DLN: 93493195025150 OMB No 1545-0047 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 Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 09-01-2018 , and ending 08-31-2019 D Employer identification number B Check if applicable ESSENTIAL PARTNERS INC ☐ Address change 22-3432160 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminate E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 186 ALEWIFE BROOK PARKWAY NO 212 ☐ Amended return ☐ Application pending (617) 923-1216 City or town, state or province, country, and ZIP or foreign postal code CAMBRIDGE, MA $\,$ 02138 $\,$ G Gross receipts \$ 1,459,933 Name and address of principal officer H(a) Is this a group return for ROBERT O'HARA □Yes ☑No subordinates? 186 ALEWIFE BROOK PARKWAY NO 212 H(b) Are all subordinates CAMBRIDGE, MA 02138 ☐ Yes ☐No included? Tax-exempt status 4947(a)(1) or □ 527 If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WHATISESSENTIAL ORG L Year of formation 1995 M State of legal domicile K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities EQUIP PEOPLE TO LIVE AND WORK BETTER TOGETHER IN COMMUNITY BY BUILDING TRUST AND UNDERSTANDING ACROSS Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 5 Number of independent voting members of the governing body (Part VI, line 1b) 4 23 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 2 Total number of volunteers (estimate if necessary) . . . 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 b Net unrelated business taxable income from Form 990-T, line 34 7b **Prior Year Current Year** 962.531 8 Contributions and grants (Part VIII, line 1h) . . 932,126 9 Program service revenue (Part VIII, line 2g) . 366,874 494,591 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 614 756 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 2.568 1,300,370 1,459,933 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 839,150 861,410 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . 1,440 b Total fundraising expenses (Part IX, column (D), line 25) ▶138,505 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 514,548 436,482 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 1,355,138 1,297,892 -54,768 19 Revenue less expenses Subtract line 18 from line 12 . 162,041 Net Assets or Fund Balances **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) . 465,564 597,717 66,860 21 Total liabilities (Part X, line 26) . 96,748 530,857 22 Net assets or fund balances Subtract line 21 from line 20 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2020-07-13 Signature of officer Sign Here ROBERT O'HARA TREASURER Type or print name and title Print/Type preparer's name Preparer's signature Date Check | If 2020-07-13 P01340068 Paid self-employed Firm's EIN ▶ 04-3097400 **Preparer** Use Only Firm's address ▶ 10 FORBES WEST Phone no (781) 380-3520 BRAINTREE, MA 02184 ☑ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) .

Form 990 (2018)

Cat No 11282Y

For Paperwork Reduction Act Notice, see the separate instructions.

Form	990 (2018)					Page 2
Pa	rt III Statement	of Program Service	Accomplis	hments		
	Check if Sche	dule O contains a respo	nse or note to a	any line in this Part III .		🗹
1	Briefly describe the o	organization's mission				
EQUI	P PEOPLE TO LIVE AN	D WORK BETTER TOGET	HER IN COMMU	JNITY BY BUILDING TRUST	AND UNDERSTANDING ACROSS	DIFFERENCES
	Check if Schedule O contains a response or note to any line in this Part III					
	Did the consumption					
2	-	• •		- ·		☐ Yes ☑ No
						□ Yes 🖭 NO
3	,			hanges in how it conducts	any program	
3	-	- ·	-	-	, any program	☐ Yes ☑ No
						Lifes Line
4	Describe the organiz Section 501(c)(3) an	ation's program service nd 501(c)(4) organization	accomplishmer ns are required	to report the amount of gr		
4a	(Code) (Expenses \$	889,850	including grants of \$) (Revenue \$	497,159)
	·				,	, ,
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4d	Other program servi	ces (Describe in Schedu	e O)			
	(Expenses \$	ınclu	ding grants of	\$) (Revenue \$)
4e	Total program serv	vice expenses >	889,8	50		

Form	990 (2018)			Page 3
Par	Checklist of Required Schedules			
	To the exercise described in section E01(a)(2) or 4047(a)(1) (other than a private foundation)? If "Vec " complete		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🥞	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 3	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX "	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII **	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
			1	I .

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

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

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

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

18

19

20a

20b

21

22

No

Nο

No

Νo

Nο

Form **990** (2018)

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

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

19

21

23 de the organization answer "Yos" to Parl VII, Section A, Jine 3, 4, or 5 about compensation of the organization's current and former officers, director, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. 24 but the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the least day of the year, that was issued after December 31, 2002? If "Yes," answer lines 240 through 24d and complete Schedule K. I "Yos," go to hise 25s. 25 but the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24 but the organization maintain an escrow account other than a refunding escrow at any time during the year? 24 during the theorem and the secretary to defease any tax-exempt bonds? 25 section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. 26 but the organization and act as an "on behalf off issuer for bonds outstanding at any time during the year? If "Yes," complete Schedule I, Parl I. 25 but the organization and act as an "on behalf off issuer for bonds outstanding at any time during the year? If "Yes," complete Schedule I, Parl I. 26 but the organization any amount on Parl X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, bighest compensated employees, or disqualified persons? If "Yes," complete Schedule I, Parl II. 27 but the organization provide a grant or sheet assistance to an officer, director, trustee, key employees, substantial contribution or employee thereof, a grant schedule II, Parl II. 28 but the organization provide a grant or of shedule II, Parl II. 29 but the organization receive more than \$250,000 in non-cash contributions? If "Yes," complete Schedule II, Parl IV instructions for applicable filing thresholds, conditions, and exceptions? If "Yes," complete Schedule II, Parl IV. 28 but the organization related to mighted contributions of arth physical contributions of arth physical contributio	orm	990 (2018)			Page (
23 but the organization answer "Yes" to Parl VII, Section A, Jine 3. 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. Advantage of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule J. "Yes," or to her 25c. b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an eight of the second of the last day of the year that was suited after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule J. "Yes," organizations. Did the organization maintain an eight of the second of the organization and act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization and act as an "on behalf of" issuer for bonds outstanding at any time during the year? If "Yes," complete Schedule L. Parl". I is the organization and act as an "on behalf of" issuer for bonds outstanding at any time during the year? If "Yes," complete Schedule L. Parl". I is the organization and the transaction with a disqualified person in a prior year, and If "Yes," complete Schedule L. Parl". If "Yes," complete Schedule L. Parl". 25b If "Yes," complete Schedule L. Parl". 27c John the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contribution or propriete Schedule L. Parl II". 27d John the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contribution or propriete Schedule L. Parl II". 28d Was the organization provide a grant or other assistance to an officer, director, trustee, or key employee? If "Yes," complete Schedule L. Parl IV instructions for applicable fling thresholds, conditions, and exceptions? If "Yes," c	Par	Checklist of Required Schedules (continued)			
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. 1949. 23 24 24 24 24 24 24 24				Yes	No
the last day of the year, that was assued after December 11, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. I" No.," pot o line 25e. Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 24d 24d 25s Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations prior Forms 990 or 990-E2? 16 Did the organization ereport any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, directors, trustees, key employees, highest compensated employees, or disqualified persons? 17 "es," complete Schedule L, Part! Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employees thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "es," complete Schedule L, Part IV 18 Was the organization provide a grant or other assistance to an officer, director, trustee, expensive provides persons and the pr	23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			No
Did the organization maintain an escrew account other than a refunding escrew at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "or behalf of" issuer for bonds outstanding at any time during the year? 24d 24d d Did the organization act as an "or behalf of" issuer for bonds outstanding at any time during the year? 24d d Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction have been reported on any of the organization sprior Forms 990 or 990-E2? 15 Is the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, ingliest compensated employees, or disqualified persons? 16 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Pes," complete Schedule L, Part IV 18 Was the organization apparty to a business transaction with one of the following parties (see Schedule L, Part IV 19 Did the organization apparty to a business transaction with one of the following parties (see Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b 10 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule I, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule II 30 Did the organization via the organization of the organization via the organization receive any parties schedule R, Part IV, III 31 Did the organization orelated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Inne 1 32 Did the organization orelated to any tax-exempt or taxable	24a	the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and	24a		No
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24d 24d 24d 25s 25c 25d 25d 25d 25d 25d 25d 25d	b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24h		
Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I . Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction was not been reported on any of the organization's prior Forms '990 or 990-E2? If "Yes," complete Schedule I, Part I . Is Did the organization around a grant or other assistance to an officer, director, trustee, key employees, substantial contribution or employee therefor, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule I, Part III . Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . Bable 10 Did the organization receive more than 325,000 in non-cash contributions? If "Yes," complete Schedule M . Did the organization receive more than 325,000 in non-cash contributions? If "Yes," complete Schedule N, Part I . Did the organization receive and the schedule M . Did the organization receive and the schedule M . Did the organization receive and the schedule M . Did the organization receive and the schedule M . Did the organization receive and the schedule M . Did the organization receive and the schedule M . Did the organization receive and the schedule M . Did the	С				
Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I . 15 Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 er 990-E2? If "Yes," complete Schedule L, Part II . 16 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, hipsets compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II . 17 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or formers officers, director, trustees, every employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II . 18 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable fling thresholds, conditions, and exceptions) 18 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . 28b Jane A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule M . 29c Ves Joil the organization receive more than 25,000 in non-cash contributions? If "Yes," complete Schedule M . 29d Ves Joil the organization receive more than 25,000 in non-cash contributions? If "Yes," complete Schedule M . 29d Ves Joil the organization of the properties of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M . 29d Ves	d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part II 10 bid the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part III 17 bid the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contribution or employee thereof, a grant selection committee member, or to a 15% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 18 Was the organization party to a business transaction with one of the following parties (see Schedule L, Part IV 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 family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. Part II Did the organization iliquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part III Did the organization of sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part III Did	25a	Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"	25a		No
former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II . 27 28 28 28 28 28 28 28 28 28	b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			No
contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV 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. b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee? If "Yes," complete Schedule N, Part I . 28b 29 Yes 10 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? 11 If "Yes," complete Schedule N, Part I . 31 If "Yes," complete Schedule R, Part I . 32 If "Yes," complete Schedul	:6	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?	26		No
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. 28a b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV. 28b 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 29 Yes 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. 30 Did the organization iliquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II. 31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part II. 31 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 32 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 33 Yes 34 Yes 35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related construction of the organization of the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Sched	27	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	27		No
Part IV 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A nentity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 The section 501(c)(3) organizations. Did the organization make any transaction with a controlled entity within the meaning of section 512(b)(13)? 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 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," comple	8				
Part IV. c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV. 9 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 1 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I. 2 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II. 3 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I. 4 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part III, or IV, and Part V, line 1 5 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 5 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 6 Section 501(c)(3) organizations. Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 7 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V, line 2 1 3 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O O 2 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V	а		28a		No
officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV. 9 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 10 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. 1 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I . 2 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? 1f "Yes," complete Schedule N, Part II . 2 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-2 and 301 7701-3 If "Yes," complete Schedule R, Part I . 3 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 5 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 5 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 5 Section 501(c)(3) organizations. Did the organization make any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 5 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V II as 1 2 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O 3 Check if Schedule O contains a response or note to any line in this Part V	b		28b		No
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	С	officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
contributions? If "Yes," complete Schedule M	9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🐒	29	Yes	
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	0		30		No
If "Yes," complete Schedule N, Part II	1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
33 3 4 Yes 14 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
Part V, line 1		301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	4		34	Yes	
within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	5а	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
organization? If "Yes," complete Schedule R, Part V, line 2	b		35b		No
Is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	6	organization? If "Yes," complete Schedule R, Part V, line 2	36		No
B Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	7		37		No
Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V	8	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note.	38	Yes	
	Par				
Yes		Check if Schedule O contains a response or note to any line in this Part V		<u> </u>	
1.44 1				Yes	No

13a

14a

14b

15

No

No

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13b

13c

Note. See the instructions for additional information the organization must report on Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

Enter the amount of reserves the organization is required to maintain by the states in

orm	990 (2018)			Page 6
Pai	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI	" respo	onse to i	ines
Se	ction A. Governing Body and Management			
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 5		Yes	No_
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 5			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		.,	
	The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	- \	No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue		Yes	No
L0a	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
l1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
L2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
L3	Did the organization have a written whistleblower policy?	13	Yes	
L4 L5	Did the organization have a written document retention and destruction policy?	14	Yes	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
L6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt			
	status with respect to such arrangements?	16b		
	ction C. Disclosure			
L7	List the States with which a copy of this Form 990 is required to be filed▶ MA			
L8	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	Own website 🗹 Another's website 🗹 Upon request 🗌 Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records THE ORGANIZATION 186 ALEWIFE BROOK PARKWAY CAMBRIDGE, MA 02138 (617) 923-1216			

Part VII

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

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

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

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 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount

- of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid • List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)
- who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations • List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

Check this box if fieldler the organization hol	r any relaced of	T	.1011 2	<u> </u>	70113	aceu u	11y C	Turrent officer, director, or trustee				
(A) Name and Title	(B) Average hours per week (list any hours for related	than o	one bo	ox, u an of tor/t	ot che unles fficer trust		son	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and			
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	MISC)	related organizations		
(1) KAY CALVERT	2 00		'	, '		'	'		ا	1		
CHAIR	1 00	+ +		Х		'		0	0	0		
(2) ROBERT O'HARA	2 00			Γ,								
TREASURER	1 00	X	'	Х				0	0	0		
(3) JULIEN PHAM CO-CHAIR	2 00	X		x				0	0	0		
(4) DAVID MARCH	2 00											
DIRECTOR	1 00	×		'		'		0	0	0		
(5) GARY SANDHU	2 00	×						0	0	0		
DIRECTOR	1 00			L'	\perp	<u> </u>	<u></u> '			<u></u>		
(6) PARISA PARSA	40 00							122 570				
EXECUTIVE DIR (THROUGH APRIL 2019)	0 00			X		<u> </u>		128,578	0	10,557		
(7) JOHN SARROUF CO-EXECUTIVE DIR (AS OF APRIL 2019)	40 00			x				114,805	0	32,476		
(8) KATHRYN HYTEN CO-EXECUTIVE DIR (AS OF APRIL 2019)	40 00			х				85,578	0	9,928		
		<u> </u>		<u> </u>	<u> </u>	<u> </u>	<u> </u>					
			<u> </u>	<u> </u>	igspace	<u> </u>	<u> </u>					
		igsqcup	<u> </u>	<u> </u>	_	<u> </u>	<u> </u>					
			<u> </u>	<u></u>	\vdash		<u> </u>					
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Part VII	Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)														
	(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)		ne b	ox, u in off tor/ti	t che inles ficer	s pers	on	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations				

ille,	ual trustee otor	tional Trustee	npioyee	t compensated ee		

1b Sub-Total			•		
					_

1b Sub-Total				•			
c Total from continuation sheets to Pa	art VII , Section	Α		▶			
d Total (add lines 1b and 1s)					328 961	0	52 961

1b Sub-Total				•				
c Total from continuation sheets to Pa	art VII , Section	Α		▶				
d Total (add lines 1b and 1c)				•	3	28,961	0	52,96

1b 9	Sub-Total						>				
c T	otal from continuation sheets to Pa	rt VII , Section	Α				>				
d٦	otal (add lines 1b and 1c)						▶		328,961	0	52,961
2	Total number of individuals (including			e list	ed a	bove) who	rece	eived more than	\$100,000	_

1b	Sub-Total						>				
С	Total from continuation sheets to Pa	art VII , Section	Α				▶				
d	Total (add lines 1b and 1c)						▶		328,961	0	52,961
2	Total number of individuals (including			e liste	ed a	bove	e) who	rece	eived more than	\$100,000	

1b 9	Sub-Total	▶			<u> </u>
сT	Total from continuation sheets to Part VII, Section A	▶			<u> </u>
d٦	Total (add lines 1b and 1c)	▶	328,961	0	52,961
2	Total number of individuals (including but not limited to those listed abo of reportable compensation from the organization ▶ 2	ve) wh	o received more than	\$100,000	

С	Total from continuation sheets to Part VII, Section A ▶									
d	Total (add lines 1b and 1c)	0		52,961						
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 2									
			Yes	No						
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on									

	Total from continuation sheets to Part VII, Section A	0		52,961
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization \triangleright 2			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the		1	

2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization \triangleright 2			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual			N-

	of reportable compensation from the organization ▶ 2			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	ındıvıdual	4		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for			

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such		
	Individual		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		No

4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	ındıvıdual	4	No	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	No	
S	ection B. Independent Contractors			
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of co	mpensatio	'n	

5	idual for	5	No				
Se	Section B. Independent Contractors						
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year						
(A) (B)							

Se	Section B. Independent Contractors							
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year							
	(A) Name and business address	(B) Description of services	(Compe	•				

Name and business address	Description of services	Compensation			
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 0					

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Part		Statement of	Revenue								rage 3
		Check if Schedul	e O contains a	respo	nse or note to	any line ir			<u> </u>		🗆
						Tota	(A) al revenue	(B) Related exemp function	ot in	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
	1a	Federated campaig	ns	1a				revenu	ie		312 - 314
Gifts, Grants illar Amounts	ŀ	• Membership dues		1 b							
Gra not		: Fundraising events		1c							
_, <u>\$</u>		d Related organizatio	ns	1d							
<u>a</u> . E.		Government grants (co	ontributions)	1e							
ıns, Sir	f	All other contributions									
Contributions, Gifts, Grants and Other Similar Amounts		and similar amounts n above	ot included	1 f	962,	531					
휼	g	Noncash contribution in lines 1a - 1f \$		10	5 162						
Cont and	١,	h Total. Add lines 1a									
				•		ıness Code	962,531				
Program Service Revenue	2a	PROGRAM SERVICE FEE	S		Dus		4	94,591	494,59	1	
4	24		-			61143	30				
Ce F	Ь			_							
ervi	c d										
E S	e			_							
ogra	f	All other program se	rvice revenue								
Ĕ	g.	Total. Add lines 2a-2	2f		>	494,59	91				
		Investment Income (II			nterest, and o		24:	3			243
		imilar amounts) . Income from investm			and proceeds	>					1
		Royalties				•					1
			(ı) Real		(II) Person	nal					
	6a	Gross rents									
	b	Less rental expenses									
	_	Rental income or									
		(loss)									
	d	Net rental income o				•					
	7a	Gross amount	(ı) Securit	ies	(II) Othe	r					
	<i>,</i> u	from sales of assets other									
		than inventory									
	b	Less cost or other basis and									
	c	sales expenses Gaın or (loss)									
		Net gain or (loss)				<u> </u>					
	8a	Gross income from f									
ıμe		(not including \$ contributions reporte		of							
•		See Part IV, line 18		a	•						
r Re		Less direct expense Net income or (loss)		b	onte						
Other Revenue		Gross income from g		_		<u> </u>					1
0		See Part IV, line 19									
	b	Less direct expense	c	a b							
		Net income or (loss)		ı	es	<u> </u>					
	10a	Gross sales of invent									
		returns and allowand	ces	al							
	b	Less cost of goods s	sold	ь							
	c	Net income or (loss)	from sales of	ınvent	ory	<u> </u>					
		Miscellaneous	Revenue		Business Co						
	11	aOTHER REVENUE			9	900099	2,56	3	2,568		
					•						
	b	•									
	c				•						1
	C										
	d	All other revenue .									
		Total. Add lines 11a				>		1			
	12	Total revenue. See	Instructions			, -	2,56				
							1,459,93	3	497,159		0 243 Form 990 (2018)

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Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	inizations must comp	lete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX .			🗹
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21			<u> </u>	
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	314,643	209,938	58,841	45,864
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	394,632	293,793	45,395	55,444
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits	88,034	76,684	4,301	7,049
10 Payroll taxes	64,101	46,851	8,634	8,616
11 Fees for services (non-employees)				
a Management				
b Legal	3,375		3,375	
c Accounting	10,500		10,500	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	135,535	128,490	4,546	2,499
12 Advertising and promotion	26,020	4,137	21,675	208
13 Office expenses	38,210	6,638	30,324	1,248
14 Information technology				
15 Royalties				
16 Occupancy	151,823	87,580	53,296	10,947
17 Travel	30,416	28,411	1,932	73
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	15,768	7,328	1,883	6,557
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	18,459		18,459	
23 Insurance	6,376		6,376	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a				
b				
C				
d				
e All other expenses				
 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined 	1,297,892	889,850	269,537	138,505
educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

2

3

19

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33

34

Liabilities 22

Fund Balance

Assets or 30

Net

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Unrestricted net assets

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17 - 24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here > \quad \text{and complete lines 30 through 34.}

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total liabilities.Add lines 17 through 25 .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

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

19

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22 23

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31 32

33

34

96.748

226.755

142.061

368.816

465.564

(A)

Page **11**

482,832

52,222

66.860

510.719

20,138

530,857

597,717

Form **990** (2018)

(B)

Beginning of year End of year 357,793 1 Cash-non-interest-bearing . 2 Savings and temporary cash investments . . . 3 Pledges and grants receivable, net . . 26.289 4 Accounts receivable, net . Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete

5 Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) 6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L . Assets Notes and loans receivable, net . 8 Inventories for sale or use . Prepaid expenses and deferred charges 1.791 9 1.431 10a Land, buildings, and equipment cost or other 10a 107,349 basis Complete Part VI of Schedule D 63,167 62,641 Less accumulated depreciation 10b 10c 44,182 11 11 Investments—publicly traded securities . 12 12 Investments—other securities See Part IV, line 11 .

13 13 Investments-program-related See Part IV, line 11 14 14 Intangible assets 15 17.050 15 17.050 Other assets See Part IV, line 11 . 16 **Total assets.**Add lines 1 through 15 (must equal line 34) . 465.564 16 597.717 96.748 66.860 17 Accounts payable and accrued expenses 17 18 18 Grants payable . .

Form	990 (2018)				Page 12
Pa	Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1	,459,933
2	Total expenses (must equal Part IX, column (A), line 25)	2		1	,297,892
3	Revenue less expenses Subtract line 2 from line 1	3			162,041
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			368,816
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			530,857
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both	basıs,			
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sii Audit Act and OMB Circular A-133?	ngle	За		No
Ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	red	3b		

Form **990** (2018)

Additional Data

Software ID:

Software Version:

EIN: 22-3432160

Name: ESSENTIAL PARTNERS INC

Form 990 (2018)

Form 990, Part III, Line 4a:

RELATED TO DIVISIVE PUBLIC ISSUES. THE ORGANIZATION FOSTERS WAYS OF TALKING ACROSS DIFFERENCES THAT DECREASE POLARIZATION, AND INCREASE MUTUAL UNDERSTANDING AND POSSIBILITIES FOR COLLABORATIVE ACTION EVEN WHEN PEOPLE ARE IN PROTRACTED, POLARIZED CONFLICT, AND HAVE INDELIBLE DIFFERENCES, THE RELATIONSHIPS AMONG THEM CAN SHIFT AND THE "PROBLEMS AND THE RANGE OF POSSIBLE SOLUTIONS CAN SHIFT AS WELL WORK BY THE ORGANIZATION FACILITATES SUCH SHIFTS THE ORGANIZATION STRADDLES THE INTERSECTIONS OF THEORY AND PRACTICE, RESEARCH AND TRAINING, SERVICE DELIVERY, AND PUBLICATION PART "THINK TANK". PART SERVICE PROVIDER, AND PART TRAINING CENTER, THE ORGANIZATION HOUSES AN UNUSUAL RANGE OF CAPACITIES UNDER ONE ROOF THE ORGANIZATION HAS A SOLID AND SPREADING REPUTATION FOR PROVIDING RESPONSIBLE AND EFFECTIVE SERVICE. CONDUCTING THOROUGH RESEARCH WRITING USEFUL ARTICLES ABOUT OUR THINKING AND METHODS, AND DELIVERING OUTSTANDING TRAININGS THE ORGANIZATION IS RECOGNIZED AS A UNIQUE AND VALUABLE RESOURCE BY OUR MANY CLIENTS, DONORS, AND PEERS WE SEEK TO UNCOVER THE WAYS THAT INDIVIDUALS WHO ENGAGE THEIR DIFFERENCES CONSTRUCTIVELY CAN DISCOVER THEIR ESSENTIAL PARTNERSHIP IN FORGING EFFECTIVE COMMUNITY AND ORGANIZATIONAL OUTCOMES WITH UNIVERSITIES, CIVIC ORGANIZATIONS, AND COMMUNITY GROUPS ACROSS THE U.S. AND ABROAD AIMED AT ACHIEVING A WORLD IN WHICH DIFFERENCE IS AN INVITATION TO MORE CONSTRUCTIVE SOLUTIONS A ROBUST MONITORING AND EVALUATION PROGRAM LAUNCHING IN FY 2016-17 AIMS TO TRACK THE STORIES AND RESULTS OF SUCH PARTNERSHIPS AND THEIR IMPACT ON COMMUNITIES SINCE BEGINNING ITS WORK IN 1989. THE ORGANIZATION HAS DESIGNED, CONVENED, DOCUMENTED, AND EVALUATED NUMEROUS DIALOGUES ON A VARIETY OF PUBLIC ISSUES, INCLUDING ABORTION, THE ENVIRONMENT, POPULATION AND DEVELOPMENT. SEXUAL ORIENTATION AND RELIGION, SOCIAL CLASS, AND END-OF-LIFE ISSUES THE ORGANIZATION'S CONSULTING SERVICES ARE SOUGHT BY NETWORKS AND GROUPS EXPERIENCING DIFFICULTY WORKING TOGETHER, E.G., BOARDS OF NON-PROFIT ORGANIZATIONS, RELIGIOUS INSTITUTIONS AND FACULTY-PARENT GROUPS IN SITUATIONS WHERE THE PERCEIVED OBSTACLES TO COLLABORATION INVOLVE POLITICAL OR DEMOGRAPHIC DIFFERENCES. WE WORK WITH SUCH GROUPS OURSELVES OR IN PARTNERSHIPS WITH ORGANIZATIONAL CONSULTANTS AS AWARENESS OF THE MULTIDIMENSIONAL COSTS OF ANY GATHERING SPREADS, SO DOES THE WILLINGNESS TO INVEST IN PREPARATION THAT WILL MAKE THE MOST OF EXPENSIVE FACE-TO-FACE TIME. THE ORGANIZATION'S COLLABORATIVE APPROACH TO CONFERENCE DESIGN, FACILITATION, AND CONSULTATION IS ESPECIALLY ATTRACTIVE TO THOSE WHO WANT THEIR CONFERENCES TO BE PARTICIPATORY, SYNERGISTIC. AND COMMUNITY BUILDING THE ORGANIZATION ALSO CONDUCTS A RESPECTED AND GROWING TRAINING PROGRAM DIRECTED TOWARD ORGANIZATIONS, NETWORKS AND INDIVIDUALS WHO WANT TO ENLARGE THEIR CAPACITY TO CONVENE, FACILITATE, AND ENGAGE IN MORE CONSTRUCTIVE CONVERSATIONS IN THEIR PROFESSIONAL OR CIVIC LIVES

THE ORGANIZATION PROMOTES CONSTRUCTIVE CONVERSATIONS AND RELATIONSHIPS AMONG THOSE WHO HAVE DIFFERING VALUES, WORLD VIEWS, AND POSITIONS

efile	e GRA	APHIC prii	nt - DO NOT PF	ROCESS	As Filed Data -			DLN: 9	3493195025150
SCF	IED	ULE A	D	ublic (harity Statu	e and Dul	hlic Sunn	ort	OMB No 1545-0047
For	Form 990 or Complete if the organization is a section 501(c)(3) organization or a section 501(c)(3) organization organiza							2018	
•	rtment of the Treasury								Open to Public Inspection
ame	of th	ne Service ne organiza	tion					Employer identific	<u>_</u>
SSEN	TIAL PA	ARTNERS INC						22-3432160	
	t I				ıs (All organızatıon			See instructions.	
ie o	rganız	ation is not	a private foundatio	on because	it is (For lines 1 thro	ough 12, check o	nly one box)		
1		A church, c	onvention of churc	ches, or ass	sociation of churches	described in sec	tion 170(b)(1)	(A)(i).	
2	П	A school de	scribed in section	170(b)(1	L)(A)(ii). (Attach Sch	nedule E (Form 9	90 or 990-EZ))		
3		Δ hospital (or a cooperative by	nenital serv	ice organization desc	rihed in section	170(b)(1)(A)(iii)	
		·	,	•	-			•	
4	Ш	name, city,	and state		•			170(b)(1)(A)(iii). E	
5		-	ation operated for (iv). (Complete Pa		of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170
6		A federal, s	tate, or local gove	ernment or	governmental unit de	scribed in sectio	on 170(b)(1)(<i>A</i>	\)(v).	
7	✓		ation that normally '0(b)(1)(A)(vi).			s support from a	governmental u	init or from the gener	al public described in
8		A communi	ty trust described	ın section	170(b)(1)(A)(vi)	(Complete Part I	I)		
9					scribed in 170(b)(1) e instructions Enter			with a land-grant coll college or university	ege or university or a
0		from activit	ies related to its e	exempt fund ated busine	ctions—subject to cer ess taxable income (le	taın exceptions,	and (2) no more	ns, membership fees, than 331/3% of its su sses acquired by the c	ipport from gross
1	П		=		exclusively to test fo	r public safety S	ee section 509	(a)(4).	
2		more public	ly supported orga	ınızatıons d	escribed in section 5	09(a)(1) or se	ction 509 (a)(2	s of, or to carry out th	
a		Type I. A sorganization	supporting organiz	ation opera regularly a		ontrolled by its s	upported organi	zation(s), typically by of the supporting orga	
b		Type II. A manageme	supporting organi	ization supe ng organiza	tion vested in the sar			organization(s), by ha ge the supported orga	
С		Type III f	unctionally integ	j rated. A s				nd functionally integra	ted with, its
d		Type III n	on-functionally integrated The o	integrated organization	I. A supporting organi	ization operated fy a distribution	in connection wi requirement and	th its supported orgar I an attentiveness req	
е		Check this	box if the organiza	ation receiv	•	nation from the I		pe I, Type II, Type II	I functionally
f	Enter		of supported orga	•	megrated supporting	organization			
g			-		pported organization(s)		_	
		lame of supp organization	oorted (i	ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the org	anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
_			I						
otal									

Page 2

(complete only if you ch	CCRCG THE DOX C	γ_1 in the σ_1 γ_1 σ_2	n 5 of Full Li of F	i the organization	on ranca to quar	ily allaci i alc
III. If the organization fa	ails to qualify un	ider the tests lis	sted below, pleas	se complete Par	t III.)	
III. If the organization fails to qualify under the tests listed below, please complete Part III.) cction A. Public Support Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total						
Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
- A						

	C-1d		1				
	Calendar year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	(or fiscal year beginning in) ▶						
1	Gifts, grants, contributions, and	708,669	884.134	1,100,953	932,126	962,531	4,588,413
	membership fees received (Do not include any "unusual grant")	708,009	004,134	1,100,955	932,120	902,331	4,300,413
2	Tax revenues levied for the						
2							
	organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	708,669	884,134	1,100,953	932,126	962,531	4,588,413
4		708,009	004,134	1,100,933	932,120	902,331	4,360,413
5	The portion of total contributions by each person (other than a						
	governmental unit or publicly supported organization) included on						1,816,386
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
_	Public support. Subtract line 5 from						
6	line 4						2,772,027
_							
_	Section B. Total Support					I	
	Calendar year	(a)2014	(b) 2015	(c)2016	(d)2017	(e)2018	(f) ⊤otal
١.,	(or fiscal year beginning in) ▶	700.660	004 124	1 100 053	022.126	062 524	4 500 412
7	Amounts from line 4	708,669	884,134	1,100,953	932,126	962,531	4,588,413
8	Gross income from interest,						
	dividends, payments received on	164	1,049	620	614	309	2,756
	securities loans, rents, royalties and		·				,
_	income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						

6	governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from						1,816,38
	line 4						2,772,02
:	Section B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2014	(b) 2015	(c)2016	(d) 2017	(e)2018	(f) Total
7	Amounts from line 4	708,669	884,134	1,100,953	932,126	962,531	4,588,41
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	164	1,049	620	614	309	2,75
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)		4,783		756	2,568	8,10
11	Total support. Add lines 7 through						4 500 27

12 Gross receipts from related activities, etc (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, Section C. Computation of Public Support Percentage 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 14 60 270 %

4.599,276

15 66 110 %

15 Public support percentage for 2017 Schedule A, Part II, line 14 16a 33 1/3% support test-2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

▶ 🗸 and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 b 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

P	art IIII Support Schedule for											
	(Complete only if you cl						er Part II. If					
	the organization fails to	qualify under t	he tests listed	below, please co	omplete Part II.)						
	Section A. Public Support											
	Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total					
1	Gifts, grants, contributions, and											
	membership fees received (Do not											
	ınclude any "unusual grants ")											
2	Gross receipts from admissions,											
	merchandise sold or services											
	performed, or facilities furnished in											
	any activity that is related to the organization's tax-exempt purpose											
2	Gross receipts from activities that are											
3	not an unrelated trade or business											
	under section 513											
4	Tax revenues levied for the											
	organization's benefit and either paid											
	to or expended on its behalf											
5	The value of services or facilities											
	furnished by a governmental unit to											
_	the organization without charge											
6	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and											
/a	3 received from disqualified persons											
b												
	received from other than disqualified											
	persons that exceed the greater of											
	\$5,000 or 1% of the amount on line											
	13 for the year											
С	Add lines 7a and 7b											
8	Public support. (Subtract line 7c											
	from line 6)											
	ection B. Total Support											
	Calendar year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total					
9	(or fiscal year beginning in) ► Amounts from line 6											
10a	Gross income from interest,											
IUa	dividends, payments received on											
	securities loans, rents, royalties and											
	income from similar sources											
b	Unrelated business taxable income											
	(less section 511 taxes) from											
	businesses acquired after June 30,											
	1975											
C												
11	Net income from unrelated business activities not included in line 10b,											
	whether or not the business is											
	regularly carried on											
12	Other income Do not include gain or											
	loss from the sale of capital assets											
	(Explain in Part VI)											
13	Total support. (Add lines 9, 10c,				1							
	11, and 12)	r +bo organization	o first seemed the	hund formels an e.e.	h tay yaar aa a	 	rannization					
14	First five years. If the Form 990 is for	i tile organization	s iirst, second, ti	mia, iourth, or fift	ii tax year as a se	criou 201(c)(3) 0	_					
	check this box and stop here						<u>▶</u> ⊔					
Se	ection C. Computation of Public S											
15	Public support percentage for 2018 (lin			column (f))		15						
16	Public support percentage from 2017 S	chedule A, Part II	I, line 15			16						
- 54	ection D. Computation of Investi	nent Income I	Percentage									
			nn (f) divided hv									

Investment income percentage from 2017 Schedule A, Part III, line 17 18 19a 331/3% support tests-2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests—2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is ightharpoonsnot more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Page 4

9a

9b

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018

provide detail in Part VI.

answer line 10b below

10a

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations								
			Yes	No				
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,							

If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,	
describe the designation If historic and continuing relationship, explain	1
Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described	
in section 509(a)(1) or (2)	

	describe the designation If historic and continuing relationship, explain	1	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described		
	ın section 509(a)(1) or (2)	2	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)		
	below	3a	

	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
	ın section 509(a)(1) or (2)	2	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)		
	below	3a	
b	Did the organization confirm that each supported organization qualified under section $501(c)(4)$, (5) , or (6) and satisfied the public support tests under section $509(a)(2)$? If "Yes," describe in Part VI when and how the organization made the		
	determination	3b	
_	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) numbers?		

	below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the			
	determination			
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?			
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use			
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) below			

	determination	3b	'			
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?					
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use					
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you					
	checked 12a or 12b in Part I, answer (b) and (c) below					
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported					
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b				
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections					
	501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support					
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	_	$\overline{}$			

U	Did the organization have ditimate control and discretion in deciding whether to make grants to the foreign supported		
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b	
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support		
	to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes	4c	
5а	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the		
	organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a	
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the		
	organization's organizing document?	5b	
		_	

С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in		

6	than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing		
	organization's supported organizations? If "Yes," provide detail in Part VI.	6	
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a		

	section 4958(c)(3)(c)), a family member of a substantial contributor, or a 35% controlled entity with regard to a				
	substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7			
8	d the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"				
	complete Part I of Schedule L (Form 990 or 990-EZ)				
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as				

defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
h	A family member of a person described in (a) above?	11b		\vdash
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
	ection B. Type I Supporting Organizations			
_	cetton b. Type I Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint of elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Pa VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year			
		1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization			
_	action C. Tuna II Summarting Organizations			
3	ection C. Type II Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees	of	103	110
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?			
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tayear? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard			
_				
1	ection E. Type III Functionally-Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru	otions)		
	The organization satisfied the Activities Test. Complete line 2 below	Ctions)		
	b			
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (s	ee instru	ctions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .	of 3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3b		
		, 55	1	i

instructions)

	Type 111 Non-1 directionally integrated 309(a)(3) Supporting of	,ı gaiii	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-in	ntegrate	ed Type III supporting or	ganization (see

Page 6

5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

See instructions

6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI See instructions

7 Excess distributions carryover to 2019. Add lines 31 and 4c

8 Breakdown of line 7 a Excess from 2014.

b Excess from 2015. c Excess from 2016.

d Excess from 2017. e Excess from 2018.

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

Page 8					
Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)					
	Facts And Circumstances Test				
990 Schedule A, Suppl	nental Information				
Return Reference	Explanation				
SCHEDULE A, PART II, LINE EXPLANATION OF OTHER	0, OTHER - 2015 AMOUNT \$ 4,783 2017 AMOUNT \$ 756 2018 AMOUNT \$ 2,568				

INCOME

SCHEDULE D

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

(Form 990)

Department of the Treasury

Supplemental Financial Statements

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

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

DLN: 93493195025150 OMB No 1545-0047

Open to Public Inspection

Interr	nal Revenue Service	► Go to <u>www.irs.g</u>	ov/Form990 for the latest information.	Inspection
	ime of the organ			Employer identification number
E5:	SENTIAL PARTNERS I	inc		22-3432160
Pā			sed Funds or Other Similar Funds o	r Accounts.
	Comple	ete if the organization answered "Ye		4125
1	Total number at	and of year	(a) Donor advised funds	(b)Funds and other accounts
2	Total number at	end of year of contributions to (during year)		
3		of grants from (during year)		
4	Aggregate value			
		•		
5		ation inform all donors and donor adviso property, subject to the organization's ex	rs in writing that the assets held in donor ad clusive legal control?	Yes No
6	Did the organize charitable purpe private benefit?	oses and not for the benefit of the donor	onor advisors in writing that grant funds can or donor advisor, or for any other purpose o	be used only for conferring impermissible
Pa	rt III Conse	rvation Easements. Complete if th	ne organization answered "Yes" on Forn	n 990, Part IV, line 7.
1	Purpose(s) of co	onservation easements held by the orgai	nization (check all that apply)	
	☐ Preservati	on of land for public use (e g , recreation	n or education) \square Preservation of an	historically important land area
	☐ Protection	of natural habitat	Preservation of a c	ertified historic structure
	☐ Preservati	on of open space		
2		2a through 2d if the organization held a ne last day of the tax year	qualified conservation contribution in the for	m of a conservation Held at the End of the Year
а	Total number of	conservation easements		2a
b	Total acreage re	estricted by conservation easements		2b
С	Number of cons	ervation easements on a certified histori	c structure included in (a)	2c
d		ervation easements included in (c) acqui	red after 7/25/06, and not on a historic	2d
3	Number of constax year ▶	servation easements modified, transferre	d, released, extinguished, or terminated by	the organization during the
4	Number of state	es where property subject to conservatio	n easement is located >	
5		ization have a written policy regarding that of the conservation easements it holds	ne periodic monitoring, inspection, handling of section in the section in the section is a section of the section in the section in the section is section.	of violations, Yes No
6	Staff and volunt	teer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing co	nservation easements during the year
7	Amount of expe ► \$	enses incurred in monitoring, inspecting,	handling of violations, and enforcing conserv	ation easements during the year
8	Does each cons and section 170	ervation easement reported on line 2(d) $D(h)(4)(B)(ii)$?	above satisfy the requirements of section 1	70(h)(4)(B)(ı) ☐ Yes ☐ N o
9	balance sheet, a		ervation easements in its revenue and exper footnote to the organization's financial state	nse statement, and
Pai	rt IIII Organi	<u>-</u>	of Art, Historical Treasures, or Oth	er Similar Assets.
1a	If the organizat art, historical tr	cion elected, as permitted under SFAS 11 reasures, or other similar assets held for	6 (ASC 958), not to report in its revenue sta public exhibition, education, or research in f icial statements that describes these items	
b	If the organizat	ion elected, as permitted under SFAS 11	6 (ASC 958), to report in its revenue statem lic exhibition, education, or research in furth	
	_	ded on Form 990, Part VIII, line 1		> \$
ſ	ii)Assets included	d in Form 990, Part X		▶ \$
2	If the organizat	·	cal treasures, or other similar assets for final 116 (ASC 958) relating to these items	·
а	_	ed on Form 990, Part VIII, line 1	, , , , , , , , , , , , , , , , , , , ,	> \$
h	Assets included	in Form 990 Part X		<u> </u>

Cat No 52283D

Schedule D (Form 990) 2018

Par	t IIII	Organizations Maintaining Col	lections of Art, F	listori	cal T	reası	ures, or	Other	Similar A	ssets (contir	nued)	
3		g the organization's acquisition, accessions (check all that apply)	n, and other records,	check	any of	the fo	llowing t	hat are a	significant	use of it	s colle	ection	
а		Public exhibition		d		Loan	or excha	inge prog	ırams				
b		Scholarly research		e		Othe	r						
С		Preservation for future generations											
4	Provi Part	de a description of the organization's col XIII	llections and explain	how the	ey furtl	ner th	e organız	ation's e	xempt purp	ose in			
5		ng the year, did the organization solicit o es to be sold to raise funds rather than to							nılar	□ Y.	es	□ N	o
Pa	rt IV	Escrow and Custodial Arrange Complete if the organization answ X, line 21.	ements. vered "Yes" on For	m 990	, Part	IV, li	ine 9, or	reporte	ed an amo	unt on	Form	990,	Part
1a		e organization an agent, trustee, custodi ded on Form 990, Part X?	an or other intermed	ıary for	contri	bution	s or othe	r assets	not	☐ Y e	es	□ N	о
ь	If "Y	es," explain the arrangement in Part XIII	and complete the fo	llowing	table		[Amount			_
c	Begır	nning balance					[1c					_
d	Addıt	ons during the year					[1 d					
е	Dıstr	butions during the year						1e					
f	Endır	ng balance					[1f					_
2a	Dıd t	he organization include an amount on Fo	orm 990, Part X, line	21, for	escrow	or cu	ıstodial a	ccount lia	ability?	. □ Y	es	\square N	0
Ь		es," explain the arrangement in Part XIII							·	_			
	rt V	Endowment Funds. Complete if											
		<u>'</u>	(a)Current year		rıor yea				(d)Three ye		(e) Fo	our year	s back
1 a	Beginn	ning of year balance											
b	Contri	butions											
c	Net in	vestment earnings, gains, and losses											
d	Grants	or scholarships											
e		expenditures for facilities rograms											
f	Admın	ıstratıve expenses											
g	End of	year balance											
2	Provi	de the estimated percentage of the curre	ent year end balance	(line 1	g, colu	mn (a)) held as	5	•				
а	Boar	d designated or quasi-endowment 🕨	·			•							
ь	Perm	anent endowment ►											
С	Temp	porarily restricted endowment >											
_		percentages on lines 2a, 2b, and 2c shou	ıld equal 100%										
3a		here endowment funds not in the posses	ssion of the organizat	on that	t are h	eld an	ıd admını	stered fo	r the		-		
	-	nization by									- (')	Yes	No
	• •	nrelated organizations			•						a(i) a(ii)		
Ь		elated organizations	ns listed as required o	n Sche	dule R	? .				<u> </u>	3b		
4		ribe in Part XIII the intended uses of the	•			•	•			· L			
Pa	rt VI	Land, Buildings, and Equipmen	nt.										
		Complete if the organization answ	vered "Yes" on For										
	Descr	iption of property (a) Cost or oth (investme		or other	basis (other)	(c) Accı	umulated o	depreciation		(d) Bo	ok valu	e
1 a	Land												
b	Buildir	ngs											
c	Leasel	nold improvements				54,378			32,553				31,825
d	Equipr	nent			4	1 2,971			30,614				12,357
е	Other												
Tota	al. Add	lines 1a through 1e (Column (d) must e	qual Form 990, Part .	X, colur	nn (B)	, line	10(c)) .		<u> </u>				44,182
											_		_

Part VII Investments—Other Securities. Complete if the ord See Form 990, Part X, line 12.	ganızatı	on answere	d "Yes" on Form 990, Part IV	, line 11b.
(a) Description of security or category (including name of security)		(b) Book value	(c) Method of valuati Cost or end-of-year mark	
1) Financial derivatives				
3)Other				
A)				
B)				
C)				
D)				
E)				
F)				
G)				
н)				
otal. (Column (b) must equal Form 990, Part X, col (B) line 12)	Þ			
The investments—Program Related. Complete if the organization answered 'Yes' on Form				
(a) Description of investment	(b) Boo	ok value	(c) Method of valuati Cost or end-of-year mark	
1)				
2)				
3)				
4)				
5)				
6)				
7)				
8)				
9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		000 0 17	/	1 45
Part IX Other Assets. Complete if the organization answered 'Yes' (a) Description	on Form	990, Part IV		(b) Book value
1)				
2)				
3)				
4)				
5)				
6)				
7)				
8)				
9)				
otal. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization answer	· ·	· · · · s' on Form		
See Form 990, Part X, line 25. (a) Description of liability		(b) Book		
1) Federal income taxes		(-,		
2)				
3)				
4)				
5)				
	-+			
			1	
6)				
6) 7)				
6) 7) 8)				
6) 7) 8) 9) Fotal. (Column (b) must equal Form 990, Part X, col (B) line 25)	•			

Net unrealized gains (losses) on investments 2a

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

2h 88.800 h 2с

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

2d 2e 3

3 Amounts included on Form 990, Part VIII, line 12, but not on line 1 4

Schedule D (Form 990) 2018

Add lines 4a and 4b .

Part XI

5

1

2

3

4

b

5

Part XIII

Return Reference

а

Part XII

Investment expenses not included on Form 990, Part VIII, line 7b.

Amounts included on line 1 but not on Form 990, Part IX, line 25

Investment expenses not included on Form 990, Part VIII, line 7b . . .

Amounts included on Form 990, Part IX, line 25, but not on line 1:

4a 4b

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

2a

2b

2c 2d

4h

Page 4

88,800

1,459,933

1,459,933

1,386,692

88,800 1,297,892

4c

1

2e

3

4c

Schedule D (Form 990) 2018

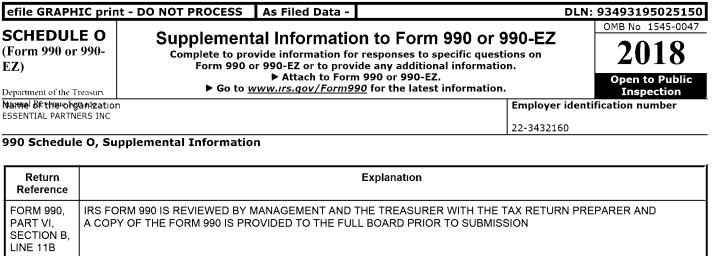
88.800

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5 1,297,892 Supplemental Information Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information Explanation

	orm 990) 2018 Supplemental Info	Page 5	
Lair VIII	Supplemental IIIIO	ination (continued)	
Ret	urn Reference	Explanation	
			Schedule D (Form 990) 2018

DLN: 93493195025150 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) 2018 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization Employer identification number ESSENTIAL PARTNERS INC 22-3432160 Part I Types of Property (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining noncash contribution amounts applicable items contributed amounts reported on Form 990, Part VIII, line 1g 1 Art—Works of art . . Art-Historical treasures 3 Art—Fractional interests 4 Books and publications Clothing and household goods Cars and other vehicles 7 Boats and planes . . . 8 Intellectual property . . . Securities—Publicly traded . Х 195,164 FAIR MARKET VALUE 10 Securities—Closely held stock . **11** Securities—Partnership, LLC, or trust interests . . . 12 Securities-Miscellaneous . . 13 Qualified conservation contribution—Historic structures . . . 14 Qualified conservation contribution—Other . Real estate—Residential . Real estate—Commercial . 17 Real estate—Other . . 18 Collectibles 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ▶ (______) Other ▶ (______) 26 27 Other ► (______) Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt 30a Nο b If "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Nο 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο b If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2018) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51227J

Page 2 Schedule M (Form 990) (2018) Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. Return Reference Explanation THE NUMBER OF CONTRIBUTIONS REFLECTED IN COLUMN B REPRESENTS THE NUMBER OF DONORS PART I, COLUMN (B) Schedule M (Form 990) (2018)



Return Explanation

990 Schedule O, Supplemental Information

FORM 990, THE ORGANIZATION'S CONFLICT OF INTEREST POLICY PROVIDES FOR ANNUAL DISCLOSURE, REVIEW AND APPROVAL BY THE BOARD PRIOR TO ANY ACTIVITIES CONFLICTS ARE DISCLOSED VIA A QUESTIONNAIRE SECTION B, COMPLETED BY BOARD MEMBERS

LINE 12C

Return Explanation

990 Schedule O, Supplemental Information

FORM 990,	THE CEO'S PERFORMANCE IS EVALUATED ANNUALLY BY A TEAM OF BOARD MEMBERS INCLUDING THE BOARD
PART VI,	CHAIR AND TWO VOLUNTEERS THE BOARD REVIEWS AND APPROVES THE COMPENSATION PACKAGE ON INIT
SECTION B,	AL HIRE ANNUALLY A COST OF LIVING INCREASE IS CONSISTENTLY PROVIDED TO ALL STAFF
LINE 15	

990 Schedule O, Supplemental Information Return Explanation

FORM 990, PART VI, PART VI, ESCRETARY OF STATE, COMMONWEALTH OF MASSACHUSETTS IS AVAILABLE AT THEIR WEBITE ARTICLES OF ORGNIZATION AND BY-LAWS, FOR THE NAMES OF MEMBERS OF THE BOARD OF DIRECTORS ARE AVAILABLE AT ESSENTIAL PARTNERS, INC.'S WEBSITE

Return Explanation
Reference

FORM 990, PART IX, LINE 11G

CONSULTANTS PROGRAM SERVICE EXPENSES 128,490 MANAGEMENT AND GENERAL EXPENSES 4,546
FUNDRAISING EXPENSES 2,499 TOTAL EXPENSES 135,535

990 Schedule O, Supplemental Information

efile GRAPHIC print - DO NOT PROCESS As Filed Data
SCHEDULE R
(Form 990)

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

► Attach to Form 990.

Department of the Treasury
Internal Revenue Service

OMB No 1545-0047

DLN: 93493195025150

2018

Open to Public Inspection

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Name, address, and EIN (if applicable) of disregarded entity Co Legal domicile (state or foreign country) Total income End-of-year assets		
(a) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets		
(a) Name, address, and EIN (if applicable) of disregarded entity (b) Primary activity Legal domicile (state or foreign country) Total income End-of-year assets		
	(f) Direct control entity	lling
Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it has related tax-exempt organizations during the tax year.	ad one or mo	re
Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct co	tity (1	(g) ection 512(b .3) controlle entity?
(1)FIFTY ONE KONDAZIAN INC 46 KONDAZIAN STREET MA 501(C)(2) ESSENTIAL PA		Yes No Yes
WATERTOWN, MA 02472 27-2470764		
or Panerwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50135Y Schedule	R (Form 990	2) 2016

(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)		(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UB amount in be 20 of Schedule K- (Form 1065	General Genera	ij) eral or laging tner?	(k) Percenta owners
					314)			Yes	No		Yes	No	
												1 1	
												\vdash	
Identification of Related Organiza because it had one or more related or						zation ansv	wered "Yes	" on Fo	orm 99	90, Part I\	/, line	34	
Identification of Related Organiza because it had one or more related or (a) Name, address, and EIN of related organization		corporation doing (state of		st during th	(d) controlling Tyentity	(e)	wered "Yes (f) Share of total income	Share	(g) of end- year assets	of- Perc	/, line (h) entage ership	s (:	(I) ection 51 13) contr entity
because it had one or more related or (a) Name, address, and EIN of	rganizations treated as	corporation doing (state of	on or trus (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perc	(h) entage	s (:	ection 5: 13) contr
because it had one or more related or (a) Name, address, and EIN of	rganizations treated as	corporation doing (state of	on or trus (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perc	(h) entage	s (:	ection 5: 13) contr entity
because it had one or more related or (a) Name, address, and EIN of	rganizations treated as	corporation doing (state of	on or trus (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perc	(h) entage	s (:	ection 5 13) conti entity
because it had one or more related or (a) Name, address, and EIN of	rganizations treated as	corporation doing (state of	on or trus (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perc	(h) entage	s (:	ection 5 13) cont entity
because it had one or more related or (a) Name, address, and EIN of	rganizations treated as	corporation doing (state of	on or trus (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity orp, S corp,	(f) Share of total	Share	(g) of end- year	of- Perc	(h) entage	s (:	ection 5 13) cont entity

c Gift, grant, or capital contribution from related organization(s).

Loans or loan guarantees to or for related organization(s) . .

No

No

No

No

No

No

No

No

No

No No

No

No

No

No

No

No

Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.									
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No						
1 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?	П								
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No						
h. Gift, grant, or capital contribution to related organization(s)	1b		No						

2 If the answer to any of the above is "Yes." see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(b)

Transaction

type (a-s)

(c)

Amount involved

m Performance of services or membership or fundraising solicitations by related organization(s)

(a)

Name of related organization

1c

1d 1e

1g 1h

11

1 m

1n

10

1q

1r

1s

Schedule R (Form 990) 2018

(d)

Method of determining amount involved

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	01	(e) e all partners section 501(c)(3) rganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(1) General or managing partner?		(k) Percentage ownership	
			514)	Yes	No			Yes	No		Yes	No		
													_	
									•	Schedul	e R (Form	1 99	0) 2018	

