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990-EZ

### **Short 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)

2016

OMB No. 1545-1150

Open to Public-Inspection

Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Information about Form 990-EZ and its instructions is at www.lrs.gov/form990. Internal Revenue Service For the 2016 calendar year, or tax year beginning and ending Check if applicable C Name of organization D Employer Identification number Address change Action For A Progressive Future 27-2301175 Number and street (or P O. box, if mail is not delivered to street address) Room/suite Name change E Telephone number Initial return 1500 W. El Camino Ave. 370 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code F Group Exemption Amended return Number Application pending Sacramento, CA 95833 G Accounting Method: X Cash Accrual Other (specify) H Check 🖢 🔲 if the organization is not I Website: ▶ rootsaction.org required to attach Schedule B J Tax-exempt status (check only one) - 501(c)(3) 501(c) (4 (insert no ) 4947(a)(1) or 527 (Form 990, 990-EZ, or 990-PF). K Form of organization: X Corporation ☐ Trust Other Association L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ 163.675. Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Part-L Check if the organization used Schedule O to respond to any question in this Part I Contributions, gifts, grants, and similar amounts received 163,674. 2 Program service revenue including government fees and contracts 2 3 Membership dues and assessments . . . . . . 3 5 a Gross amount from sale of assets other than inventory . . . . 5a c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a). . . . Gaming and fundraising events a Gross income from gaming (attach Schedule G if greater than b Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract 6d 7 a Gross sales of inventory, less returns and allowances 7a Less cost of goods sold . Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 8 Other revenue (describe in Schedule O). 8 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8. 9 163,675. 10 Grants and similar amounts paid (list in Schedule O). . . . 10 11 Benefits paid to or for members . 11 12 Salaries, other compensation, and employee benefits 12 13 Professional fees and other payments to independent contractors 35,713. 13 14 Occupancy, rent, utilities, and maintenance . . . . 14 15 Printing, publications, postage, and shipping . . 26. 15 16 Other expenses (describe in Schedule O) . . . . 97,997. 16 17 Total expenses. Add lines 10 through 16. . . 133,736. 17 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 29,939. Net Assets

For Paperwork Reduction Act Notice, see the separate instructions.

end-of-year figure reported on prior year's return).

Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with

Other changes in net assets or fund balances (explain in Schedule O) . . .

Net assets or fund balances at end of year. Combine lines 18 through 20 .

Ferm 990-EZ (2016)

36,055.

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65,994.

Form	9904EZ (2016) Action For A Progress	ive Future		27-	230	1175	Page 2
	It I Balance Sheets (see the instructions f	or Part II)					
	Check if the organization used Schedu	le O to respond to	any question in t	his Part II		<u> </u>	<u> 🖵</u>
		-		(A) Beginning of year		(B) End of y	ear
22	Cash, savings, and investments		[	36,055.	22	65,	994.
23	Land and buildings		[	0.	23		0.
24	Other assets (describe in Schedule O)			0.	24		0.
25	Total assets			36,055.	25	65,	994.
26	Total liabilities (describe in Schedule O)			0.	26		0.
27	Net assets or fund balances (line 27 of column (B) mi	ıst agree with line 21)	<i></i>	36,055.	27	65,	994.
Pa	Till Statement of Program Service According						
	Check if the organization used Schedu	•		, ,		Expenses	;
What	is the organization's primary exempt purpose? Further :				•	quired for se	
	ribe the organization's program service accomplisi				501(	c)(3) and 50 nizations, of	1(c)(4) otional for
	easured by expenses. In a clear and concise man				other	-	
	ons benefited, and other relevant information for ea		,				
28	1) Public information and c		em program	···		1	
20	Approximately \$60,000 for providing					ľ	
	thousand people every week and					1	
		Studes foreign grants, d			28a	60	000
20					204	60,	000.
29	Bernie Delegates Network devoted					]	
	Bernie Sanders delegates to the Do			on as well		1	
	as communications with news						
		ludes foreign grants, cl		<u>·· ·· ▶</u>	29a	17,	<u>000.</u>
30	research and civic engagement on :	issues having	to do with hi	man rights			
		<del></del>					
		ludes foreign grants, cl	neck here	▶ 🔲	30a	6,	000.
31	Other program services (describe in Schedule O)						
	(Grants \$ ) If this amount inc	cludes foreign grants, cl	neck here	▶ 🔲	31a		
					32	83	000.
	TIV List of Officers, Directors, Trustees, and	i Key Employees (I	ist each one even if not	compensated - see th			
		i Key Employees (I	ist each one even if not	compensated - see th			
	TIV List of Officers, Directors, Trustees, and	i Key Employees (I	ist each one even if not any question in t (c) Reportable	compensated - see that is Part IV	e inst	tructions fo	r Part IV)
	TIV List of Officers, Directors, Trustees, and	i Key Employees (I le O to respond to (b) Average hours per week	ist each one even if not any question in t	compensated - see the search of the compensated - see the search of the search of the compensated - see the search of the search	e inst	tructions fo	r Part IV)
	List of Officers, Directors, Trustees, and Check if the organization used Schedu	i Key Employees (I le O to respond to (b) Average	ist each one even if not any question in the (c) Reportable compensation	compensated - see the search of the compensated - see the search of the search of the compensated - see the search of the search	e inst	tructions fo	r Part IV)
	List of Officers, Directors, Trustees, and Check if the organization used Schedu  (a) Name and title	i Key Employees (I le O to respond to (b) Average hours per week	ist each one even if not any question in the (c) Reportable compensation (Forms W-2/1099-MISC)	compensated - see the compensated - see the control of the control	e inst	tructions fo	r Part IV)
-Pai	List of Officers, Directors, Trustees, and Check if the organization used Schedu  (a) Name and title  Gallegos	i Key Employees (I le O to respond to (b) Average hours per week	ist each one even if not any question in the (c) Reportable compensation (Forms W-2/1099-MISC)	compensated - see the compensated - see the control of the control	e inst	tructions fo	r Part IV)
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Pia CEC Deb	List of Officers, Directors, Trustees, and Check if the organization used Schedu  (a) Name and title  Gallegos  Oorah Thomas	i Key Employees (I le O to respond to (b) Average hours per week	ist each one even if not any question in the (c) Reportable compensation (Forms W-2/1099-MISC)	compensated - see the compensated - see the control of the control	e inst	tructions fo	r Part IV)
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Pia CEC Deb Sec Jef	List of Officers, Directors, Trustees, and Check if the organization used Schedu  (a) Name and title  Gallegos  Oorah Thomas  Cretary  Ef Cohen	i Key Employees (I le O to respond to (b) Average hours per week	ist each one even if not any question in the (c) Reportable compensation (Forms W-2/1099-MISC)	compensated - see the compensated - see the control of the control	e inst	tructions fo	r Part IV)
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Pia CEC Deb Sec Jef CFC	List of Officers, Directors, Trustees, and Check if the organization used Schedu  (a) Name and title  Gallegos  oorah Thomas  cretary  ff Cohen  cman Solomon	i Key Employees (I le O to respond to (b) Average hours per week devoted to position	ist each one even if not any question in the compensation (Forms W-2/1099-MISC) (If not paid, enter -0-)	compensated - see the compensated - see the control of the control	e inst	tructions fo	r Part IV)

Form 990-EZ (2016)

Farm 990-E	Z (2016) Action For A Pro	gressive Futu	ıre		27-2	30117	<b>5</b> F	aga 4
		<u> </u>					Yes	No
	nd the organization engage, directly or indirec							
	candidates for public office? If "Yes," comp				<del></del>	46	X	<u> </u>
Part VI			- 47 405 1 50	-1 1 - 4 - Ab	- 4-bl 6	I		
	All section 501(c)(3) organization	s must answer questior	15 47-490 and 52, an	a complete u	ie rapiez ioi	imes		
	50 and 51.  Check if the organization used So	bodulo O to respond to	any guestion in this	Part V/I				
	Check if the organization used Sc	riedule O to respond to	any question in this	rait vi	· · · · · ·		Yes	No
<b>47</b> Di	id the organization engage in lobbying activit	lác ár have a section 501/h	election in effect during	the tay			163	NO
	ear? If "Yes," complete Schedule C, Part II	ies of flave a section out (ii)				. 47	1	ł
	the organization a school as described in s					. 48		Х
	id the organization make any transfers to an					49a		<u> </u>
	"Yes," was the related organization a section					49b		
	omplete this table for the organization's five					<b></b>	<b>.</b>	
	nployees) who each received more than \$10							
	<u> </u>	(b) Average	(c) Reportable	(d) Health to	enefits,	e) Estimate	d amoi	unt of
	(a) Name and title of each employee	hours per week devoted to position	compensation (Forms W-2/1099-MISC)	benefit plans, a	nd deferred	other com		
				compens	sation			
		$\dashv$						
<del></del>			<u> </u>	+				<del></del>
		_						
			-					
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	<del></del>							
		7			ļ			
f To	otal number of other employees paid over \$1	99,000	▶ 0	-				
	omplete this table for the organization's five			each received m	ore than			
\$1	100,000 of compensation from the organiza	tion. If there is none, enter "	None."					
-	to Many and hymness address of mash under	andant contractor	(h) Tump of cor	3400	(a) C	omnonest		
	(a) Name and business address of each indep	endent contractor	(b) Type of ser	VICE	(6)	ompensatio	JII	
			_	1				
					<del></del>			
			_					
			<u> </u>					
			-					
			-}	<b> </b>				
			1				-	
			4	1				
				<u> </u>	-			
	otal number of other independent contractor			• <u>0</u>				
~-	id the organization complete Schedule A?	, , , ,	•		<b>1</b>	Yes	X	No
	ompleted Schedule A	<del></del>						
	it, and complete Declaration of preparer (other t					-Ar sur th	ner II	
		norma Intoma		1	11/14/2	015		
Sign	Signature of officer Date							
Here	Norman Solomon Director							
	Type or print name and title							
D=1-4	Print/Type preparer's name	Preparar's signature	E	ate	Check if	PTIN		
Paid					self-employed	í		
Prepare	I Complement to	<del></del>	<del></del>	Firm	's EIN ▶	1.		
Use On	Firm's address >	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		ne no.			•
May the IR	RS discuss this return with the preparer sho	wn above? See instructions		<u></u>	<u>.</u>	► Yes	П	No
								(2016

#### SCHEDULE, C (Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

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

OMB No. 1545-0047

Open to Public Inspection

Employer Identification number

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations. Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below, Do not complete Part I-B.
- Section 527 organizations. Complete I-A only.

Section 501(c)(4), (5), or (6) organizations. Complete Part III.

If the organization answered "Yes," on Form 999, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

AC.	<u>tion For A Progr</u>	ressive Future		27~2301	175
Pa	rt I-A Complete if th	e organization is exempt und	der section 501(c	) or is a section 527	organization.
1	Provide a description of the org definition of "political campaign	ganization's direct and indirect political ca activities")	ampaign activities in Pa	art IV. (see instructions for	
2	Political campaign activity expe	enditures (see instructions)		<b>&gt;</b> 9	17,501.
3		mpaign activities (see instructions)			
Pa	rt I-B Complete if th	e organization is exempt und	er section 501(c	:)(3).	
1		tax incurred by the organization under s			0.
2	· · · · · · · · · · · · · · · · · · ·	tax incurred by organization managers		<b>&gt;</b> 9	
3		ection 4955 tax, did it file Form 4720 for			
			=		
	if "Yes." describe in Part IV.				
		e organization is exempt und	ler section 501(c	), except section 50	1(c)(3)
$\overline{1}$		nded by the filing organization for section			17,501.
2	•	rganization's funds contributed to other	•		17,301.
_	_		-	•	2,000.
3		ures. Add lines 1 and 2. Enter here and			19,501.
4		orm 1120-POL for this year?			
5		nd employer identification number (EIN)			
Ţ		on listed, enter the amount paid from the			
		d directly delivered to a separate political	•	a separate segregated tund (	or a political action
	committee (PAC). Il auduloriai :	space is needed, provide information in I	~agτ1V.		
		T			1,,,
	(a) Name	(h) Address	(-) [1]	(4) A	(e) Amount of political contributions received and
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	promptly and directly
		t	1	filing organization's	delivered to a separate
		1	1	funds. If none, enter -0	political organization. If none,
			ļ	<del></del>	enter -0
(1)		2540 Macdonald Avenue	1		)
Rich	mond Progressive Allia	Richmond, CA 94804	37-1777173	2,000.	2,000.
(2)			] ]		
					<u> </u>
(3)			]		
		<u> </u>			] _
(4)					
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(5)					
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(6)			<del>   </del>		
·-/			1 1		
For P	aperwork Reduction Act Notice, s	see the Instructions for Form 990 or 990-E	z.	Schedu	lle C (Form 990 or 990-EZ) 2016

	dule C (Form 980 or 990-EZ) 2016 Action For til-A Complete if the organization	or A Pro n is exempt	gressive Fi under section 5	iture 01(c)(3) and file	27-2 ed Form 5768 (el	301175 Page 2 ection under
A (	section 501(h)).  Check > if the filing organization belongs to	_	up (and list in Part IV e	ach affiliated group r	nember's name, addres	ss, EIN, expenses,
	and share of excess lobbying expe	<u>=</u>				
<b>B</b> 9	Check 🕨 🔲 if the filing organization checked be			ply,	<del>,</del>	
	Limits on Lobb				(a) Filing	(b) Affiliated
	(The term "expenditures" m	eans amounts	paid or incurred.)		organization's totals	group totals
18	Total lobbying expenditures to influence public	opinion (grass ro	oots lobbying) .			· · · · · · · · · · · · · · · · · · ·
ì	<ul> <li>Total lobbying expenditures to influence a legisl</li> </ul>	ative body (direc	t lobbying)			
c	: Total lobbying expenditures (add lines 1a and 1	b)				
•	Other exempt purpose expenditures					
E	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount. Enter the amount	from the following	ng table in both column	ıs.		
	If the amount on line 1e, column (a) or (b) is		g nontaxable amount	is:		
	Not over \$500,000	+	nount on line 1e.			
	Over \$500,000 but not over \$1,000,000	<del></del>	s 15% of the excess or			
	Over \$1,000,000 but not over \$1,500,000		s 10% of the excess or			
	Over \$1,500,000 but not over \$17,000,000		s 5% of the excess ove	r \$1,500,000.		
	Over \$17,000,000	\$1,000,000.			Control of the second	
ç	•	-				<del> </del>
ł	3				ļ	
į	Subtract line 1f from line 1c. If zero or less, ent					<del></del>
j	If there is an amount other than zero on either li		<del>-</del>			
	reporting section 4911 tax for this year?				<u> </u>	Yes X No
	(Şome organizațions that made a	şeçtion 501(h) (	g Period Under section do not have structions for lines 28	to complete all of t	ie five columns belo	<b>v.</b>
	Lobby	ing Expenditur	es During 4-Year Ave	eraging Period	7	
	Calendar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) Total
	2a Lobbying nontaxable amount					
	b Lobbying ceiling amount	11 - 12 30 30 16 16 16 16	Francis Continues			
	(150% of line 2a, column (e))			- (- (- (- (- (- (- (- (- (- (- (- (- (-		
	c Total labbying expenditures					· · · · · · · · · · · · · · · · · · ·
	d Grassroots nontaxable amount					
	e Grassroots ceiling amount (150% of line 2d, column (e))				to the many public states of the states of t	
	f Grassroots lobbying expenditures					
UYA					Sahadula C (Earn	n 990 or 990-F7) 2016

Schedule C (Form 990 or 990-EZ) 2016 Action For A Progressive Future

27-2301175 Page 3

Schedule C (Fol	m set of section for A Progressive Future	27-23011/5 Page 4
Part IV	Supplemental Information (continued)	
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#### SCHEDULE O (Form 990 or 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.

Internal Revenue Service

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

2016
Open to Public-Inspection

Harrie Of the Giganization	Chiployer identification number			
Action For A Progressive Future	27-2301175			
Part I line 16				
Richmond Progressive Alliance \$2,000 to furthere their	work educating the			
Part I line 16				
public on local social issues and promoting local progressive				
Part I line 16				
candidates for local office that support their beliefs				
Part I line 16	•			
Issues include rent control, immigration reform, annex	ation			
Part I line 16	acton,			
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