RODBET TROUBLE		······
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-	0.)	(Revenue \$ 38	6,994
4c (Code:) (Expenses \$ 1,005,279. including grants of \$ 0.)		
<u>```</u>	THE TRANSPORT OF THE TRANSPORT		
		HNOLOGY, BUII	DS TH
i	WELLSTONE ACTION'S NEWEST BODY OF WORK, MOULL AD	VANCE CHANGE	IN OU
	WELLSTONE ACTION'S NEWEST BODY OF WORK, MOVEMENT TEC SKILLS OF DATA AND DIGITAL PRACTITIONERS WHO WILL AD COMMUNITIES. THE MOVEMENT TECHNOLOGY PROJECT PROVID	ED TRAININGS	TO
•	COMMUNITIES. THE MOVEMENT TECHNOLOGY INCOMOL		
	COMMUNITIES. THE MOVEMENT ILCHAOLOGICAL 1,756 DATA AND DIGITAL STRATEGISTS IN 2018.		
	1,100		
	Other program services (Describe in Schedule O.)) (Revenue \$)	
40			
	(Expenses \$ 1,246,038. Total program service expenses ► 1,246,038.		orm 990 (
40			
	2 12-31-18 2		
83200	2 12-31-18 2		053-55

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33-<u>1041433</u> Page**3**

	RE: POWER	<u></u>			
Form	IV Checklist of Required Schedules	<u>+</u> `	es	<u>No</u>	
Pan	Is checking			Х	
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	1	\mathbf{x}	<u> </u>	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private rotation of the section	2	≙∔		
	If "Yes," complete Schedule A			v	
2	Is the organization required to compare the indirect political campaign activities on behall of or in opposite	3		X	
з	Did the organization engage in direct or indirect political campaign activities of behavior of a section 501(h) election in effect public office? If "Yes," complete Schedule C, Part I				
	Did the organization engage in direct of indirect personal public office? If "Yes," complete Schedule C, Part I	4			
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, of have a construct of the section 501(c)(3) organizations. Did the organization engage in lobbying activities, of have a construct of the section 501(c)(3) organization. Did the organization engage in lobbying activities, of have a construct of the section 501(c)(3) organization. Did the organization engage in lobbying activities, of have a construct of the section 501(c)(3) organization. Did the organization engage in lobbying activities, of have a construct of the section 501(c)(3) organization. Did the organization engage in lobbying activities, of have a construct of the section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or is the organization a sec		1		
		5		X	-
5	during the tax year? If Tes, complete Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dece, and similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III				
	similar amounts as defined in Revenue Proceeding of thirds or any similar funds or accounts for which donors have the name of the part i	6		X	_
6	bit the organization maintain any donor advisor and the standard accounts? If "yes, complete concernent,				-
-	provide advice on the distribution or investment or another including easements to preserve open space,	7		X	
7	Did the organization metabolism or investment of amounts in such funds of accession accession provide advice on the distribution or investment of amounts in such funds of accession accession accession provide advice on the distribution or investment of amounts in such funds of accession accessio	<u>├</u> ──	<u>├</u> ──		-
	the environment, historic land areas, or materie and the burned troagures, or other similar assets? If real, compare	8		X	
		<u>├</u> °		+	-
8	Schedule D. Part III	1			
~	Did the organization maintain concerne and the second seco		1	x	
9	Schedule D, Part III	9	+	$+\hat{-}$	-
			1	X	
		10			
10	If "Yes," complete Schedule D, 1 and a metated organization, hold assets in temporarily restricted order of the Did the organization, directly or through a related organization, hold assets in temporarily restricted order of the organization, directly or through a related organization, hold assets in temporarily restricted order of the organization, directly or through a related organization, hold assets in temporarily restricted order of the organization, directly or through a related organization, hold assets in temporarily restricted order of the organization, directly or through a related organization, hold assets in temporarily restricted order of the organization, directly or through a related organization, hold assets in temporarily restricted order of the organization, directly or through a related organization, hold assets in temporarily restricted order of the organization of the organization of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X If the organization's answer to any of the following questions is "Yes," then complete Schedule D, the organization of the following questions is "Yes," then complete Schedule D, the organization of the following questions is "Yes," then complete Schedule D, the organization of the following questions is "Yes," then complete Schedule D, the organization of the following questions is "Yes," then complete Schedule D, the organization of the following questions is "Yes," the organization of the following questions is "Yes," the organization of the following question of the following questions is "Yes," the organization of the following question of the following questio				
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11	 a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, 				
	as applicable.	11	$a \mid X$		
	 a Did the organization report an amount for land, buildings, and equipment in the amount for land, buildings, and buildings, an				
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		… [-]	<u>1f</u>	<u> </u>	
	 f Did the organization's separate of content ax positions under FIN 48 (ASC 740)? If "Yes," complete content of the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a Did the organization obtain separate, independent audited financial statements for the tax year? 			1	X
	the organization obtain separate, independent audited financial statements for the tax year	[1	2a		Δ
	12a Did the organization obtain separate, independent audited financial statements for the tax year? Schedule D, Parts XI and XII	Ì		1	
	Little included in consolidated, independent and the provident of the provident XI is optional		12b	X	
		L	13		<u>X</u>
	 Schedule D, Parts XI and XII and XII is consolidated, independent audited financial statements for the tax year is Was the organization included in consolidated, independent audited financial statements for the tax year is Was the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	[·	14a		Х
		Γ			
			14b		X
	investment, and program service activities outside the online and	····· F			
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	t stime coport on Pail IA. OVID III (A. OVID III (A. OVID III)	ŀ			
			16	i	х
	in the second on Part IA, country of the second secon		10		
	the individuals 7 in 100, complete the second fundraising second			1	x
			17	├ ──	╞╧
	(A) lines 6 and 116? If 763, complete the income and contributions of the this	5		1	x
			18		
	 18 Did the organization report more than \$15,000 total of fundraising event gross income and other and other sectors. 18 1c and 8a? If "Yes," complete Schedule G, Part II 1c and 8a? If "Yes," complete Schedule G, organization form gaming activities on Part VIII, line 9a? If "Yes," 		1		1
			19	1	X
	 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 		20a		X
	complete Schedule G, Part III		20h		
	The examination operate one of more more more than a solution of this return the solution operate one of the solution operate one operate			1	
	b If "Yes" to line 20a, did the organization attach a dopp of other assistance to any domestic organization or		21		X
	 20a Did the organization operation attach a copy of its audited financial statements of any domestic organization or b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements of any domestic organization or 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 22 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 23 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 24 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 24 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 				0 (2018
	domestic government on Part IX, country (4), and the				

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RE: POWER					
Porm 990 (2018) REFOUND Part IV Checklist of Required Schedules (continued)		Y	es	No	
	. 「	+			
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals or	22	2		Х	
22 Did the organization report more than \$5,000 of grants or other assistance to or ion domostic and a significant of the organization of the orga	tion's current	-	-1		•
 Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation answer "Yes" t					
		3	x		
and former officers, directors, frustees, toy entry Schedule J		-+			-
Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10	JU,000 as of the				
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more attact to last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and	i compiete	4a	ļ	Х	
last day of the year, that was issued after December 31, 2002. In 1999, Schedule K. If "No," go to line 25a		4b			-
Schedule K. If "No," go to line 25a		* *+-		<u>├</u> ───	-
 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary ponce array c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 	ar to defease				
c Did the organization maintain an escrow account other share a second		24c			-
any tax-exempt bonds?		4d			-
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any line darks and see 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess be	enefit			x	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations, it is an elete Schodule Part	<u> </u> 2	25a		<u>^</u>	
transaction with a disqualified person uning the year.	prior year, and			1	
 b Is the organization aware that it engaged in an excess benefit transaction with a disqualined percent that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Ye that the transaction has not been reported on any of the organization." 	s," complete	l			
that the transaction has not been reported on any of the organ		25b		X	
Schedule L. Part I	current or		ł		
 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payable to any former officers, directors, trustees, key employees, highest compensated employees, or disqualified personance of the payable of the payabl	sons? /f "Yes,"		ĺ		_
former officers, directors, trustees, key employees, highest compensated employees, or disqualities por		26			
former officers, directors, trustees, key employees, highest complete schedule L, Part II	hstantial				
27 Did the organization provide a grant or other assistance to an officer, director, itestee, itest	annay morne -	27		2	<u>.</u>
contributor or employee thereof, a grant selection committee member, of to a doy't contributor of any of these persons? If "Yes," complete Schedule L, Part III	Dort IV	1		T	
the supervised a party to a business transaction with one of the second	., Fait 14				
28 Was the organization a pure to a pure to a pure shoulds, conditions, and exceptions): instructions for applicable filing thresholds, conditions, and exceptions):		28a			X.
instructions for applicable filing thresholds, conditions, and exceptions, a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule Schedule L		28b	<u> </u>		X
 a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Scienced by a current or former officer, director, trustee, or key employee? If "Yes," complete Science by A family member of a current or former officer, director, trustee, or key employee? (or a family member the science of the scienc</i>	neutrie L, ran ficer		+		
 b A family member of a current or former officer, director, trustee, or key employee in res, complete b A family member of a current or former officer, director, trustee, or key employee (or a family member the c An entity of which a current or former officer, director, trustee, or key employee (or a family member the c An entity of which a current or former officer, director, trustee, or key employee (or a family member the 	reot) was an oncer,	28c			Х
 An entity of which a current or former officer, director, trustee, or key employee (of a family members) An entity of which a current or former officer, director, trustee, or key employee (of a family members) director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 		29			x
 director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Fair V</i>	• M	23	+	-+-	
		0			х
 29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'i control of the organization receive contributions of art, historical treasures, or other similar assets, or qualified contributions? If "Yes," complete Schedule M</i>		30	┼─		
a II IV-a Loomplete Screeuus W					х
 contributions? If 'Yes, complete constant in the second sec		31	-+-	-+-	<u></u> _
 31 Did the organization liquidate, terminate, or dissolve and source and source	omplete	ļ			v
32 Did the organization sell, exchange, dispose of, or transfer more than 2010 the		32	<u>'</u> ––––	_+	<u>X</u>
Schedule N, Part II	ulations				37
pp. Did the organization own 100% of an entity disregarded as separate non-mine organization		33	3		X
sections 301,7701-2 and 301,7701-3? If "Yes," complete Schedule R, Part 1	II, III, or IV, and			1	
 33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part 1 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part 1 		34		X	
34 Was the organization related to any tax-exempt or taxable entry? If you, Part V, line 1		35	ja	X	
 Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Did the organization have a controlled entity any payment from or engage in any transaction with a 	a controlled entity				
 35a Did the organization have a controlled entity within the meaning of section 312(0)(10)? 35a Did the organization have a controlled entity within the meaning of section 312(0)(10)? 35a Did the organization have a controlled entity within the meaning of section 312(0)(10)? 35a Did the organization have a controlled entity within the meaning of section 312(0)(10)? 35a Did the organization have a controlled entity within the meaning of section 312(0)(10)? 35a Did the organization have a controlled entity within the meaning of section 312(0)(10)? 35a Did the organization have a controlled entity within the meaning of section 312(0)(10)? 35a Did the organization have a controlled entity within the meaning of section 312(0)(10)? 35a Did the organization have a controlled entity within the meaning of section 312(0)(10)? 35a Did the organization have a controlled entity within the meaning of section 312(0)(10)? 35a Did the organization have a controlled entity within the meaning of section 312(0)(10)? 35a Did the organization have a controlled entity within the meaning of section 312(0)(10)? 35a Did the organization have a controlled entity within the meaning of section 312(0)(10)? 35a Did the organization have a controlled entity within the meaning of section 312(0)(10)? 35a Did the organization have a controlled entity within the meaning of section 312(0)(10)? 35a Did the organization have a controlled entity within the meaning of section 312(0)(10)? 35a Did the organization have a controlled entity within the meaning of section 312(0)(10)? 35a Did the organization have a controlled entity within the meaning of section 312(0)(10)? 35a Did the organization have a controlled entity within the meaning of section 312(0)(10)? 35a Did the organization have a controlled entity within the meaning of section 312(0)(10)(10)(10)(10)(10)(10)(10)(10)		35	5b		X
 bit "Yes" to line 35a, did the organization receive any payment from or engage in any transformation b If "Yes" to line 35a, did the organization receive any payment from or engage in any transformation b If "Yes" to line 35a, did the organization receive any payment from or engage in any transformation b If "Yes" to line 35a, did the organization receive any payment from or engage in any transformation b If "Yes" to line 35a, did the organization receive any payment from or engage in any transformation b If "Yes" to line 35a, did the organization receive any payment from or engage in any transformation 	lo related organization?				
 within the meaning of section 512(b)(13)? If "Yes," complete Schedule H, Part V, Mile 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 	e related organization	3	6		
36 Section 501(c)(3) organizations. Did the organization make any transition is the first of the organization of the organization make any transition of the organization of the organizat			-	- 1	
 If "Yes," complete Schedule R, Part V, line 2 If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization If the organization conduct more than 5% of its activities through an entity that is not a related organization conduct more than 5% of its activities through an entity that is not a related organization conduct more than 5% of its activities through an entity that is not a related organization conduct more than 5% of its activities through an entity that is not a related organization conduct more than 5% of its activities through an entity that is not a related organization conduct more than 5% of its activities through an entity that is not a related organization conduct more than 5% of its activities through an entity that is not a related organization conduct more than 5% of its activities through an entity that is not a related organization conduct more than 5% of its activities through an entity that is not a related organization conduct more than 5% of its activities through an entity that is not a related organization conduct more than 5% of its activities through an entity that is not a related organization conduct more than 5% of its activities through an entity that is not a related organization conduct more than 5% of its activities through an entity that is not a related organization conduct more than 5% of its activities through an entity that is not a related organization conduct more than 5% of its activities through an entity that is not a related organization conduct more than 5% of its activities through an entity that is not a related organization conduct more than 5% of its activities through an entity that is not a related organization conduct more than 5% of its activities through an entity that its act	anization	12	37		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a value of a notice of the organization conduct more than 5% of its activities through an entity that is not a value of a not set of the organization of the organization conduct more than 5% of its activities through an entity that is not a value of the organization of	Part VI	·	-+		
and that is treated as a partnership for federal income tax purposes <i>711 res</i> , complete early and that is treated as a partnership for federal income tax purposes <i>711 res</i> , complete early and that is treated as a partnership for federal income tax purposes <i>711 res</i> , complete early and that is treated as a partnership for federal income tax purposes <i>711 res</i> , complete early and that is treated as a partnership for federal income tax purposes <i>711 res</i> , complete early and that is treated as a partnership for federal income tax purposes <i>711 res</i> , complete early and that is treated as a partnership for federal income tax purposes <i>711 res</i> , complete early and that is treated as a partnership for federal income tax purposes <i>711 res</i> , complete early and the set of the se	1b and 19?		38	Х	l
38 Did the organization complete Schedule of and protect style	*****	کلخ	<u>101</u>		L
 Bid the organization complete Schedule O and provide explanations in Schedule O in Varianty Note. All Form 990 filers are required to complete Schedule O Part V Statements Regarding Other IRS Filings and Tax Compliance 					
Part V Statements Regarding Other into Fininge Check if Schedule O contains a response or note to any line in this Part V	<u></u>	. <u></u>	T T	V	
Check it Schedule O contains a roopen				Yes	N
	1a 5	53			
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1b	의			10
 1a Enter the number reported in Box 3 of Form 1090. Enter 0 intercept b Enter the number of Forms W-2G included in line 1a. Enter -0 if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and r 	reportable gaming		9 <u>.</u> 9		100
			1c	000	<u> </u>
c Did the organization comply with backup withholding rates for opporting the second s		f	Form	990	(20
832004 12-31-18 4			<u> </u>		
• *			05	3-5	DH

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	33	3- <u>1041</u> 4	<u>133</u>	Pa	ige 5	-
orm 990	(2018) RE: POWER Statements Regarding Other IRS Filings and Tax Compliance (continued)		. <u> </u>	<u> </u>		-
Part V	Statements Regarding Other IRS Fillings and Tax Company			Yes	No	
2a Ente	er the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 2a	25		ا ب <mark>ہ</mark> ا	1 A A A	
filed	d for the calendar year ending with or within the year conclusion and forderal amployment tax returns?		2b	X		
h lfat	t least one is reported on line 2a, did the organization life an equival to e-tile (see instructions)			1 13 1 1 1 1		2
No	te. If the sum of lines 1a and 2a is greater than 200, you may be not a more during the year?		3a		X	_
3a Did	I the organization have unrelated business gross income of \$1,000 or more during the year and the second of the second se		3b		 	_
h lf "	Yes," has it filed a Form 990-1 for this year? " "No to the day,"	,a		1		
4a At	Yes," has it filed a Form 990-T for this year? If "No" to line 3D, provide an explanation of the authority over any time during the calendar year, did the organization have an interest in, or a signature or other authority over		4a	<u> </u>	X	
fine	ancial account in a foreign country (such as a bank account, a					d.
b If"	Yes, " enter the name of the foreign country:	.R).				
U Co	Yes," enter the name of the foreign country: where the name of the foreign country: where instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBA se instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBA		5a		X	
- W	ee instructions for filing requirements for FinCEN Form 114, Report of Foreign Burn and Family as the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5b		X	
5a Wa	as the organization a party to a prohibited tax shelter transaction at any time during the tax year management d any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5c			
b Di	d any taxable party notify the organization that it was of is a party to a province of the province of the second se	n solicit		Τ		
C IT	"Yes" to line 5a or 5b, did the organization file Form 8886-T?	in bolion	6a	X		
6a Do	oes the organization have annual gross receipts that are normally greater than \$100,000,000,000,000,000,000,000,000,000		<u> </u>	1		
	the tradude with even solution of the top, out the		6b	X		
			1		·	
w	rere not tax deductible? Arganizations that may receive deductible contributions under section 170(c).	d to the navor	? 7a			
70	brganizations that may receive deductible contributions under section 170(c). Brganizations that may receive a deductible contribution and partly for goods and services provide did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provide did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provide	1 to the payor	70		+	
a Di	id the organization receive a payment in excess of \$75 made party as a contribution and party for granted and in the second party is a second party for second party is a second party for which it was required in the second party is a second property for which it was required to be a second party of the second party is a second party of the second party of the second party is a second party of the second		- <u></u>	+	+	
b lf	"Yes," did the organization notify the donor of the value of the goods of services pre-many primer in the service pre-many property for which it was required Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required		7.			
сD	Did the organization sell, exchange, or otherwise dispose of tangline potential proj. O file Form 8282? 7d		70			
to	o file Form 8282?		-1-			÷.
d lt	f "Yes," indicate the number of Forms 8282 filed during the year The organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		. <u>7</u> e		-+-	
еC	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		. <u>7</u> f	_	-+-	
fΣ	Did the organization, during the year, pay premiums, directly of the arganization file Form 8899 as	s required?	. [_/9		-+-	<u> </u>
g 1	Did the organization, during the year, pay premiums, directly or indirectly, on a personal period of the organization file Form 8899 as If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	orm 1098-C	? 71	니_	-+-	
h I	If the organization received a contribution of qualified intellectual property, did the organization more approach in the organization file a F If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a F		- P -			÷
			. 8	<u>- </u>		
	sponsoring organization have excess business holdings at any data excess					
9	sponsoring organizations maintaining donor advised funds. Sponsoring organizations maintaining donor advised funds.		9	a		_
a	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		. 9	b		
u h	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person advis			·		
a	Initiation fees and capital contributions included on rare vir, use of club facilities				[
						.: j::
			-			
a				:		
b	Gross income from other sources (bo not not an early and an early an ea			l2a		
			F		·	÷'
12a	Section 4947(a)(1) non-exempt charitable trusts, is the organization of the year					Ľ.
	If "Yes," enter the another of the owner of the set of		F.	13a		Γ
13			···· [-	<u> </u>		
а						
	organization is licensed to issue qualified freating plane			14a		┢
С	 Enter the amount of reserves on hand Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? Did the organization receive any payments for indoor tanning services during the tax year? 	••••••	·····			+
14a	 a Did the organization receive any payments for indoor tanning services during the tax year in the tax year in the services during the tax year in the tax year i		ŀ	<u>14b</u>		+
b	o If "Yes," has it filed a Form 720 to report these payments manufactory of more than \$1,000,000 in remuneration of	•]			l
15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation of ls the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration of excess parachute payment(s) during the year?		þ	15		╉
	excess parachute payment(s) during the year r					1
	If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment incom-	∋?		16	<u> </u>	+
16	Is the organization an educational institution subject to the section roots enabled					Ļ
	If "Yes," complete Form 4720, Schedule O.			Forn	1990	1 ()

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33-104143	3 Page 6
Form 990 (2018) RE: POWER Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No Part VI Governance, Management, and Part VI Governance, and the part VI Gov) lesponse
Form 990 (2018) RH 1 000 For each "Yes" response to intervent of the instructions.	X
Form 990 (2018) RE: POWER Porm 990 (2018) RE: POWER Porm 990 (2018) RE: POWER Porm 990 (2018) Control of the second secon	<u>میں جگیا</u> میں ج <u>مع میں منبقد میں میں م</u>
the the dealer of the second and a response of horse to any	Yes No
Section A. Governing Body and manage	
1a 1a 1a 1a 1a 1a	
1a Enter the number of voting members of the governing body at the end of the fact year. 1a Enter the number of voting members of the governing body, or if the governing If there are material differences in voting rights among members of the governing body, or if the governing If there are material differences in voting rights among members of the governing body, or if the governing If there are material differences in voting rights among members of similar committee, explain in Schedule 0. 12	
1a Enter the numbers of the governing cost, in the governing cost, i	
body delegated broad authority to an executive committee or similar committee, separate the second s	2 X
 b body delegated broad authority to an executive control of the factor of the	2
 b Enter the national function of the provided and the provided an	3 X
 officer, director, trustee, or key employee i annual end of the organization delegate control over management duties customarily performed by or under the direct end of the organization delegate control over management duties customarily performed by or under the direct end of the organization delegate control over management duties customarily performed by or under the direct end of the organization delegate control over management duties customarily performed by or under the direct end of the organization delegate control over management duties customarily performed by or under the direct end of the organization delegate control over management duties customarily performed by or under the direct end of the organization delegate control over management duties customarily performed by or under the direct end of the organization delegate control over management duties customarily performed by or under the direct end of of the organization delegate control over management duties customarily performed by or under the direct end of of officers, directors, or trustees, or key employees to a management company or other person? of officers, directors, or trustees, or key employees to its governing documents since the prior Form 990 was filed? 	4 X
 3 Did the organization delegate control over management company or other person? of officers, directors, or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization make any significant changes to its governing documents of the organization's assets? 	5 X
as the presentation make any significant and a significant of the organization of the	6 X
 of officers, directors, or trustees, or key employees to its governing documents since the prior Form 990 was more stocked. Did the organization make any significant changes to its governing documents since the prior Form 990 was more stocked. Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members stockholders, or other persons who had the power to elect or appoint one or 	
	7a X
6 Did the organization have members, stockholders, or other persons the members.	
	7b X
 7a Did the organization have members, stockholders, more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or c and a subject the provide the	
 b Are any governance decisions of the organization recently persons other than the governing body? B Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 	8a X
Did the organization contemporaneously document the meetings held of white organization contemporane	8b X
to Each committee with authomy to use the and the part VII. Section A, who cannot be committee	9 X
 a The governing body? b Each committee with authority to act on behalf of the governing body? b Each committee with authority to act on behalf of the governing body? c Bach committee with authority to act on behalf of the governing body? b Each committee with authority to act on behalf of the governing body? c Bach committee with authority to act on behalf of the governing body? c Bach committee with authority to act on behalf of the governing body? d Bach committee with authority to act on behalf of the governing body? d Bach committee with authority to act on behalf of the governing body? d Bach committee with authority to act on behalf of the governing body? d Bach committee with authority to act on behalf of the governing body? d Bach committee with authority to act on behalf of the governing body? d Bach committee with authority to act on behalf of the governing body? d Bach committee with authority to act on behalf of the governing body? d Bach committee with authority to act on behalf of the governing body? d Bach committee with authority to act on behalf of the governing body? d Bach committee with authority to act on behalf of the governing body? d Bach committee with authority to act on behalf of the governing body? d Bach committee with authority to act on behalf of the governing body? d Bach committee with authority to act on behalf of the governing body? d Bach committee with authority to act on behalf of the governing body? d Bach committee with authority to act on behalf of the governing body? d Bach committee with authority to act on behalf of the governing body? d Bach committee with authority to act on behalf of the governing body? d Bach committee with authority to act on behalf of the governing body? d Bach committee with authority to act on behalf of the govern	
 9 Is there any officer, director, trustee, or key employee listed in Part VII, cost 9 Is there any officer, director, trustee, or key employee listed in Part VII, cost 9 organization's mailing address? If "Yes, " provide the names and addresses in Schedule O organization's mailing address? If "Yes, " provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 	Yes No
	10a X
Section B. Policies (<i>measures</i>) 10a Did the organization have local chapters, branches, or affiliates?	
10a Did the organization have local chapters, brancies, or animate governing the activities of such chapters, animates,	10b
 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a Has the organization O the process, if any, used by the organization to review this Form 990. 	11a X
11a Has the organization provided a complete any used by the organization to review this Form 950.	12a A
 b Describe in Schedule O the process, if any, used by the organization with the policy? If "No," go to line 13 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflict? b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflict? b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflict? b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflict? 	12b X
12a Did the organization have a written connect of we required to disclose annually interests that could give have a describe	
b Were officers, directurs, or induced, the existently monitor and enforce compliance with the policy in the polic	12c X
 12a Did the organization have a writer connector equired to disclose annually interests that could give not be used. b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give not be used. b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give not be used. c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 	13 X
in Schedule O now this was subjected lower policy?	14 X
 Did the organization have a written winsteborary provide the process for determining compensation of the following persons include a review and approval by independent Did the process for determining compensation of the following persons include a review and approval by independent Did the process for determining compensation of the following persons include a review and decision? 	
14 Did the organization have a written document of the following persons include a review and approximation of the following persons include a review and approximatin of the following pe	
 Did the organization flate and Did the process for determining compensation of the following persons include a ferrorial Did the process for determining compensation of the following persons include a ferrorial Did the process for determining compensation of the following persons include a ferrorial Did the process for determining compensation of the following persons include a ferrorial Did the process for determining compensation of the following persons include a ferrorial Did the process for determining compensation of the following persons include a ferrorial Did the process for determining compensation of the following persons include a ferrorial Did the process for determining compensation of the following persons include a ferrorial Did the process for determining compensation of the following persons include a ferrorial 	15a X
 15 Did the process for determining comparisation and decision and decision persons, comparability data, and contemporaneous substantiation of the deliberation and decision persons, comparability data, and contemporaneous substantiation of the deliberation and decision and decision persons, comparability data, and contemporaneous substantiation of the deliberation and decision persons, comparability data, and contemporaneous substantiation of the deliberation and decision persons, comparability data, and contemporaneous substantiation of the deliberation and decision persons, comparability data, and contemporaneous substantiation of the deliberation and decision persons, comparability data, and contemporaneous substantiation of the deliberation and decision between the organization and decision persons, comparability data, and contemporaneous substantiation of the describeration and decision persons, comparability data, and contemporaneous substantiation of the describeration and decision persons, comparability data, and contemporaneous substantiation of the describeration and decision persons, comparability data, and contemporaneous substantiation and decision persons, comparability data, and contemporaneous substantiation of the describeration and decision persons, comparability data, and contemporaneous substantiation decision and decision and decision persons, comparability data, and decision and decisio	15b 🕰 🕰
 b Other officers or key employees of the organization b Other officers or key employees of the process in Schedule O (see instructions). if "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 	16a X
 b Other officers or key employees of the process in Schedule O (see instructions). if "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 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? if axable entity during the year? 	16a <u>A</u>
 16a Did the organization invest in, contribute assets to or procedure requiring the organization to evaluate its participation taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation b If "Yes," did the organization follow a written policy or procedure requiring the steps to safeguard the organization's 	
 b If "Yes," did the organization follow a written policy or procedure requiring the organization to organization s in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's 	
b If "Yes," did the organization take	16b
b If "Yes," did the organization blow a material tax law, and take steps to safeguard the organization blow a material tax law, and take steps to safeguard the organization blow a material tax law, and take steps to safeguard the organization blow a material tax law, and take steps to safeguard the organization blow a material tax law, and take steps to safeguard the organization blow a material tax law, and take steps to safeguard the organization blow a material tax law, and take steps to safeguard the organization blow a material tax law, and take steps to safeguard the organization blow a material tax law, and take steps to safeguard the organization blow a material tax law, and take steps to safeguard the organization blow a material tax law, and take steps to safeguard the organization blow a material tax law, and take steps to safeguard the organization blow a material tax law, and take steps to safeguard the organization blow a material tax law, and take steps to safeguard the organization blow a material tax law, and take steps to safeguard the organization blow a material tax law, and take steps to safeguard the organization blow a material tax law, and take steps to safeguard the organization blow a material tax law, and take steps to safeguard the organization blow a material tax law, and take steps to safeguard the organization blow a material tax law, and take steps to safeguard the organization blow a material tax law, and take steps to safeguard the organization blow a material tax law, and take steps to safeguard tax law, and take steps tax law, and take steps to safeguard tax law, and take steps tax law, and	
exempt status with response	h available
exempt status with respect to such antargenee Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ SEE SCHEDULE O 17 List the states with which a copy of this Form 990 is required to be filed ▶ SEE SCHEDULE O 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 50 18 Section 6104 requires an organization to make these available. Check all that apply.	1(C)(3)S Unity) availability
17 List the states with which a parization to make its Forms 1023 (1024 of 1024 of 102	
 18 Section 6104 requires an organization to make its Forms ToDo (102 - 101 - 102) 18 Section 6104 requires an organization to make its Forms ToDo (102 - 101 - 102) 18 Section 6104 requires an organization to make its Forms ToDo (102 - 101 - 102) 18 Section 6104 requires an organization to make its Forms ToDo (102 - 101 - 102) 18 Section 6104 requires an organization to make its Forms ToDo (102 - 101 - 102) 18 Section 6104 requires an organization to make its Forms ToDo (102 - 101 - 102) 18 Section 6104 requires an organization to make its Forms ToDo (102 - 101 - 102) 18 Section 6104 requires an organization to make its Forms ToDo (102 - 101 - 102) 19 Other (explain in Schedule O) 10 Other (explain in Schedule O) 	and financial
Tor public inspection and the second	cy, and manour
for public inspection. Indicate how you made these available of the public inspection. Indicate how you made these available of the public inspection. Indicate how you made these available of the provide of the public during the tax year. Use a complexity of the provide of the public during the tax year.	
 19 Describe in Schedule O whether (and it so, now) are so 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 ► DIRECTOR - 651-645-3939 20 State the name, address, and telephone number of the person who possesses the organization's books and records ► DIRECTOR - 651-645-3939 	
State the name, address, and telephone number of the person with possesses 651-645-3939	
statements available to the public during are number of the person who possesses the organization board State the name, address, and telephone number of the person who possesses the organization board KARUNDI WILLIAMS, EXECUTIVE DIRECTOR - 651-645-3939 KARUNDI WILLIAMS, EXECUTIVE DIRECTOR - 651-645-3939	Form 990 (2018)
KARUNDI WILLIAMS, EXECUTIVE DIRECTLY DIRECTLY AND 55408 2639 NICOLLET AVE #220, MINNEAPOLIS, MN 55408	
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RE: POWER	Wabact Compensated
Form 990 (2018) RE : POWER Part VII Compensation of Officers, Directors, Trustees, Key Employees,	Highest Compensate
Employees, and Independent Contractors	
Employees, and independent of the protectory of the in this Part VII	
Check if Schedule O contains a response or note to any line in this Part VII	byees

33-1041433

Page 7

(m)

Section A. Officers, Directors, Trustees, Key Employees, and Highest Comp 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of

reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization,

more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees;

nization nor any related organization compensated any current officer, director, or trustee. and former such persons.

Check this box if neither the organization no	r any related c	rga	nzat	ion	com	pena		(D)	(E)		(F)
	(B)			(C Posit				رص) Reportable		ortable	E	stimated
Name and Title	Average	(do i	ant ch	iock n	nore t	han o	ne	compensation		ensation	ar	mount of
Name and the	hours per	how	unlee	s ner	son is	both /trust	an I	from		related		other
	week		1		- 1			the		izations		pensation
	(list any	rector						organization	(W-2/10	99-MISC)		rom the
	hours for	or di	8			sated		(W-2/1099-MISC)				ganization
	related	istee	trust		8	upen		(1.1.2.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1				nd related
	organizations	ual tri	lonal		Volqr	yee yee	-		ļ		org	janizations
	below line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former					
	2.00	<u> </u>								0.		0.
(1) CONNIE LEWIS	2.00	x		x				0.	·	0.		
CHAIR	2.00	t^-	<u> </u>	T	 -					0.		0.
(2) MARY LOFY	2.00	x		Х				0	•			
TREASURER	2.00			T	Ţ			0		0.		0.
(3) RUDY LOPEZ	2.00	x		X				0	•			
SECRETARY	2.00	1	\top		Τ		Γ			0.		0.
(4) SARAH AUDELO	2.00	X						0	•			
BOARD MEMBER	2.00				T	Τ		0		0		0.
(5) MARCIA AVNER	2.00	X						0	·		+-	
BOARD MEMBER (6) CARMEN BERKLEY	2.00		1					0		0		0.
	2.00	I X	[]				\perp	<u></u>			+-	·
BOARD MEMBER	2.00		Ţ					C		0		0.
(7) JEFF BLODGETT BOARD MEMBER	0.00		<u>د ا</u>				_	<u>`</u>				
	2.00						1			0		0.
(8) LEAH BOUDREADX BOARD MEMBER	2.00		<u> </u>				+		<u> </u>			
(9) TONI CARTER	2.00).	0		0.
BOARD MEMBER	2.00		X _	+	_		_				1	
(10) DAVE MONTEZ	2.0								b.	0	•	0.
BOARD MEMBER	2.0		<u>x</u>	\rightarrow		-+-	-+-					
(11) APRIL SIMS	2.0		x						0.	0	•	0.
BOARD MEMBER	2.0		<u>-</u>	-+	+		+			_		0
(12) SARA TOTONCHI	2.0		x						0.	0	<u>'-</u>	0.
BOARD MEMBER	2.0			-+	-†		+					. 0.
(13) SUJATA TEJWANI	2.0		x						0.	() .	0.
BOARD MEMBER	$-\frac{2.0}{2.0}$		<u> </u>	-†	+	-†	-					0.
(14) DAVE WELLSTONE	2.0		x						0.		<u>)</u> .	0.
BOARD MEMBER	2.0		-+	-	-+	- †	-					0.
(15) MARK WELLSTONE	2.0		x						0.		0.	0.
BOARD MEMBER	17.0		-			- †				111 04		17,805.
(16) SARA BETH MUELLER	43.0					Х		47,26	2.	111,86	ᆣ	11,000.
ACTING EXECUTIVE DIRECTOR												
												- 000 (0018)

Form 990 (2018)

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RE: POWER		. <u></u>						e (continued)	
1 990 (2018) RE : POWER T VII Section A. Officers, Directors, Tru	stees, Key Em	loyee	s, and	l Hig	hest	Cor	npensated Employee	(F)	(F)
(A) Name and title	(B) Average hours per	(do not	Posi check i	tion more th	han ol both	e an	Reportable compensation	Reportable compensation	Estimated amount of other
	week (list any hours for related organizations below line)	officer director	and a d	irector/	Highest compensated	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
		5 2	<u> </u>	<u> </u>	<u>T 10</u>				
		┥┤							
		_							
			_			<u> </u>			
						-			
							47,262		
1b Sub-total c Total from continuation sheets to Pa d Total (add lines 1b and 1c)	T VII, Section 7	• •••••	•••••				47,262	. 111,869). 0 9. 17,805
2 Total number of individuals (including compensation from the organization)									Yes No
 Did the organization list any former off line 1a? <i>If</i> "Yes," complete Schedule J For any individual listed on line 1a, is the second seco	for such individ	uar				 nd 0	ther compensation fro	om the organization	
and related organizations greater than	\$150,0007 //		tion fr		nv i	nrela	ated organization or in	dividual for services	
rendered to the organization? If Yes,	complete sond	iciulo o	101 00						
	st compensate	d inder	bende	nt co	ontra	ctors	s that received more the organization's	han \$100,000 of com tax vear.	
Complete this table for your five higher the organization. Report compensatio (A Name and bus	n for the calence	a yea	r engli IONI	9	an u	VALU	(E Description	3)	(C) Compensation
Name and bus		<u>_</u>		<u> </u>					
		<u>_</u>							
2 Total number of independent contra							tod above) who recei	ved more than	
	store (including	hut no	t limit	ed to	nno	ie iis	action approximation recon-		

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990 (2018) RE: POW						
VIII Statement of Revenue	e		1 1 D - + VIII			
Check if Schedule O contain	s a response or	note to any line	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
	1a					
1 a Federated campaigns						
b Membership dues		· · ·				
c Fundraising events						
d Related organizations e Government grants (contributio	·····					
 e Government grants (contributions) f All other contributions, gifts, grants, 	and					
similar amounts not included above	1f 6	42,472.				
g Noncash contributions included in lines 1:		8,800.				
h Total. Add lines 1a-1f		<u>►</u>	642,472.			
	E	Susiness Code	CO1 411	621,411.	n de la complete de l La complete de la comp	
2 a REGISTRATION FEI	s	900099	621,411.	021,411.		
b			<u></u>			
с						
d						
e						
f All other program service rever	nue L		621,411			
g Total. Add lines 2a-2f						
3 Investment income (including of	dividends, intere	si, anu				
other similar amounts)		roceeds				
4 Income from investment of tax	exempt bond p					
5 Royalties	(i) Real	(ii) Personal				
6 a Gross rents						
 b Less: rental expenses c Rental income or (loss) 					n an tha tha thair Bhailtean an tha tha	
d Net rental income or (loss)	L					
7 a Gross amount from sales of	(i) Securities	(ii) Other				
assets other than inventory						
b Less: cost or other basis						
and sales expenses						
e Gain or (loss)		L	natel el det		n fa fra cuir de l'An T	
d Net gain or (loss)	•••••••	· · · · · · · · · · · · · · · · · · ·				
B a Gross income from fundraisir	ig events (not					
 b Less: direct expenses 	of					
contributions reported on line	e 1c). See					
Part IV, line 18						
b Less: direct expenses	1	and the second s	- 1 1 No. 1 1 1			
c Net income or (loss) from fur	draising events					
9 a Gross income from gaming a	ICUMILIES, DEE	a				
Part IV, line 19		b	1			
 b Less: direct expenses c Net income or (loss) from ga 	ming activities		1			
c Net income or (loss) from ya	s returns					
and allowances	0,000,00	a				
b Less: cost of goods sold		b		27 He 문화가다		o Talita Natio
 b Less: cost of goods sold c Net income or (loss) from sa 	les of inventory				real real rates and	
<u>c Net Income or (ioss) norm se</u> Miscellaneous Rever		Business Coo	te statut takin			est the state of the state
11 a b						
b						
d All other revenue						a de la consecto de
e Total. Add lines 11a-11d			1,263,88	621,41	1	0.
				いっし ひろしょなよ		

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33-1041433 Page 9

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art	RE: FOWER B0 (2018) RE: FOWER IX Statement of Functional Expenses 501(c)(3) and 501(c)(4) organizations must complete	te all columns. All other	organizations must co	mplete column (A).	
ctior	501(c)(3) and 501(c)(4) organizations must comple	te all columns. All other	e Part IX		
	Check if Schedule O contains a response		(B)	(C) Management and	(D) Fundraising
о по	t include amounts reported on lines 6b,	Total expenses	Program service expenses	general expenses	expenses
5, 8t	o, 9b, and 10b of Part VIII.				
(Grants and other assistance to domestic organizations				
ä	nd domestic governments. See Part IV, line 21				
; (Grants and other assistance to domestic				
i	ndividuals. See Part IV, line 22				
	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
Ļ	Benefits paid to or for members			10 101	18,133.
5	Compensation of current officers, directors,	85,852.	49,588.	18,131.	10,100
	trustees, and key employees				
5	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and				
	persons (as defined under section 4958(r)(1)) and persons described in section 4958(c)(3)(B)			20.079	97,711.
	persons described in section 4356(c)(5)(b)	477,251.	349,462.	30,078.	<u> </u>
7	Other salaries and wages Pension plan accruals and contributions (include		·	899.	3 131.
₿	section 401(k) and 403(b) employer contributions	15,307.	11,277.	2,314.	3,131. 7,763.
	section 40 I(k) and 405(b) employer contribution,	37,482.	27,405		8,617
9	Other employee benefits	41,875.	29,762.	3,496.	0,011
0	Payroll taxes				
1	Fees for services (non-employees):			2 076	7,581
а	Management	36,839.	26,182	3,076.	
b	Legal	19,598.	13,929	. 1,030.	4,055
С	Accounting				
d	Lobbying Professional fundraising services. See Part IV, line 17		an an the statistical and		
е	Protessional fundraising services, occir are re, internet				
f	Investment management fees Other. (If line 11g amount exceeds 10% of line 25,			2 0.06	7,606
g	column (A) amount, list line 11g expenses on Sch 0.)	103,827.	93,135	. 3,086	
	column (A) amount, list line in gexpenses on our or)				20,926
12	Advertising and promotion	63,011.	38,146		
13	Office expenses	12,609.	8,961	. 1,053	. 4,555
14	Information technology			1 041	2,565
15	Royalties	12,466.	8,860	1,041	
16	Occupancy	21,178.		10,336	. 10,012
17	Travel		T		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials Conferences, conventions, and meetings				
19					
20				475	1,17
21	a sub-station and amortization	16,440		· ·	
22		2,338	1,66		
23	0879V03 for segrence transit arrest of covered				
24		8	a na sense a servica. Ne sense de la sense a s		
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)		F 07 70	<u> </u>	
	TRAINING EXPENSES	507,696			9. 16,44
	DIRECT MAIL EXPENSES	74,042			
	CUNTE TRAINING & DEVELO	31,671			
	TOTT DMENT RENTAL	1,676	1,19	<u>+• </u>	
			-1-010 00	8, 98,65	8. 216,46
-	240 Add lines 1 through 240	1,561,158	. 1,246,03	0. 50,05	
2	his transfer Complete this line only if the organizatio	n			
2	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.	ļ			
	Check here X if following SOP 98-2 (ASC 958-720)				Form 990 (2

urm QC	30 (20	RE: POWER	ري. موجوع مي موجوع مي مو موجوع مي موجوع مي موج	<u> </u>	41400 Page 1
Part	XII	Balance Sheet			
		Balance Sheet Check if Schedule O contains a response or note to any line in this Part X	(A)		(B)
			Beginning of year		End of year
			1,023,313.	1	617,460.
	1 (Cash - non-interest-bearing		2	
	· ·	Savings and temporary cash investments	35,259.	3	28,293.
	2	Pledges and grants receivable, net	47 369	4	24,006.
		the sector many shares and s			
1	_	the set of the receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete	a segura da destruto de compo	5	
	6				
	-	- retion 4058(6(1)), persons described in section 4958(c)(3)(B), and contributing			
		Leave and appropriate organizations of section 501(0)(9) voluntary		6	
s		omployees' heneficiary organizations (see instr). Complete Part if of our E		7	
Assets	7	Notes and loans receivable, net		8	
As	8	Inventories for sale or use	58 684	9	153,949.
l	۹	Prepaid expenses and deferred charges			
	10a	the sector of per			같은 해외 같은 것을 가지 않는다. 이번 것은 것은 것은 것을 들었다.
		basis. Complete Part VI of Schedule D	28,898.	10c	26,472
	b	Less: accumulated depreciation 10b 87,805		11	
	11	Investments, publicly traded securities	·	12	
	12	Lucetmonto, other securities, See Part IV, line 11	·	13	
	13	Investments - program-related. See Part IV, line 11	10,750.	14	0.
	14	Intendible assets	171 304	15	227,512.
	15	all success to See Part IV line 11		16	1,077,692.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	100 288	17	145,114.
	17	Accounts payable and accrued expenses		18	
	18	Grants payable	12,265.	19	0.
	19	Deferred revenue		20	
	20	Tax-exempt bond liabilities		21	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			
ŝ	22	Loans and other payables to current and former officers, directors, trustees,			
litie		Loans and other payables to other and the payables, and disqualified persons. key employees, highest compensated employees, and disqualified persons.		22	
Liabilities		Complete Part II of Schedule L		23	
Ξ	23	Secured mortgages and notes payable to unrelated third parties		24	
	24	Unsecured notes and loans payable to unrelated third parties	·····		
	25	Other liabilities (including federal income tax, payables to related third Other liabilities (including federal income tax, payables to related third			46.000
		other liabilities (including rouch included on lines 17-24). Complete Part X of parties, and other liabilities not included on lines 17-24).	0	• 25	<u>46,829</u> . 191,943
		Schedule D	192,553	• 26	191,945
	26	Total liabilities. Add lines 17 through 25	d		
_		Total liabilities. Add lines 17 through 20 and 20			825,749
es		complete lines 27 through 29, and lines 33 and 34.	1,096,357	• 27	60,000
anc	27	 Unrestricted net assets Temporarily restricted net assets 	86,667	_	00,000
Bal	28	u Liste dipet popote		29	a a ser a la granda de la contrato
- pu	29	Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ►			
Net Assets or Fund Balances		Organizations that do not follow 31 Ao Thi (1800 0-1)	an an an an ann an tha tha Anna Anna. Anna Anna Anna Anna Anna Anna Anna		n Periginalia per del del del
õ		and complete lines 30 through 34. Capital stock or trust principal, or current funds			
iets	3			31	
Ass	3			32	
let.	3				1 077 602
2	- 3	 Total net assets or fund balances Total liabilities and net assets/fund balances 	1,375,57	. 34	Form 990 (201
	3	4 Total liabilities and net assets/fulld balances			Form 330

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Form	990 (2018) RE: POWER				
Par	XI Reconciliation of Net Assets		<u> </u>	. [<u> </u>
	XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
		- 1 L – J	L,203,	883	3.
4	Total revenue (must equal Part VIII, column (A), line 12)	2	<u>1,</u> 561,	158	3.
1		3	-297,	27	5.
2		4 -	1,183,	,024	4.
3	the stand of veer (must equal Part A, sine out, condition ()	5			
4	() on invoctments	6			
5	C.C. Ullian	7			
6	Donated et	8			
7		9			0.
8					
9			885	.74	9.
10		10			
	column (B)) rt XII Financial Statements and Reporting			[
Pa	rt XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII		T	/es	No
	Accounting method used to prepare the Form 990: Cash X Accrual Other," explain in Schedu				
1	Accounting method used to prepare the Form 990: Cash Cash Constant "Other," explain in Schedu If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedu	e ().	2a		X
	If the organization changed its method of accounting from a prior year of checked other, countant? Were the organization's financial statements compiled or reviewed by an independent accountant?				
26	Were the organization's financial statements complied or reviewed by an independent and the second or review If "Yes," check a box below to indicate whether the financial statements for the year were compiled or review	ed on a			
	separate basis, consolidated basis, or both:		2b	X	
	Separate basis Consolidated in the second and accountant?		-20		
	Were the organization's financial statements audited by an independent accountance in the second statements for the year were audited on a separate for the second statements are separate in the second statements for the second statements are separate in the second statements for the second statements are separate in the second statements for the second statement statements for the second statement statement statements for the second statement statement statement statements for the second statement st	ate basis,		6. ta	
	If "Yes," check a box below to indicate whether the many state				
	consolidated basis, or both:				
	Separate basis	the audit,		x	
	c If "Yes" to line 2a or 2b, does the organization have a committee that assume reverses during the tax year, explain in S review, or compilation of its financial statements and selection of an independent accountant?		<u>2c</u>	<u> </u>	
	review, or compilation of its financial statements and social of an and the tax year, explain in S	chedule O.			1.111
	review, or compilation of its financial statements and selection of all independent dependent dependent of the selection process during the tax year, explain in S If the organization changed either its oversight process or selection process during the tax year, explain in the	Single Audit		:	x
3	a As a result of a federal award, was the organization required to another to another the		<u>3a</u>		<u> </u>
	Act and OMB Circular A-133?	equired audit			1
	 Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 	<u></u>	<u></u> 3b		<u> </u>
	or audits, explain why in Schedule O and describe any steps taken to undorge sources		Form	990	(2018)

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** PUBLIC DISCLOSURE COPY **

Schedule B

(Form 990, 990-EZ,

or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Employer identification number

Name of the organization		, ,
	RE: POWER	33-1041433
Organization type (chec	ck one):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(4) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	

Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)	Page 2
Name of organization	Employer identification number
DE.DOWED	33-1041433

RE: POWER

Part I C	Contributors (see instructions). Use duplicate copies of Part I if ad		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d) Type of contribution
<u>No.</u>	Name, address, and ZIP + 4	\$\$, 5,709.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	·	\$7,500.	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4 -		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ <u>18,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.) n 990, 990-EZ, or 990-PF) (20

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Schedule B (Form 990, 990-EZ, or 990-PF) (2018)	Page 2
Name of organization	Employer identification number
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Part I Contrib	putors (see instructions). Use duplicate copies of Part I if	additional space is needed.	an a
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ <u>25,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d) Type of contribution
No	Name, address, and ZIP + 4	\$\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$12,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$ <u>10,000.</u>	Person X Payroll I Noncash I (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$11,875.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12		\$7,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

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Schedule B (Form 990, 990-EZ, or 990-PF) (2018)	Page 2
Name of organization	Employer identification number
RE: POWER	33-1041433

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Part I	Contributors	(see instructions).	Use duplicate copies of Part I	if additional space is needed.
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(a)	(b)	(c)	(d) Type of contribution
<u>No.</u>	Name, address, and ZIP + 4	Total contributions \$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Payroll Poncash Poncash Payroll Part II for noncash contributions.)

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Schedule B (Form 990, 990-EZ, or 990-PF) (2018)	Page 3
Name of organization	Employer identification number
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RE: POWER

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

ı.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part l	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	

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Schedule B (Fo	rm 990, 990-EZ, or 990-PF) (2018)		Page 4
lame of organi	zation		Employer identification number
E: POWER	2		33-1041433
Part III Ex fro	clusively religious, charitable, etc., contributio m any one contributor. Complete columns (a) t mpleting Part III, enter the total of exclusively religious, ch se duplicate copies of Part III if additional s	hrough (e) and the following line ent aritable, etc., contributions of \$1,000 or I	ection 501(c)(7), (8), or (10) that total more than \$1,000 for the yea ry. For organizations less for the year. (Enter this info. once.) \$
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I		(0) 000 01 3.11	
	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
		(e) Transfer of gif	I
	Transferee's name, address, an		Relationship of transferor to transferee
	······································		
(a) No.			(d) Description of how gift is held
from Part I	(b) Purpose of gift	(c) Use of gift	
		and a second	
		(e) Transfer of gif	t
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
	Alternative Alternativ		
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		<u> </u>	
		(e) Transfer of gi	£
		(e) transfer of gi	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
-			
(a) No.			······
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		<u></u>	
		(e) Transfer of gi	ft
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
—			
-			
823454 11-08-18		18	Schedule B (Form 990, 990-EZ, or 990-PF) (20

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(Form	IEDULE D 990) ent of the Treasury	Complete if the org Part IV, line 6, 7, 8, 9, 10	al Financial Statem anization answered "Yes" on Fo 11a, 11b, 11c, 11d, 11e, 11f, 12 Attach to Form 990.	rm 990, a, or 12b.		OMB No. 1545-0047 2018 Open to Public Inspection
1000	levenue Service		90 for instructions and the lates	t information.	Employer	identification number
Name	of the organizati	on RE:POWER				3-1041433
Part	I Organiz	ations Maintaining Donor Advise	d Funds or Other Similar	Funds or A	ccounts.	Complete if the
		n answered "Yes" on Form 990, Part IV, lin				
			(a) Donor advised funds	(b) Funds an	d other accounts
1.	Total number at e	nd of year				
		of contributions to (during year)				
	~ ~ ~	of grants from (during year)				
4	Aggregate value a	at end of year				
5	Did the organizati	on inform all donors and donor advisors in	writing that the assets held in dor	hor advised fur	ıds	
	are the organizati	on's property, subject to the organization's	exclusive legal control?			Yes No
6	Did the organizati	on inform all grantees, donors, and donor a	advisors in writing that grant fund	s can be used	only	
	for charitable pur	poses and not for the benefit of the donor o	or donor advisor, or for any other	purpose confe	rring	
	impermissible priv	/ate benefit?				Yes No
		vation Easements. Complete if the or		rm 990, Part IV	, line 7.	
1	Purpose(s) of cor	servation easements held by the organizat	ion (check all that apply).			
	Preservatio	n of land for public use (e.g., recreation or		of a historically		
	Protection	of natural habitat	Preservation	of a certified h	istoric struc	ture
	Preservatio	n of open space				
2	Complete lines 2a	a through 2d if the organization held a qual	ified conservation contribution in	the form of a c	onservation	easement on the last
	day of the tax yea					at the End of the Tax Year
		conservation easements			2a	·
		tricted by conservation easements			2b	
с	Number of conse	rvation easements on a certified historic st	ructure included in (a)		2c	
d	Number of conse	rvation easements included in (c) acquired	after 7/25/06, and not on a histor	ric structure		
	listed in the Natio	onal Register			2d	
3	Number of conse	ervation easements modified, transferred, re	eleased, extinguished, or terminat	ed by the orga	nization dur	ng the tax
	year 🕨					
4	Number of states	where property subject to conservation e	asement is located			
5	Does the organiz	ation have a written policy regarding the pe	eriodic monitoring, inspection, hai	ndling of		Yes No
	violations, and er	nforcement of the conservation easements	it holds?			
6	Staff and volunte	er hours devoted to monitoring, inspecting	, handling of violations, and entoi	cing conservat	lion easeme	its during the year
	▶		in the state of the second sec	association of	ocomonto d	uring the year
7	Amount of exper	nses incurred in monitoring, inspecting, har	idling of violations, and enforcing	conservation e	asements u	unng une year
	▶\$		it full a second second second second	ation 170/b)(4)((D)(i)	
8		ervation easement reported on line 2(d) abo				Yes No
	and section 170(h)(4)(B)(ii)?		l ove open stat	mont and b	
9	in Part XIII, desc	ribe how the organization reports conserva	tion easements in its revenue and	a expense state	ranization's	accounting for
		able, the text of the footnote to the organiz	ation's financial statements that c	leschbes the o	rganzations	s accounting to:
	conservation eas	ements. zations Maintaining Collections	of Art Historical Treasure	es, or Other	Similar /	ssets.
Pa		if the organization answered "Yes" on For	m 990 Part IV line 8			
	Complete	If the organization answered res off of	CC 059) not to report in its rever	ue statement :	and halance	sheet works of art.
1a	If the organizatio	n elected, as permitted under SFAS 116 (Areas, or other similar assets held for public e	(SC 958), not to report in its rever	n furtherance o	of public sen	ice provide in Part XIII.
					n public ser	noc, provido, intractiviti,
	the text of the fo	otnote to its financial statements that desc	HDES THESE ITEMS.	etatement and	halance she	et works of art, historical
b	If the organizatio	n elected, as permitted under SFAS 116 (/ er similar assets held for public exhibition,	aducation or research in furthers	nce of public e	ervice provi	de the following amounts
			equication, or research in furthera	aree of public s	, provi	are are renorming tanoanto
	relating to these	items:			¢ م	
		luded on Form 990, Part VIII, line 1				
	(ii) Assets inclu	ded in Form 990, Part X	en ether similar apoeta f	or financial cair	► Ψ	
2	If the organization	on received or held works of art, historical t	reasures, or other similar assets to	or anancial galt tome:	i, piovide	
		ounts required to be reported under SFAS			► ¢	
		ed on Form 990, Part VIII, líne 1				
		in Form 990, Part X				edule D (Form 990) 2018
LHA	For Paperwork	Reduction Act Notice, see the Instruction	ns for Porm 990.		001	

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Cohor	ule D (Form 990) 2018 RE : POWEI	ર	-					33-10	41433	Page 2
Par		ollections of Ar	t, Hist	orical Tre	easures, o	r Othe	r Simil	ar Asse	ts (continu	ied)
	Using the organization's acquisition, accession	on, and other record	s, check	any of the	following that	are a si	gnificant	use of its	collection	items
0	(check all that apply):	,		÷						
а	Public exhibition	d		oan or excl	hange progra	ms				
b	Scholarly research	е		Other	-					
c	Preservation for future generations									
	Provide a description of the organization's co	lections and explai	n how th	ev further tl	he organizatio	on's exer	mpt purp	ose in Par	t XIII.	
5	During the year, did the organization solicit o	r receive donations (of art. his	torical trea	sures, or othe	er similar	assets			
	to be sold to raise funds rather than to be ma	intained as part of t	he orgar	ization's co	ollection?				Yes	No No
1000 C	t IV Escrow and Custodial Arran	aements. Comple	ete if the	organizatio	n answered "	Yes [®] on	Form 99	0, Part IV,	line 9, or	
	reported an amount on Form 990, Par			U						
1a	Is the organization an agent, trustee, custodi		iary for o	contribution	is or other as	sets not	included		_	
	on Form 990, Part X?		•					[Yes	L No
ь	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowina t	able:						
D	II Tes, explain are usungement in the end	•	0						Amount	
~	Beginning balance						1c			
	Additions during the year									
d	Distributions during the year									
e										
f	Ending balance Did the organization include an amount on F	orm 000 Part V line	21 for 6	ecrow or c	ustodial acco	unt liabil	∟		Yes	No
	If "Yes," explain the arrangement in Part XIII.									
Par		f the organization ar	swered	"Yes" on Fr	orm 990. Part	IV. line	10.			
Га	Lindowinent i unds. complete i	(a) Current year		rior year	(c) Two year			years back	(e) Four	years back
			(0) -	nor year	(c) = 100 you	5 Dubit	(4) 11100	Jouro Luon		<u>, </u>
1a	Beginning of year balance								1	
b	Contributions									
С	Net investment earnings, gains, and losses									
đ	Grants or scholarships									
е	Other expenditures for facilities									
	and programs				ļ					
f	Administrative expenses									
g	End of year balance				<u> </u>					
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1	g, column (a)) held as:					
а	Board designated or quasi-endowment 🕨		_%							
b	Permanent endowment ►	%								
с	Temporarily restricted endowment	%								
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.								
3a	Are there endowment funds not in the posse	ession of the organiz	ation that	at are held a	and administe	ered for t	the orgar	ization	F	_
	by:									Yes No
	(i) unrelated organizations								. <u>3a(i)</u>	
									. 3a(ii)	
b	If "Yes" on line 3a(ii), are the related organize	ations listed as requ	ired on S	Schedule R	?				3b	
4	Describe in Part XIII the intended uses of the									
	rt VI Land, Buildings, and Equip									
	Complete if the organization answere		0. Part l'	V, line 11a.	See Form 99	0, Part X	, line 10.			
	Description of property	(a) Cost or			t or other		ccumula	ted	(d) Bool	k value
	Description of property	basis (invest			; (other)		preciatio			
			,		· · · · · · · · · · · · · · · · · · ·					
	Land									
	Buildings									
С	Leasehold improvements			1	14,281.	<u> </u>	87,1	309.	20	6,472
	Equipment			<u> </u>	, 201 •					
e	Other		+ V a=4	mn /D) //m-	1001	1			2	6,472
Tota	I. Add lines 1a through 1e. (Column (d) must	equal Form 990, Par	ι <i>Α</i> , colu	nın (¤), iln e	100.)			Sobodu		n 990) 201
								achedu	ខេ ភ (ភព	⊓ ອອບ) ∠ປ ເ

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Schedule D (Form 990) 2018 RE: POWER			33-2	1041433 Page 3
Part VII Investments - Other Securities.				
Complete if the organization answered "Yes" of	on Form 990, Part IV, lir	ne 11b. See Form 990, F	Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va	luation: Cost or end-o	f-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ►				A DATA DATA DATA DATA DATA DATA DATA DA
Part VIII investments - Program Related.				
Complete if the organization answered "Yes"	on Form 990, Part IV, li	ne 11c. See Form 990, F	Part X, line 13. aluation: Cost or end-c	f voar market value
(a) Description of investment	(b) Book value	(c) Method of va	auation: Cost of end-c	n-year market value
(1)				
(2)				
(3)			· · · ·	
(4)			·····	
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets. Complete if the organization answered "Yes"	an Form 000, Port IV/	ing 11d See Form 990	Part X line 15	
Complete if the organization answered res	Description	me rita. decironin dad,		(b) Book value
THE FROM WELLCHONE ACTION				167,909.
DITE EDOM DOI	TORD			12,603.
		·······		47,000.
		·····		
(4)				
(5)				
(6)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 15.)			227,512.
Part X Other Liabilities.				
Complete if the organization answered "Yes"	on Form 990, Part IV,	line 11e or 11f. See Forr	n 990, Part X, line 25.	
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(1) DEFERRED LEASE INCENTIVE		46,720.		
(3) DEFERRED RENT		109.		
(4)				
(5)				
			1 The second se second second sec	

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2018

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Sche	dule D (Form 990) 2018 RE: POWER		1041433 Page 4
	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn	۱.
L	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	2,673,831.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities 2b	- ::.	
с	Recoveries of prior year grants		
d	Other (Describe in Part XIII.) 2d 1,409,948.		1 100 010
е	Add lines 2a through 2d	2e	1,409,948.
3	Subtract line 2e from line 1	3	1,263,883.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		0
с	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,263,883.
	foral for childe: Add miles o and for	Date	
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retu	irn.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
Ра 1	Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements	Retu	rn. 3,959,088.
	Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:		
1	Image: Network Structure Image: Network		
1 2	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities 2a Prior year adjustments 2b		
1 2 a	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities 2a Prior year adjustments 2b Other losses 2c	1	
1 2 a b	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: 2a Donated services and use of facilities 2b Prior year adjustments 2c Other losses 2d Other (Describe in Part XIII.) 2d		3,959,088.
1 2 a b	Image: Network State in the log of the state state in the state s	1 2e	3,959,088. 2,397,930.
1 2 a b c d	Image: Network State St		3,959,088.
1 2 b c d e	Image: Second structure Image: Second structure <th>1 2e</th> <th>3,959,088. 2,397,930.</th>	1 2e	3,959,088. 2,397,930.
1 2 a b c d e 3	It XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities 2a Prior year adjustments 2b Other losses 2c Other (Describe in Part XIII.) 2d Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: (4a)	1 2e	3,959,088. 2,397,930.
1 2 b c d 3 4	It XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities 2a Prior year adjustments 2b Other losses 2c Other (Describe in Part XIII.) 2d 2,397,930 Add lines 2a through 2d Subtract line 2e from line 1 4a Amounts included on Form 990, Part IX, line 25, but not on line 1: 4a	1 2e 3	3,959,088. 2,397,930. 1,561,158.
1 2 b c d e 3 4 a	Image: Second state in the second state is the second state in the second state is the second s	1 2e 3	3,959,088. 2,397,930. 1,561,158. 0.
1 2 a b c d e 3 4 a b c 5	Image: Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	1 2e 3	3,959,088. 2,397,930. 1,561,158.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

WELLSTONE ACTION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER THE PROVISIONS
OF SECTION 501(A) OF THE INTERNAL REVENUE CODE AS AN ENTITY DESCRIBED IN
SECTION 501(C)(4) AND IS EXEMPT FROM STATE INCOME TAXES AND SIMILAR INCOME
TAX LAWS. THEREFORE, NO PROVISION FOR INCOME TAXES HAS BEEN MADE.
THE ORGANIZATION ADOPTED GUIDANCE IN THE INCOME TAX STANDARD REGARDING THE
RECOGNITION OF UNCERTAIN TAX POSITIONS. THIS GUIDANCE PRESCRIBES
RECOGNITION THRESHOLD PRINCIPLES FOR THE FINANCIAL STATEMENT RECOGNITION
OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN ON A TAX RETURN THAT ARE
NOT CERTAIN TO BE REALIZED. THE ORGANIZATION'S TAX RETURNS ARE SUBJECT TO
REVIEW AND EXAMINATION BY FEDERAL AUTHORITIES.
Schedule D (Form 990) 2018

chedule D (Form 990) 2018 RE : POWER	33-1041433 Page 5
art XIII Supplemental Information (continued)	1.07
	· · · · · · · · · · · · · · · · · · ·
ART XI, LINE 2D - OTHER ADJUSTMENTS:	
EVENUE REPORTED BY RELATED ORGANIZATIONS	1,409,948.
ART XII, LINE 2D - OTHER ADJUSTMENTS:	
XPENSES REPORTED BY RELATED ORGANIZATIONS	2,397,930.
APENSES REPORTED BY RELATED ORGANIZATIONS	
	·
	10-10-10-10-10-10-10-10-10-10-10-10-10-1
·	
	Schedule D (Form 990) 201
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SCHEDULE J	Compensation li	nformation	OMB N	lo. 1545-00	J47
(Form 990)	For certain Officers, Directors, Trustees		2	018	2
(10111000)	Compensated Em	plovees	 _		J
	Complete if the organization answered "Ye Attach to Form	990.		to Pub	
Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form990 for instruct			pection	
Name of the organization	n		Employer identific		Imber
	RE: POWER	CHARGE CHARGE	33-10414	133	
Part I Question	s Regarding Compensation		- 100 - CH -		
				Yes	No
1a Check the approp	iate box(es) if the organization provided any of the followi	ng to or for a person listed on Form	990,		
	line 1a. Complete Part III to provide any relevant informa	ng allowance or residence for perso			
First-class or		ents for business use of personal re			
Travel for cor		or social club dues or initiation fee			
		nal services (such as maid, chauffel		·····	
Discretionary	spending account	tal sel vices (such as maid, onderior		1	
	on line 1a are checked, did the organization follow a writ	ten policy regarding payment or			
b If any of the boxes	provision of all of the expenses described above? If "No,"	complete Part III to explain	1	ь	
reimbursement or	provision of all of the expenses described above in two, on require substantiation prior to reimbursing or allowing e	expenses incurred by all directors			
2 Did the organizati	ers, including the CEO/Executive Director, regarding the in	tems checked on line 1a?		2	
trustees, and one	ars, including the OLO/Executive Director, regarding the				
9 Indicate which if	any, of the following the filing organization used to establis	sh the compensation of the organiz	ation's		
3 Indicate which, if	rector. Check all that apply. Do not check any boxes for m	nethods used by a related organizat	ion to		
	sation of the CEO/Executive Director, but explain in Part I				
	on committee	en employment contract		····	
		pensation survey or study			
`		oval by the board or compensation of	committee		·· ·····
		· ·			
4 During the year, o	id any person listed on Form 990, Part VII, Section A, line	1a, with respect to the filing			
	elated organization:				
				la	X
b Participate in, or	eceive payment from, a supplemental nonqualified retiren			lb	X
c Participate in, or	eceive payment from, an equity-based compensation arra	ingement?		lc	X
If "Yes" to any of	lines 4a-c, list the persons and provide the applicable amo	ounts for each item in Part III.			••••••
Only section 50*	(c)(3), 501(c)(4), and 501(c)(29) organizations must con	ıplete lines 5-9.			
5 For persons listed	on Form 990, Part VII, Section A, line 1a, did the organization	ation pay or accrue any compensat	ion		
contingent on the	revenues of:				v
a The organization				5a	X
b Any related organ	ization?			5b	
If "Yes" on line 5a	or 5b, describe in Part III.				
6 For persons lister	l on Form 990, Part VII, Section A, line 1a, did the organiz	ation pay or accrue any compensat	ion		
contingent on the				- -	x
				6a	X
	ization?		······	6b	
If "Yes" on line 6	a or 6b, describe in Part III.	and the same the states			
	on Form 990, Part VII, Section A, line 1a, did the organiz			7	X
not described on	lines 5 and 6? If "Yes," describe in Part III				
8 Were any amoun	ts reported on Form 990, Part VII, paid or accrued pursua	NT TO A CONTRACT THAT WAS SUDJECT TO	une .	···· : 8	x
initial contract ex	ception described in Regulations section 53.4958-4(a)(3)?	II res," describe in Part III		•	
	did the organization also follow the rebuttable presumpti		. ·	9	··· [`
Regulations sect	on 53.4958-6(c)?			<u> </u>	

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

Schedule J (Form 990) 2018

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(ii) Bouns (in concention (nonportation componsation) compensation componsation compensation (iii) Pouns (iii) Compensation) ponted for defend on prior Form 880 1,127 0 1,836 3,452 52,550 0 2,668 0 4,346 8,171 124,386 0 2,668 0 4,346 8,171 124,386 0 1 1 1 124,386 0 0 1 1 1 1 1 1 0 1 1 1 1 1 1 0 0 1 1 1 1 1 1 1 0 1 1 1 1 1 1 1 0 0 1 1 1 1 1 1 1 0 0 1 1 1 1 1 1 1 1 0 0 0 1 1 1 1 1
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Schedule J (Form 990) 2018 RE: POWER	33-1041433 P	Page 3
Part III Supplemental Information	this part for any additional information.	
	S	
		:
	Schedule J (Form 990) 2018	990) 2018

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SCHEDULE O (Form 990 or 990-EZ)

Internal Revenue Service

(FORM 990 OF 990-EZ) Department of the Treasury Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

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

OMB No. 1545-0047 **2018** Open to Public Inspection

Name of the organization

RE: POWER

Employer identification number 33-1041433

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SHEILA WELLSTONE.

FORM 990, PART VI, SECTION A, LINE 1:

THE ORGANIZATION'S EXECUTIVE COMMITTEE CONSISTS OF THE EXECUTIVE DIRECTOR,

BOARD CHAIR, SECRETARY, AND TREASURER. THE EXECUTIVE COMMITTEE HAS THE

AUTHORITY TO ACT ON BEHALF OF THE BOARD BETWEEN MEETINGS.

FORM 990, PART VI, SECTION A, LINE 2:

DAVID WELLSTONE AND MARK WELLSTONE - FAMILY RELATIONSHIP.

FORM 990, PART VI, SECTION A, LINE 4:

THE ORGANIZATION CHANGED ITS NAME TO RE: POWER ON DECEMBER 31, 2018.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS PRESENTED TO THE EXECUTIVE COMMITTEE FOR REVIEW AND DISCUSSION. THE EXECUTIVE COMMITTEE MAKES A RECOMMENDATION TO THE FULL BOARD OF DIRECTORS TO APPROVE OR NOT APPROVE THE FORM 990. THE FORM 990 IS PROVIDED TO ALL BOARD MEMBERS FOR REVIEW. AFTER REVIEW AND DISCUSSION, THE FULL BOARD VOTES TO APPROVE OR NOT APPROVE THE FORM 990.

FORM 990, PART VI, SECTION B, LINE 12C: BOARD MEMBERS ARE ASKED TO DISCLOSE ANY CONFLICTS OF INTEREST ANNUALLY. IN THE EVENT A CONFLICT EXISTS, THE CONFLICTED MEMBER LEAVES THE ROOM WHILE THE ISSUE IS DISCUSSED WITH THE FULL BOARD. IF A CONFLICT OF INTEREST IS DETERMINED TO EXIST, THE CONFLICTED BOARD MEMBER IS ALLOWED TO MAKE A CASE, LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 852211 10-10-18 27

Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization	Employer identification number
RE: POWER	33-1041433

AND THE BOARD THEN DISCUSSES WHETHER THERE IS AN ALTERNATIVE TO THE CONFLICT; IF THE BOARD MEMBER WILL NEED TO END THE CONFLICT OR TAKE THE APPROPRIATE ACTION NEEDED TO END THE CONFLICT. ALL PROCEEDINGS RELATED TO CONFLICTS OF INTEREST ARE NOTED IN THE MEETING MINUTES.

FORM 990, PART VI, SECTION B, LINE 15A:

THE EXECUTIVE COMMITTEE OF THE BOARD USES THE MINNESOTA COUNCIL OF NONPROFITS SALARY GUIDE AND SIMILAR NATIONAL DATA, AND TAKES INTO ACCOUNT RELEVANT EXPERIENCE TO DETERMINE COMPENSATION FOR THE EXECUTIVE DIRECTORS. THIS PROCESS LAST TOOK PLACE IN 2018.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL, AK, AZ, AR, CA, CO, CT, FL, GA, KS, KY, ME, MD, MN, MS, NC, ND, NH, NJ, NY, OH, OK, OR, PA, RI SC, TN, UT, VA, WA, WV, WI, MO, HI

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC UPON REQUEST. THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC VIA ANNUAL REPORT AND UPON REQUEST.

832212 10-10-18

Schedule 0 (Form 990 or 990-EZ) (2018)

SCHEDULE R (Form 990)	 Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990. ▲ Go to www.irs. gov/Form990 for instructions and the latest information. 	rganizations and Unrelated Partnerships ization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, Attach to Form 990. irs. cov/Form990 for instructions and the latest information.	tnerships _{ne} 33, 34, 35b, 36 t information.	, or 37.	6 0	OMB No. 1545-0047
Name of the organization RE: POWER					Employer identification number 33-1041433	cation number [33
Part I. Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.	ete if the organization answered "Yes"	on Form 990, Part IV, line 33	·			
(a) Name, address, and ElN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets		(f) Direct controlling entity
					-	
Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.	I izations. Complete if the organization	answered "Yes" on Form 990	, Part IV, line 34, b	ecause it had one	or more related tax-ex	empt
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 512(b)(13) controlled entity? Yes No
WELLSTONE ACTION FUND - 35-2191193 2639 NICOLLET AVE #220 MINNEAPOLIS MN 55408	FRAINING	MINNESOTA	501(C)(3)	LINE 7	R.E. ; POWER	×
For Paperwork Reduction Act Notice, see the Instructions for Form 990	ions for Form 990.				Schedule R	Schedule R (Form 990) 2018

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Schedule R (Form 990) 2018 RE: POWER	WER								- 7.5 	<u> 33-1041433</u>		Page 2
Part III Identification of Related Organizations Taxable as a Partner organizations treated as a partnership during the tax year.	anizations Taxable mership during the t	as a Partn ax year.	ership. Complete if the organization answered "Yes"	the organiza	ttion answered	d "Yes" on For	m 990, Part IV,	line 34, beca	on Form 990, Part IV, line 34, because it had one or more related	or more rela		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes No	(i) atte Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Bl General or Dox managing dule partner? 065) Yes No	Perc	(k) sentage nership
		*										
Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.	anizations Taxable	e as a Corpo	oration or Trust. C year.	omplete if th	e organizatior	n answered "Ye	ss" on Form 99	0, Part IV, line	e 34, because it	had one or	more re	elated
(a) Name, address, and EIN of related organization	z -	Prin	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(c corp.)	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Sec Sec 512(1) contr contr contr ent	(i) Section 512(b)(13) controlled entity? Yes No
PROGRESSIVE CAMPAIGN LEADERSHIP 2639 NICOLLET AVE #220 MINNEAPOLIS MN 55408	P - 46-4994700	TRAINING		W	WELLSTONE ACTION	C CORP		0.	360	100.00%	X	
832162 10-02-18				30					Sci	Schedule R (Form 990) 2018	orm 990	0) 2018

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Schedule B (Form 990) 2018 RE: POWER			33.	33-1041433		Pade 3
h Related Organizations. Complete if the	wered "Yes" on Form	organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.	, or 36.			
Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	Ŷ
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more re	lated organizations listed	in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				13		×
b Gift, grant, or capital contribution to related organization(s)				1		×
c Gift, grant, or capital contribution from related organization(s)				10		Х
d Loans or loan guarantees to or for related organization(s)				1d		Х
Loans or loan guarantees by related organization(s)				1e		X
	4 • • • • • • • • • • • • • • • • • • •			··· ·		
f Dividends from related organization(s)				#		×
g Sale of assets to related organization(s)				-1 1 1		×
Purchase of assets from related organize				₽		×
				ţi		×
j Lease of facilities, equipment, or other assets to related organization(s)		4 5 5 6 7 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8		-	_	×
k Lease of facilities, equipment, or other assets from related organization(s)				¥		×
	inization(s)			+		X
m Performance of services or membership or fundraising solicitations by related organization(s)	nization(s)			1 #		×
	ian(s)	二子:如仁 子子 二子子 子子 女子子子子 二人名 子名 女子 女子男女子 女子名 女子 医子子		<u>۽</u>	×	
				9	×	
 Beimhurseament paid to related ormanization(s) for expenses 					×	
A non-particular part to related organization(s) for expenses		电子电影 医子管子 骨的 医外外的 医外外的 医外外的 医外外的 医外外的 医外外的 化化合物 医血液 医胆管		<u>P</u>	×	
			医外外 化化化化化化 化化化化化化化化化化化化化化化化化化化化化化化化化化化化			
r Other transfer of cash or nronerty to related ornanization(s)				+		X
				4		×
If the answer to any of the above is "Yes," see the instructions for	vho must complete tl	his line, including covered	information on who must complete this line, including covered relationships and transaction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	ount involved		
(1) WELLSTONE ACTION FUND	д	1,942,688.	CASH TRANSFERRED			
(2)						
(3)						
(4)						
(5)						
(9)						
832163 10-02-18	31		Sci	Schedule R (Form 990) 2018	066 m) 2018

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3 Page 4	revenue)	or Percentage or ownership		Schedule R (Form 990) 2018
143	gross	() Darther Ces N	 	(For
33-1041433	by total assets or	(h) (i) (j) (j) (k) Disproper- dionations? Code V-UBI amount in box 20 or Schedule K-1 zertner? Ceneral or Persons Percentage Yes No (Form 1065) Yes No		Schedule P
	ured b	(h) fionate ss No		
1	o of its activities (meas	(g) Share of end-of-year assets v		
	e than five perce	(f) Share of total income		
	on rorm cted more	(e) Are all 501(to)(3) 501(to)(3) 501(to)(3) Ves No		
	te it the organization at swered tres on Form 990, Part IV, line 37. Irough which the organization conducted more than five percent of for certain investment partnerships.	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)		
	hip through which the second music	(c) Legal domicile (state or foreign country)		
VER Via se a Battrarchia Co	ntity taxed as a partnersi ntity taxed as a partnersi tructions regarding exclu	(b) Primary activity		
Schedule R (Form 990) 2018 RE: POWER	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.	(a) Name, address, and EIN of entity		

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Schedule R (Form 990) 2018 RE: POWER Part VII Supplemental Information.	33-1041433
Provide additional information for responses to questions on Schedule R. Se	and because of
	ee instructions.
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