#### Form **990**

#### **Return of Organization Exempt From Income Tax**

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

2018

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

Α	For	the 2	2018 calend	lar year, or tax year begi	nning		, 2018, and e	nding			, 20	
В	Chec	k if ap	plicable:	C Name of organization Repa	resent.Us Edu	cation Fund					Employer identification	n no.
	Addre	ess ch	ange	Doing business as							26-3088283	
$\overline{\Box}$	Name	e chan	ige	Number and street (or P.O. b	ox if mail is not delivered	to street address)		Room/s	suite	-	Telephone number	
П		l return	•	PO Box 60008		,					(413)585-8100	)
Н			/terminated	City or town, state or province	country and 7IP or for	pign poetal codo				١,	Gross receipts	
H					•	agri postal code				l`	·	
Н		nded re		Florence, MA 0						_	\$ 3,022,59	
Ш	Appli	cation	pending	F Name and address of principa		Dipaola			Is this a group r		= =	No
				Same as C abov				H(b)	Are all subor	dinates	included? Yes	No
I				501(c)(3) 501(c) (	) < (insert no.)	4947(a)(1) or	527		If "No," a	ttach a	list. (see instructions)	
J		site:		p://representuse	ducationfund	.org/		H(c)	Group exen	nption r	number >	
		_	janization: X		sociation Other	•	L Year of formation: 2	2008	M State	of legal	domicile: MA	
Pa	art I		Summar	•								
		1	Briefly descr	ribe the organization's miss	sion or most signific	ant activities: R	epresent.Us Ed	ucati	on Fund	lis	a national,	
4		1	nonparti	san, nonprofit 50	)1(c)(3) orga	anization wo	rking to fix o	ur co	rrupt p	oli	tical system	
Activities & Governance		á	and invo	lve the public in	n democracy p	olicymaking	. Continued in	Sche	dule O.			
rna												
Š.		2 (	Check this b	ox ▶ ☐ if the organizatio	n discontinued its o	perations or dispos	ed of more than 25%	of its ne	t assets.			
ŏ		3 1	Number of v	oting members of the gove	erning body (Part V	′I. line 1a)				3		10
•ඊ ග				ndependent voting membe					-	4		8
tie				er of individuals employed i					-	5		49
Ξ̈́				er of volunteers (estimate if	-				-	6		10
ĕ				ted business revenue from	• ,				F	7a		0
				ed business taxable income					F			
		D I	net unrelate	ed business taxable income	e 110111 F01111 990-1,	ine 36				7b		0
							-		Prior Year		Current Year	
4				s and grants (Part VIII, line			T T		2,219	,376	2,920,	706
Revenue			J	rvice revenue (Part VIII, lin	0,		<del>-</del>					0
š	1	10	Investment i	ncome (Part VIII, column (	A), lines 3, 4, and 7	d)						0
æ	1	11 (	Other revenu	ue (Part VIII, column (A), li	nes 5, 6d, 8c, 9c, 1	Oc, and 11e)			81	,595	101,	893
	1	12	Total revenu	ue - add lines 8 through 11	(must equal Part VI	II, column (A), line	12)		2,300	,971	3,022,	599
	1	13 (	Grants and s	similar amounts paid (Part	IX, column (A), line	s 1-3)			1,324	,207	1,364,	131
	1	14 E	Benefits paid	d to or for members (Part I	X, column (A), line	4)						0
	1	15 3	5 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)								58 927,263	
Expenses	1	16a l	Professional	I fundraising fees (Part IX,	column (A), line 11	e)						
en				ising expenses (Part IX, co	, ,	•	457,124					
Ä	`   <sub>1</sub>			ises (Part IX, column (A), li		·			316	923	609,	488
			•	ses. Add lines 13-17 (mus	•	,	<del>-</del>		2,165			
				ss expenses. Subtract line			<del>-</del>		135			
_			ixcveriue ies	os expenses. Oubtract line	10 110111111111111111111111111111111111	<u> </u>		Danimain				<u>/                                    </u>
ts o	auce .	on -	Total assata	(Dort V line 16)			<del>-</del>	Бедіппіп	g of Current		End of Year	400
SSe	Bala			(Part X, line 16)			_		673			
Net Assets or				es (Part X, line 26)			_		228			
		_		or fund balances. Subtract	line 21 from line 2	J			444	, 567	565,	924
	art I			ire Block	to all all an analysis	do a colo dello conditato						
				clare that I have examined this retuction of preparer (other than of				knowleage	and belief, it	IS		
o:,				ua M Silver							11-01-2019	
Siç	-	<u> </u>	Signatur	re of officer						Date		
He	re		Josh	ua M Silver, Chie	ef Executive	Officer						
			Type or	print name and title								
			Print/Type pre	eparer's name	Preparer's signature		Date		Check	if F	PTIN	
Pa	id		Robert	Calcasola	Preparer's signature Robert Co	lcasola	11-05-2019		self-employe	d	P00229178	
Pre	ера	rer	Firm's name		alcasola & Co	D PC	•	Firm's I				
	•	nly	Firm's addres					Phone				
		,	3 444100		ngmeadow MA (	01028				3-5	25-4100	
Ma	v the	IRS	discuss this	return with the preparer s				1				No

Par	Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Represent.Us Education Fund is a national, nonpartisan, nonprofit 501(c)(3) organization
	working to fix our corrupt political system and involve the public in democracy policymaking.
	Continued in Schedule O.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code: ) (Expenses \$ 1,025,023 including grants of \$ 1,025,023 ) (Revenue \$ )
	Grantmaking: In 2018, RepresentUs Education Fund made grants to RepresentUs to support public
	education, research, and cross-partisan outreach activities. Grant funds were used to develop
	multi-channel public-education campaigns to inform voters about the challenges faced by our
	democracy and on viable policy solutions. Funds were also used to promote educational content
	about popular, smart political reforms; to produce compelling videos; and to provide
	of-the-moment communications on news items impacting our democracy. Grantmaking also
	underwrote the recruitment and training of volunteers.
	anderwiote the recruitment and training or volunteers.
4b	(Code: ) (Expenses \$ 580,610 including grants of \$ 233,608) (Revenue \$ )
7.0	Public Education, Outreach, and Communications: RepresentUs Education Fund elevates the
	national dialogue on democratic reform by taking complex ideas and presenting them in a way
	that resonates with diverse audiences. In February 2018, RepresentUs Education Fund held the
	inaugural Unrig Summit in New Orleans, Louisiana, a three-day gathering of democracy reform
	groups, academics, activists, and influencers from across the political spectrum. The Summit
	is driven by the goal to create a collaborative network for the movement by bringing together
	passionate activists and advocates and creating opportunities to learn, share ideas, get
	passionate activists and advocates and creating opportunities to learn, share ideas, get inspired, and forge lasting relationships.
4-	inspired, and forge lasting relationships.
4c	inspired, and forge lasting relationships.  (Code:) (Expenses \$517,781 including grants of \$105,500 ) (Revenue \$)
4c	inspired, and forge lasting relationships.  (Code:) (Expenses \$517,781 including grants of \$105,500 ) (Revenue \$)  Research: RepresentUs Education Fund conducts in-depth research related to campaign-finance
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4c 4d	inspired, and forge lasting relationships.  (Code:) (Expenses \$517,781 including grants of \$105,500) (Revenue \$
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#### Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions).?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		Λ	
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	3		Λ
4	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	-	Λ	
J	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	3		Λ
U	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		v
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	0		X
7		_		v
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			v
_	complete Schedule D, Part III	8		Х
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	_		v
40	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	40		Х
44	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Λ
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
č	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	44-	7.7	
	complete Schedule D, Part VI	11a	X	
K	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more	446		v
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
(	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more	44-		v
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
(	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	44.1		37
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	37	Х
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	· · · · · · · · · · · · · · · · · · ·	445		v
120	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a		120	v	
<b>L</b>	Schedule D, Parts XI and XII	12a	X	
i.	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
13 14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
14a b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	170		22
	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		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	1.40		22
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			21
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			22
•	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	· · ·		23
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	5		- 22
	If "Yes," complete Schedule G, Part III	19		Х
20 -	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		X
	of "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		27
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	_05		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
_	2 g		44	

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

reportable gaming (gambling) winnings to prize winners?

26-3088283 Part IV **Checklist of Required Schedules** (continued) Yes No 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX. column (A). line 2? If "Yes." complete Schedule I. Parts I and III 22 Χ 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated 23 Χ 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b Χ 24a 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 24c Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a Χ Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 25b Χ Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or 26 Χ 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled Χ 27 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): 28a Χ A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Χ 28b 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 Χ 28c Χ 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . . . . . . . . . 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 Χ 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I...... 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." 32 Χ 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Χ Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 Χ 34 Χ 35a 35a 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 ....... 35b Χ 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable Χ 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Χ 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and Χ 19? Note. All Form 990 filers are required to complete Schedule O. 38 Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response or note to any line in this Part V....... Yes No Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable ...... 33 

EEA

#### Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 49			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		3.7
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7-		77
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h •	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	0		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	35		
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Χ
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year	15		X
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			

Form 990 (2018) Represent.Us Education Fund Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax year 10 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. Enter the number of voting members included in line 1a, above, who are independent b 1b 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 Χ 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 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 6 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 **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, Χ stockholders, or persons other than the governing body? 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Χ Χ Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at 9

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a **10a** Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Χ b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." 12c 13 Did the organization have a written whistleblower policy? Χ 13 Χ 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Χ 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement Χ 16a 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? ................ Χ

Section C. Disclosure	S	ec	tic	on	ı C.	Di	SC	los	ure
-----------------------	---	----	-----	----	------	----	----	-----	-----

17	List the states with which a copy of this Form 990 is required to be filed   California, Massachusetts									
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)									
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.									
	☐ 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:

orm	990	(201	R١
UHIH	220	IZUI	O

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

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

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

				(	(C)					
(A) Name and Title	(B)  Average hours per week (list any hours for	box, office	unles er and	eck m ss per	son is	nan one s both an /trustee)		(D)  Reportable compensation from the	(E)  Reportable compensation from related organizations	(F) Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Joshua M Silver	40.00									
Chief Executive Officer		X				Х		155,062	0	20,255
(2) John Johnson	1.00	Х		77						•
Secretary	1 00	Λ		X			+	0	0	0
(3) Ethan Beard Treasurer	1.00	Х		Х				0	o	0
(4) Todd Dipaola	1.00									
Chair		Х		Х				0	0	0
(5) Elisa Jagerson	1.00									
Director		X						0	0	0
(6) Matt Cutts	1.00									
Director		X						0	0	0
(7) Alan Schwartz	1.00									
Director		X						0	0	0
(8) Erik Feig	1.00									
Director		X						0	0	0
<u>(9)</u>										
<u>(10)</u>										
(11)										
(12)										
<u>(13)</u>										
<u>(14)</u>										

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			Position (do not check more than one box, unless person is both an officer and a director/trustee)						Reportable compensation from	Reportable compensation from related		(F) Estimated amount of other compensation	
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	org ar	npensati from the ganizatio nd relate anizatio	on d
<u>(15)</u>													
<u>(16)</u>													
<u>(17)</u>													
<u>(18)</u>													
<u>(19)</u>													
(20)													
(21)													
(22)													
(23)													
(24)													
(25)													
С	Sub-total	n A.						<b>&gt;</b>	155,062	0	20,255		255
	Total number of individuals (including but not limited reportable compensation from the organization									1		•	
	reportable compensation from the organization									<u> </u>		Yes	No
	Did the organization list any <b>former</b> officer, directo		-				-		•		,		v
	employee on line 1a? If "Yes," complete Schedule For any individual listed on line 1a, is the sum of rep										3		X
	organization and related organizations greater thar			s," cc	ompl	ete	Sched	lule .	J for such				
	individual			nv III	· · ·	 het	organ	 izatio	on or individual	• • • • • • • •	4	X	
	for services rendered to the organization? If "Yes,"			-			_				5		Х
	n B. Independent Contractors												
	Complete this table for your five highest compensate compensation from the organization. Report comper year.												
	(A) Name and business address								(B) Description of	services		(C) pensatio	n
2	Total number of independent contractors (including	but not limite	d to th	ose	lister	d ab	ove) v	/ho					

Part VIII Statement of Revenue

		Check if Schedule O contains a response	or no	ote to any line in thi	s Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D)  Revenue excluded from tax under sections 512-514
	1a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b	32,937				
בַּ פַ	C	Fundraising events	1c	02,007				
ifts, ≅rA	d	Related organizations	1d					
9,E	e	Government grants (contributions)	1e					
is is	f	All other contributions, gifts, grants,						
the the	•	and similar amounts not included above	1f	2,887,769				
d	g	Noncash contributions included in lines 1a-		29,346				
g g	h h	Total. Add lines 1a-1f			2,920,706			
		Total. Add integration	· · ·	Business Code	2,320,700			
e	2a			Business Code				
iven	b							
Program Service Revenue	C							
ivic	d	-						
Š	e	-						
ogra		All other program service revenue						
Ę		<b>Total.</b> Add lines 2a-2f						
	3	Investment income (including dividends, interand other similar amounts)						
	4	Income from investment of tax-exempt bond						
		Royalties						
		(i) Real		(ii) Personal				
	6a	Gross rents		(ii) i cisoriai				
		Less: rental expenses						
		Rental income or (loss)						
	l .	Net rental income or (loss)		•				
		Gross amount from sales of (i) Securitie		(ii) Other				
	/a	assets other than inventory		(ii) Guioi				
	h	Less: cost or other basis						
	ט	and sales expenses						
	С	Gain or (loss)						
	l .	Net gain or (loss)						
e		Gross income from fundraising						
eni		events (not including \$						
ě		of contributions reported on line 1c).	_					
Other Revenue		See Part IV, line 18	а					
₹	b	Less: direct expenses						
		Net income or (loss) from fundraising events						
		Gross income from gaming activities.	•	- · · · · ·				
		See Part IV, line 19	а					
	ь	Less: direct expenses						
	l	Net income or (loss) from gaming activities						
		Gross sales of inventory, less						
	IVa	returns and allowances	a					
	b	Less: cost of goods sold	. <b>b</b>					
	l .	Net income or (loss) from sales of inventory						
		Miscellaneous Revenue		Business Code				
	11a	Other Income		900099	97,598	97,598		
		InKind Income		900099	4,295			
	С				-	-		
	d	All other revenue						
	е	Total. Add lines 11a-11d			101,893			
	12	<b>Total revenue.</b> See instructions			3,022,599		0	0

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising (A) Total expenses (B) Do not include amounts reported on lines 6b. 7b. Program service Management and 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 1,364,131 1,364,131 Grants and other assistance to domestic 2 individuals. See Part IV. line 22 . . . . 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 ..... Compensation of current officers, directors, 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 . . . . . . . . . . . . . . 771,461 298,274 197,757 275,430 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 92,969 47,988 19,933 25,048 10 62,833 25,804 15,805 21,224 11 Fees for services (non-employees): b 2,698 2,698 13,748 13,748 d Professional fundraising services. See Part IV, line 17 . f Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 4,908 585 4,234 89 12 17,162 17,021 141 13 49,822 14,688 22,400 12,734 14 41 133 60 32 15 16 31,430 14,156 65,224 19,638 17 61,865 90,251 7,632 20,754 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 4,258 4,126 132 20 597 12 579 6 21 22 Depreciation, depletion, and amortization . . . . . . 4,122 4,122 23 Insurance ........ 899 5,538 1,242 3,397 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.) 201,491 10,889 Consulting 154,384 36,218 b Communication Costs 149,536 101,804 2,962 44,770 C d е All other expenses Total functional expenses. Add lines 1 through 24e 25 2,900,882 2,123,414 320,344 457,124 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ∐ if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X		<u></u>	<u> </u>
			(A) Beginning of year		(B) End of year
		Cook, non interest bearing		4	
	1 2	Cash - non-interest-bearing	648,050	2	671,400
		Savings and temporary cash investments		3	
	3	Pledges and grants receivable, net			110 418
	4	Accounts receivable, net		4	119,417
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.		_	
	^	Complete Part II of Schedule L		5	
	6	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) voluntary employees' beneficiary			
	_	organizations (see instructions). Complete Part II of Schedule L		6	
ts	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
∢	9	Prepaid expenses and deferred charges	14,467	9	1,995
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a 109,826			
	b	Less: accumulated depreciation	10,603	10c	10,476
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	5	15	200
	16	Total assets. Add lines 1 through 15 (must equal line 34)	673,125	16	803,488
	17	Accounts payable and accrued expenses	36,208	17	43,166
	18	Grants payable	159,207	18	175,426
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors,			
<u>≣</u>		trustees, key employees, highest compensated employees, and			
Lia		disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	33,143	25	18,972
	26	Total liabilities. Add lines 17 through 25	228,558	26	237,564
		Organizations that follow SFAS 117 (ASC 958), check here ► 🗓 and			
Ses	07	complete lines 27 through 29, and lines 33 and 34.	41.4 601	07	565 004
au	27	Unrestricted net assets	414,621	27	565,924
Ba	28	Temporarily restricted net assets	29,946	28	
낕	29	Permanently restricted net assets		29	
Ę		Organizations that do not follow SFAS 117 (ASC 958), check here and			
S	20	complete lines 30 through 34.		20	
sset	30	Capital stock or trust principal, or current funds		30	
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Se	32	Retained earnings, endowment, accumulated income, or other funds		32	F.C. 00:
	33	Total list little and act accept for disclarate	444,567	33	565,924
	34	Total liabilities and net assets/fund balances	673,125	34	803,488

orm	1990 (2018) Represent.Us Education Fund	26-3088283	3	Pa	age <b>1</b> 2
Par	rt XI Reconciliation 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	3,0	22,	599
2	Total expenses (must equal Part IX, column (A), line 25)	. 2	2,9	00,	882
3	Revenue less expenses. Subtract line 2 from line 1	. 3	1	L21,	717
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4	4	144,	567
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		(	360)
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		65,	924
Par	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:   Cash   Accrual   Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Χ	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	☐ Separate 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	Χ	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				

required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits Form **990** (2018) EEA

#### **SCHEDULE A**

(Form 990 or 990-EZ)

#### **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

OMB No. 1545-0047

2018

Department of the Treasury
Internal Revenue Service
Name of the organization

Employer identification number

Represent.Us Education Fund 26-3088283									
Pa	rt I	Reason for Public Charity	<b>y Status</b> (All or	ganizations must co	omplete	this part	<ul><li>.) See instruction</li></ul>	ns.	
The	orga	nization is not a private foundation bec	ause it is: (For lines	s 1 through 12, check onl	y one box.	.)			
1	1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).								
2		A school described in section 170(b	)(1)(A)(ii). (Attach	Schedule E (Form 990 c	or 990-EZ)	.)			
3		A hospital or a cooperative hospital s	service organization	n described in section 1	70(b)(1)(A	۸)(iii).			
4		A medical research organization ope	rated in conjunctio	n with a hospital describ	ed in <b>sect</b>	ion 170(b)	)(1)(A)(iii). Enter the		
		hospital's name, city, and state:	,	·			,,,,,,		
5	П	An organization operated for the bene	efit of a college or u	university owned or opera	ated by a c	novernmen	tal unit described in		
•		section 170(b)(1)(A)(iv). (Complete	_	annotony omnou or opon		,			
6		A federal, state, or local government	•	init described in section	170(b)(1)	(Δ)(γ)			
7	X	An organization that normally receive	•				m the general nublic		
•	<u> </u>	described in section 170(b)(1)(A)(vi	•		verninentai	unit or no	in the general public		
8	П	A community trust described in <b>secti</b>		,					
9		An agricultural research organization			rotod in oc	niunation	with a land grant gal	logo	
9	Ш	•				•	•	iege	
		or university or a non-land-grant colle university:	ge of agricultule (s	see instructions). Litter th	e name, o	iy, anu siai	te of the college of		
10	П	An organization that normally receive	c: (1) mara than 22	2 1/29/ of its support from	n contributi	one momb	orehin food and grad	20	
10	Ш	receipts from activities related to its e	` '	• •				55	
		·	•	•	•	•			
		support from gross investment income		,		,	IOIII Dusinesses		
11	П	acquired by the organization after Ju An organization organized and opera			•	,			
12	H	An organization organized and opera	•					200	
12	Ш	of one or more publicly supported or	•	•					
			=	. , . ,			•		
	•	Check the box in lines 12a through 12  Type I. A supporting organization						•	
	а			•		•		virig	
		the supported organization(s) the			nty of the c	illectors or	trustees of the		
	L	supporting organization. You mu	•		ith ita awan	ortod orac	onization(a) by bayin	.~	
	b	Type II. A supporting organization	•			-	, , ,	-	
		control or management of the sup		•	isons that (	CONTROL OF I	nanage the supporte	u	
	_	organization(s). You must comp				. نا است الداد		:41-	
	С	Type III functionally integrated		•				with,	
		its supported organization(s) (se	•	·-				t:(-)	
	d	Type III non-functionally integr							
		that is not functionally integrated.	-			•	nt and an attentivenes	iS	
		requirement (see instructions). Y	•				Toma II Toma III		
	е	Check this box if the organization				sa Type I,	rype II, Type III		
		functionally integrated, or Type III		negrated supporting orga	anization.				
	f	Enter the number of supported organ Provide the following information abo							
	g			Ĭ ,	Ca A la da a		(-) A	(-D) A	
	(1	) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the o	ir governing	(v) Amount of monetary support (see	(vi) Amou	
				above (see instructions))	docum	nent?	instructions)	instruct	ions)
					Yes	No	_		
-					103	140			
(A)									
(B)									
(C)									
-									
(D)									
/E\									
(E)									
Tota									·

26-3088283

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support									
Calen	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2014	<b>(b)</b> 2015	(c) 2016	<b>(d)</b> 2017	<b>(e)</b> 2018	(f) Total			
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,327,032	1,698,877	2,258,251	2,219,376	2,920,706	10,424,242			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf									
3	The value of services or facilities furnished by a governmental unit to the organization without charge									
4	Total. Add lines 1 through 3	1,327,032	1,698,877	2,258,251	2,219,376	2,920,706	10,424,242			
5	The portion of total contributions by									
	each person (other than a									
	governmental unit or publicly									
	supported organization) included on									
	line 1 that exceeds 2% of the amount									
	shown on line 11, column (f)						2,205,235			
6	Public support. Subtract line 5 from line 4						8,219,007			
	tion B. Total Support  dar year (or fiscal year beginning in)	<b>(a)</b> 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(a) 2019	(f) Total			
				2,258,251	` '	(e) 2018				
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,327,032	1,698,877	2,258,251	2,219,376	2,920,706	10,424,242			
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.)				80,000	4,295	84,295			
11	<b>Total support</b> . Add lines 7 through 10 .						10,508,537			
12	Gross receipts from related activities, etc. (s	ee instructions) .				12	102,149			
13	First five years. If the Form 990 is for the corganization, check this box and stop here	·					▶ □			
	tion C. Computation of Public Su	• •	_							
14	Public support percentage for 2018 (line 6, c			•			78.21 %			
15	Public support percentage from 2017 Schede 33 1/3% support test - 2018. If the organiz					15	69.73 %			
10a				•	•		▶ 🏻			
b	box and <b>stop here.</b> The organization qualifi 33 1/3% support test - 2017. If the organiz						· · · · · • 🔼			
D	this box and <b>stop here.</b> The organization qu						▶ □			
17a	10%-facts-and-circumstances test - 2018	•								
	10% or more, and if the organization meets	_								
	Part VI how the organization meets the "fact				-					
	organization		•	•			▶ □			
b	_									
~	<b>10%-facts-and-circumstances test - 2017.</b> 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 <b>stop here.</b>									
	Explain in Part VI how the organization mee				-	cly				
	supported organization			-		-	▶ □			
18	Private foundation. If the organization did									
	instructions	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	▶ □			

#### Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in) ▶	<b>(a)</b> 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include 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						
3	Gross receipts from activities that are 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						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 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.)						
	ction B. Total Support						
	endar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	<b>(e)</b> 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, 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						
С	Add lines 10a and 10b						
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	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the or organization, check this box and stop here.						▶ □
Se	ction C. Computation of Public Sup	•					
15	Public support percentage for 2018 (line 8, co						%
16	Public support percentage from 2017 Schedul					16	%
	ction D. Computation of Investmen						
17	Investment income percentage for 2018 (line						%
18	Investment income percentage from 2017 Sc	·					%
19a	33 1/3% support tests - 2018. If the organiz 17 is not more than 33 1/3%, check this box	ation did not che and <b>stop here.</b>	eck the box on line The organization q	14, and line 15 is i ualifies as a public	more than 33 1/3% ly supported orgar	s, and line nization	▶ □
b	33 1/3% support tests - 2017. If the organiz line 18 is not more than 33 1/3%, check this						▶ □
20	Private foundation. If the organization did n	ot check a box of	on line 14, 19a, or 1	9b, check this box	and see instruction	ons	▶ □

Part IV Supportin

#### **Supporting Organizations**

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

#### **Section A. All Supporting Organizations**

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **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.
- 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.
- **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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **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?
- **c** Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **8** Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," provide detail in **Part VI**.
- **c** Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI**.
- 10a 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," *answer 10b below.* 
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	3a		
	3b		
	5.5		
	3с		
	4a		
	4b		
	40		
	4c		
	5a		
	Ja		
	5b		
	5c		
	6		
	O		
	7		
	8		
	9a		
	Ja		
	9b		
	9с		
	10a		
	IVa		
	10b		
Δ (Fo		or 990-F	7) 2018

Pai	Supporting Organizations (continued)			
			Yes	No
	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		
	A family member of a person described in (a) above?	11b		
	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		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in <b>Part VI</b> 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.	2		
Sec	tion 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 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		
Sec	tion 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?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how</i>			
	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 tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in	struct	tions)	
а				
b				
С		see in		ions)
2	Activities Test. Answer (a) and (b) below.		Yes	No
а				
	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	C:		
_	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
а		2-		
1.	trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
Ø	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	2h		
	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	ganiz	ations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust o	n Nov. 20, 1970 (expla	nin in Part VI). See
	instructions. All other Type III non-functionally integrated supporting organi	zations	must complete Section	ns A through E.
Sec	tion 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			
CO	llection of gross income or for management, conservation, or			
_ ma	aintenance 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		
Sec	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
ins	structions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
fa	actors (explain in detail in <b>Part VI</b> ):			
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,			
se	e 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		
Sec	tion 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			
en	nergency temporary reduction (see instructions).	6		

EEA

instructions).

			05.20	00000 Dave 7			
_	rt V Type III Non-Functionally Integrated 509(a)(		26-30 zations (continued)	88283 Page <b>7</b>			
	ction D - Distributions	<u> </u>		Current Year			
1	Amounts paid to supported organizations to accomplish exe	empt purposes					
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported					
	organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizat	ions				
4	Amounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval required)						
6	Other distributions (describe in Part VI). See instructions.						
7	Total annual distributions. Add lines 1 through 6.						
8	Distributions to attentive supported organizations to which the						
	(provide details in Part VI). See instructions.						
9	Distributable amount for 2018 from Section C, line 6						
10	Line 8 amount divided by Line 9 amount						
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018			
1	Distributable amount for 2018 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2018						
	(reasonable cause required - explain in Part VI). See						
	instructions.						
3	Excess distributions carryover, if any, to 2018						
a	From 2013						

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018			
(reasonable cause required - explain in Part VI). See			
instructions.			
3 Excess distributions carryover, if any, to 2018			
<b>a</b> From 2013			
<b>b</b> From 2014			
<b>c</b> From 2015			
<b>d</b> From 2016			
<b>e</b> From 2017			
f Total of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from			
Section D, line 7:			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if			
any. Subtract lines 3g and 4a from line 2. For result			
greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h			
and 4b from line 1. For result greater than zero, explain in			
Part VI. See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j			
and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
<b>b</b> Excess from 2015			
<b>c</b> Excess from 2016			
d Excess from 2017			
e Excess from 2018			

Part VI	<b>Supplemental Information.</b> Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, 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 1; 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.)
-	
_	

#### Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number 26-3088283 Represent.Us Education Fund

Organization type (check one): Filers of: Section: Form 990 or 990-EZ ∑ 501(c)( 3 ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions 

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

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

#### **Political Campaign and Lobbying Activities**

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

**Open to Public** Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

- ► Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.
  - ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

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

•	Section 501(c)(4), (5), or (6) organizations	: Complete Part III.			
Nam	e of organization			Employer	identification number
Re	present.Us Education Fund			26-308	8283
Pa	rt I-A Complete if the organ	ization is exempt under section	on 501(c) or is	a section 527 orga	nization.
1	Provide a description of the organization's	s direct and indirect political campaign a	ctivities in Part IV.	(see instructions for	
	definition of "political campaign activities"	•			
2	Political campaign activity expenditures (s	see instructions)		▶ \$	
3_	Volunteer hours for political campaign act				
Pa		ization is exempt under secti			
1	Enter the amount of any excise tax incurre				
2	Enter the amount of any excise tax incurre			·	
3	If the organization incurred a section 4955				
4a	Was a correction made?				. Yes No
b	If "Yes," describe in Part IV.				
Pa		ization is exempt under secti		ept section 501(c)(3	3).
1	Enter the amount directly expended by the				
	activities			▶ \$	
2	Enter the amount of the filing organization				
	527 exempt function activities			▶ \$	
3	Total exempt function expenditures. Add I				
	line 17b				
4	Did the filing organization file Form 1120	•			
5	Enter the names, addresses and employe		-		=
	organization made payments. For each or		0 0		
	the amount of political contributions receive			-	
	as a separate segregated fund or a politi	cal action committee (PAC). If additiona	space is needed,	provide information in Part	IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Sche	dule C (Form 990 or 990-EZ) 2018 Represent.Us	Education Fund	26-30882	83 Page 2
Pa	rt II-A Complete if the organization	is exempt under section 501(c)(3) and filed	Form 5768 (elect	ion under
	section 501(h)).			
Α	Check ► ☐ if the filing organization belongs to a	an affiliated group (and list in Part IV each affiliated group m	nember's name,	
	address, EIN, expenses, and share	of excess lobbying expenditures).		
В	Check ▶ ☐ if the filing organization checked bo	x A and "limited control" provisions apply.		
	Limits on Lobby	ring Expenditures	(a) Filing	(b) Affiliated
	(The term "expenditures" me	eans amounts paid or incurred.)	organization's totals	group totals
1a	Total lobbying expenditures to influence public op	nion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legislati	ve body (direct lobbying)	275,023	
С			275,023	
d	Other exempt purpose expenditures		2,625,859	
е	Total exempt purpose expenditures (add lines 1c a	and 1d)	2,900,882	
f	Lobbying nontaxable amount. Enter the amount from	om the following table in both		
	columns.		295,044	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
g	Grassroots nontaxable amount (enter 25% of line	1f)	73,761	
h	Subtract line 1g from line 1a. If zero or less, enter	-0		
i	Subtract line 1f from line 1c. If zero or less, enter -	0		

#### 4-Year Averaging Period Under section 501(h)

..... Yes

☐ No

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720

reporting section 4911 tax for this year?

Lobbying Expenditures During 4-Year Averaging Period									
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2015	<b>(b)</b> 2016	<b>(c)</b> 2017	<b>(d)</b> 2018	(e) Total				
2a Lobbying nontaxable amount	233,695	250,403	258,279	295,044	1,037,421				
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					1,556,132				
c Total lobbying expenditures	175,000	240,000	247,160	275,023	937,183				
d Grassroots nontaxable amount	58,424	62,601	64,570	73,761	259,356				
e Grassroots ceiling amount (150% of line 2d, column (e))					389,034				
f Grassroots lobbying expenditures									
EEA		-		Schedule C (Fo	orm 990 or 990-EZ) 2018				

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 Part II-B (election under section 501(h))

	cach "Voc." response on lines to through ti below provide in Part IV a detailed	(a)		(b)	
	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed cription of the lobbying activity.	Yes	No	Amount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?				
d	Mailings to members, legislators, or the public?				
e	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	)(5), c	or se	ction	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?			3	
	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes."				is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of				
	political expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year		2b		
С	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the				
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying				
	and political expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Prov	supplemental Information ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, I se instructions); and Part II-B, line 1. Also, complete this part for any additional information.	ines 1	and		

#### **SCHEDULE D** (Form 990)

#### **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.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

2018

Open to Public Inspection

Name	of the organization			Employer identification number
Rep	resent.Us Education Fund			26-3088283
Pa	t I Organizations Maintaining Donor Advis	sed Funds or Oth	er Similar Funds or Ac	counts.
	Complete if the organization answered "Ye	es" on Form 990, I	Part IV, line 6.	
		(a) Done	or advised funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year) .			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor adviso	ors in writing that the a	assets held in donor advised	I
	funds are the organization's property, subject to the org	anization's exclusive	legal control?	
6	Did the organization inform all grantees, donors, and do	onor advisors in writin	g that grant funds can be us	sed
	only for charitable purposes and not for the benefit of th	e donor or donor adv	isor, or for any other purpos	e
	conferring impermissible private benefit?			
Pa	t II Conservation Easements.			
	Complete if the organization answered "\	es" on Form 990,	Part IV, line 7.	
1	Purpose(s) of conservation easements held by the orga	anization (check all th	at apply).	
	Preservation of land for public use (e.g., recreation	or education)	Preservation of a histo	rically important land area
	Protection of natural habitat		Preservation of a certif	fied historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a	qualified conservation	n contribution in the form of	a conservation
	easement on the last day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
С	Number of conservation easements on a certified histor	ric structure included	in (a)	2c
d	Number of conservation easements included in (c) acqu	uired after 7/25/06, a	nd not on a	
	historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred	ed, released, extingu	shed, or terminated by the o	organization during the
	tax year ▶			
4	Number of states where property subject to conservation	on easement is locate	ed ▶	
5	Does the organization have a written policy regarding the	ne periodic monitoring	g, inspection, handling of	
	violations, and enforcement of the conservation easeme			
6	Staff and volunteer hours devoted to monitoring, inspect	ting, handling of viola	tions, and enforcing conserv	vation easements during the year
	<b>&gt;</b>			
7	Amount of expenses incurred in monitoring, inspecting,	handling of violations	s, and enforcing conservatio	n easements during the year
	<b>▶</b> \$			
8	Does each conservation easement reported on line 2(d			
9	In Part XIII, describe how the organization reports cons		•	
	balance sheet, and include, if applicable, the text of the	footnote to the organ	zation's financial statements	s that describes the
Da	organization's accounting for conservation easements.  It III Organizations Maintaining Collect	tions of Art Llis	torical Tracquires or	Other Similar Assets
Pa	Organizations Maintaining Collect Complete if the organization answered "	•	· ·	Other Similar Assets.
10	If the organization elected, as permitted under SFAS 11			ant and halance sheet
1a	works of art, historical treasures, or other similar assets			
<b>h</b>	public service, provide, in Part XIII, the text of the footnotest the organization elected as permitted under SEAS 1.1			
b	If the organization elected, as permitted under SFAS 11			
	works of art, historical treasures, or other similar assets		nion, education, or research	in rumerance or
	public service, provide the following amounts relating to			<b>▶ ¢</b>
2	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, historic			yairi, provide trie
_	following amounts required to be reported under SFAS		=	<b>▶</b> ₾
a h	A		• • • • • • • • • • • • • • • • • • • •	<b>&gt;</b> \$
U	radocio incluudu III I VIIII daV. Fall A			

Pai	rt III Organizations Maintaining Colle	ctions of Art	t, Historical	Treasures, o	or Othe	r Similar Asse	ets (coi	ntinue	;d)
3	Using the organization's acquisition, accession, and of	her records, che	eck any of the fol	lowing that are a	a significa	nt use of its			
	collection items (check all that apply):								
а	Public exhibition	<b>d</b> Loan	or exchange pro	ograms					
b	Scholarly research	e Other	·						
С	Preservation for future generations								
4	Provide a description of the organization's collections	and explain how	they further the	organization's	exempt pu	rpose in Part			
	XIII.								
5	During the year, did the organization solicit or receive	donations of art,	historical treasu	ires, or other sin	nilar				
	assets to be sold to raise funds rather than to be main	ntained as part o	f the organizatio	n's collection?			. 🗆 Y	Yes [	No
Pai	rt IV Escrow and Custodial Arrangeme	ents.							
	Complete if the organization answe 990, Part X, line 21.	red "Yes" on	Form 990, P	art IV, line 9	, or repo	orted an amoui	nt on Fo	orm	
1a	Is the organization an agent, trustee, custodian or other	r intermediary fo	or contributions of	or other assets n	ot				
	included on Form 990, Part X?						🗌 Y	Yes [	_ No
b	If "Yes," explain the arrangement in Part XIII and com	plete the followin	ig table:						
						Amo	ount		
С	Beginning balance				1c				
d	Additions during the year				1d				
е	Distributions during the year				1e				
f	Ending balance				1f				
2a	Did the organization include an amount on Form 990,	Part X, line 21, fo	or escrow or cus	stodial account li	ability?		🗌 ነ	res [	No
b	If "Yes," explain the arrangement in Part XIII. Check h	ere if the explan	ation has been p	provided on Part	XIII .			[	
Pai	rt V Endowment Funds.								
	Complete if the organization answe	red "Yes" on	Form 990, P	art IV, line 1	0.				
	·	Current year	(b) Prior year	(c) Two year		(d) Three years back	(e) Fou	ır years b	ack
1a	Beginning of year balance		• • • • • • • • • • • • • • • • • • • •			•			
b	Contributions								
С	Net investment earnings, gains, and								
	losses								
d	Grants or scholarships								
e	Other expenditures for facilities and								
·	programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the current year e	and halance (line	1a column (a)	held as:					
a	Board designated or quasi-endowment	`	, rg, coluini (a))	ricia as.					
b	Permanent endowment > %								
C	Temporarily restricted endowment	%							
C	The percentages on lines 2a, 2b, and 2c should equal								
20			that are hold an	d administered fo	or the				
3a	Are there endowment funds not in the possession of torganization by:	ne organization	inal are nelu and	a administered it	Ji li le			Yes	No
	<b>4</b> 0 - 1 - 1 - 1						20(i)	162	No
	(7						3a(i)		
L	(.,						3a(ii)		
b	If "Yes" on line 3a(ii), are the related organizations list	•					3b		
4 Do:	Describe in Part XIII the intended uses of the organization	ation's endowme	ent tunas.						
Pai	rt VI Land, Buildings, and Equipment.	rad "Vaa" aa	Corm 000 D	lort IV/ line 1	10 000	Form 000 Do	rt V lin	o 10	
	Complete if the organization answe								
	Description of property	(a) Cost or other	' '	ost or other basis	١,,,	ccumulated	( <b>d</b> ) Boo	ık value	
	Lord	(investment	''	(other)	uel	preciation			
1a	Land								
b	Buildings								
С	Leasehold improvements			40,452		40,027			425
d	Equipment			69,374		59,323		10,0	)51
<u>e</u>	Other								
Tota	<ol> <li>Add lines 1a through 1e. (Column (d) must equal Fe</li> </ol>	orm 990, Part X,	column (B), line	e 10c.)		▶		10,4	176

Schedule D (Forn		ducation Fund	26-3088283	Page 3
Part VII	Investments - Other Securities.	d "Voe" on Form 000 De	et IV line 44h Coo Form 000 Bort	V line 40
	Complete if the organization answere			X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
(1) Financial	derivatives			
(2) Closely-h	neld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D) (E)				
(F)				
(G)				
(H)				
	b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments - Program Related.			
	Complete if the organization answere	d "Yes" on Form 990, Pa	rt IV, line 11c. See Form 990, Part 2	X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation:	
			Cost or end-of-year market value	
(1)				
(2)				
(3) (4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.		4. N. J. J. 44. J. O. J. France 200. Dog 1.	V P 45
	Complete if the organization answere			
(1) Choff	(a) D Advances	Description	(b)	) Book value 200
(2)	Advances			200
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9) Table (0 a)	(b) word a well Frame 2000 Barry V and (B) Frame 4	<u> </u>		
Part X	nn (b) must equal Form 990, Part X, col. (B) line 15 Other Liabilities.	5.)		200
raitA	Complete if the organization answere	d "Yes" on Form 990 Pai	rt IV line 11e or 11f See Form 990	Part X
	line 25.	a 100 on 1 on 1 ooo, 1 a	1117, 1110 110 01 1111 000 1 01111 000	, 1 (117),
1.	(a) Description of liability	(b) Book value		
(1) Federal	income taxes			
(2) Due t	co Affiliate	18,972		
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				

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

18,972

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶

Pai	Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return.	•
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	3,022,599
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:  Net unrealized gains (losses) on investments		
a b	Net unrealized gains (losses) on investments	-	
C	Recoveries of prior year grants	-	
d	Other (Describe in Part XIII.)	-	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	3,022,599
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	3,022,599
Par	Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Retu	ırn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	2,900,882
2 a	Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities		
a b	Prior year adjustments	-	
C	Other losses	-	
d	Other (Describe in Part XIII.)	-	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	2,900,882
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	2,900,882
	rt XIII Supplemental Information.		
	ide 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; Pa	rt X, line	
2; Pa	art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.		

EEA Schedule D (Form 990) 2018

#### **SCHEDULE I** (Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization

# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

OMB No. 1545-0047 2018

Open to Public Inspection

Employer identification number

Represent.Us	s Education Fund						26-3088283	
Part I Ge	eneral Information or	n Grants and Ass	istance				<u>'</u>	
the selection	rganization maintain records on criteria used to award the n Part IV the organization's p	grants or assistance?						🛚 Yes 🗌 I
Part II Gr	ants and Other Assista	ance to Domestic C	rganizations and Do	mestic Governmen	ts. Complete if the	organization answered	"Yes" on Form 99	0,
Pa	art IV, line 21, for any rec	cipient that received	more than \$5,000. Pa	rt II can be duplicated	d if additional space	is needed.		
	nd address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of gran
(1)Represent	.Us							Public
296 Nonotucl	k Street							Education an
Florence, M	A 01062	26-2369596	501(c)(4)	1,260,131				other
(2)								
(3)								
(4)								
-								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
-								
	number of section 501(c)(3)	-					<del>-</del>	

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Supplemental Information. Pr	rovide the information re	equired in Part I, li	ne 2; Part III, colum	n (b); and any other addi	tional information.

#### **SCHEDULE J** (Form 990)

Department of the Treasury Internal Revenue Service

#### **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** 

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ► Attach to Form 990.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 2018

Open to Public Inspection

Name of the organization Represent.Us Education Fund Employer identification number

26-3088283

Pa	rt I   Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form			
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use			
	☐ Travel for companions ☐ Payments for business use of personal residence			
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (such as maid, chauffeur, chef)			
	Discretionary speriding account Personal services (such as maid, chauneur, cher)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	☐ Compensation committee ☐ ☐ Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations  Approval by the board or compensation committee			
	Approval by the board of compensation committee			
	During the year did any pages listed on Farm 200 Part VIII Coating A line 45 with respect to the filling			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а		4a		X
b		4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:			
а		5a		Х
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
·	compensation contingent on the net earnings of:			
а		6a		Х
	Any related organization?			X
D		6b		Λ
	If "Yes" on line 6a or 6b, describe in Part III.			
_	E			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
	payments not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

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

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

Note: The sum of columns (B)(i) (iii) for c		W-2 and/or 1099-MI		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
Joshua M Silver (i)	155,062	0	0	4,800	15,455	175,317	148,470
1 Chief Executive Offic (ii)			0	0	0	0	0
(i)							
2 (ii)							
(i)							
3 (ii)							
(i)							
4 (ii)							
(i)							
5 (ii)							
(i)							
6 (ii)							
(i)							
7 (ii)							
(i)							
8 (ii)							
(i)							
9 (ii)							
(i)							
10 (ii)							
(i)							
11 (ii)							
(i)							
12 (ii)							
(i)							
13 (ii)							
(i)							
14 (ii)							
(i)							
15 (ii)							
(i)							
16 (ii)							

EEA Schedule J (Form 990) 2018

#### **SCHEDULE M** (Form 990)

#### **Noncash Contributions**

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990.

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

Employer identification number

Represent.Us Education Fund 26-3088283 Part I Types of Property (c) (b) (d) (a) Noncash contribution Check if Number of contributions or Method of determining amounts reported on items contributed applicable noncash contribution amounts Form 990, Part VIII, line 1g 1 Art - Works of art . . . . . . . Art - Historical treasures . . . . 2 3 Art - Fractional interests . . . . 4 Books and publications . . . . . 5 Clothing and household goods . . . . . . . . . . . . . . . 6 Cars and other vehicles .... 7 Boats and planes . . . . . . . Intellectual property . . . . . . 8 Securities - Publicly traded. . . . х 29,346 Fair Market Value Securities - Closely held stock . . 10 Securities - Partnership, LLC, 11 or trust interests . . . . . . . 12 Securities - Miscellaneous . . . 13 Qualified conservation contribution - Historic structures ...... Qualified conservation 14 contribution - Other . . . . . . Real estate - Residential . . . . 15 Real estate - Commercial . . . . 16 Real estate - Other . . . . . . 17 18 Collectibles . . . . . . . . . . . 19 Food inventory . . . . . . . . . 20 Drugs and medical supplies . . . 21 Taxidermy . . . . . . . . . . . . 22 Historical artifacts . . . . . . 23 Scientific specimens . . . . . . Archeological artifacts . . . . . 24 25 Other ►( 26 27 Other ►( Other ►( 28 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 ....... 29 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 isn't required to be used for exempt purposes for the entire holding period? 30a If "Yes," describe the arrangement in Part II. b Does the organization have a gift acceptance policy that requires the review of any nonstandard 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, 33

describe in Part II.

#### SCHEDULE O (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury
Internal Revenue Service
Name of the organization

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

Represent.Us Education Fund 26-3088283 01. Committee meeting documentation (Part VI, line 8b) Currently there are not any committees that have authority to act on behalf of the governing body. If the organization sets up committees to act on behalf of the governing body it will keep contemporaneous minutes of the meetings held. 02. Form 990 governing body review (Part VI, line 11) Form 990 is drafted by the Organization's independent auditors, the 990 is reviewed by the Chief Operating Officer then is submitted to the governing board for approval before filing. 03. Conflict of interest policy compliance (Part VI, line 12c) Board Members are required to annually disclose any potential conflicts. If a member of the Board is determined to have a potential conflict they are prohibited from voting on such matters. 04. CEO, executive director, top management comp (Part VI, line 15a) The Board will negotiate with the CEO with respect to the approriate salary. The salary is based on annual performance review, and benchmarks of other similar organizations. 05. Other officer or key employee compensation (Part VI, line 15b Other key employees salaries are reviewed by the CEO based on a work plan subject to approval of the Board. The process is driven by the budget and approved by the Board. 06. Governing documents, etc, available to public (Part VI, line 19)

Financial Statements are made available to the public upon request on a case by case

### SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

(4)

(5)

#### **Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047 **2018** 

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

▶ Attach to Form 990.

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

Open to Public Inspection

Employer identification number

26-3088283 Represent.Us Education Fund Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I (a)
Name, address, and EIN (if applicable) of disregarded entity (c) Legal dom. (state or foreign country) (f) Direct controlling (b) (d) (e) Primary activity Total income End-of-year assets entity (1) (2) (3)

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g) Sec. 512(b)(13)
Name, address, and EIN of related organization	Primary activity	Legal dom. (state	Exempt Code section	Public charity status	Direct controlling	controlled entity?
		or foreign country)		(if section 501(c)(3))	entity	Yes No
(1) Represent.Us, 26-2369596						
296 Nonotuck Street	Social Welfare and					
Florence, MA 01062	Advocacy	MA	501(c)(4)		N/A	X
(2)						
(3)						
(4)						
,,						
(5)						

	because it had one or more relate  (a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)		(j)	(k)
	Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of- year assets	Disproportional allocations?	amount in b of Schedul (Form 10	oox 20 n e K-1 065)	Gen. or nanaging partner?	g owner ? ship
(1)					sections 512-514)			103 14			<u>C3 14</u>	
(2)												
(3)												
(4)												
(5)												
Part IV	Identification of Related Organiline 34, because it had one or mo							d "Yes	s" on Form	990, Pa	art IV	',
	(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	,	Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp or trust)	(f) Share of to income		<b>(g)</b> Share of d-of-year assets	(h) Percentage ownership	Sec.5	(i) 12(b)(13) ntrolled ntity?
(1)											Yes	No
(O)												
(2)												
(3)												
(4)												

No

Yes

## Part V 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.

1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed	I in Parts II-IV?						
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1a		Х		
b	Gift, grant, or capital contribution to related organization(s)			1b	Χ			
С	Gift, grant, or capital contribution from related organization(s)			1c		Х		
d	Loans or loan guarantees to or for related organization(s)			1d		Х		
е	Loans or loan guarantees by related organization(s)			1e	Χ			
f	Dividends from related organization(s)			1f		Х		
g	Sale of assets to related organization(s)			1g		X		
h	Purchase of assets from related organization(s)			1h		X		
i	Exchange of assets with related organization(s)			1i		Х		
	Lease of facilities, equipment, or other assets to related organization(s)			1j		Х		
•				-				
k	Lease of facilities, equipment, or other assets from related organization(s)			1k		Х		
I Performance of services or membership or fundraising solicitations for related organization(s)								
	Performance of services or membership or fundraising solicitations by related organization(s)			1m		X		
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1n	X			
	Sharing of paid employees with related organization(s)			10	X			
•					21			
n	Reimbursement paid to related organization(s) for expenses			1p		Х		
-	Reimbursement paid by related organization(s) for expenses			1q	Х	- 2\( \)		
ч	Trainbulgation paid by related organization(s) for expenses			14	Λ_			
r	Other transfer of cash or property to related organization(s)			1r		Х		
	Other transfer of cash or property from related organization(s)			1s		X		
	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered r			13		Λ		
-	(a) (b)	(c)	(d)					
	Name of related organization Transaction	Amount involved	Method of determining		involvec	4		
	type (a-s)	Amount involved	Wethod of determining	amount	iiivoivec	4		
(1)	Represent.Us b	1,260,131	Actual					
(')	, -							
(2)	Represent.Us e	18,972	Actual					
(-)	, -	-						
(3)	Represent.Us q	1,864,171	Actual and Tim	nesh	ets			
(0)	, <del>-</del>							
(4)								
۱٠/								
(5)								
ν-/								
(6)								
(")		1	1					

EEA

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)	(b)	(c)	(d)	(e) Are all partners section 501(c)(3) organizations?  Yes No		(f)	(g)	(h) Disproportionate allocations? Yes No		(i)	(	j) (k)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Predominant income (related, unrelated, excluded from tax under sections 512-514)			Share of total income	Share of end-of-year assets			Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gen. or % own partner? ship	
(1)				162	NO			162	NO		162	NO
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
(11)												
(12)												
	1	1	l				I			Cabadula F	/Farm	000) 0040

	upplemental Information.
Pr	rovide additional information for responses to questions on Schedule R. See instructions.
01. Expla	nation of information on Schedule R
Transactions	with Related Organizations Represent.Us EIN 26-2369596
1b) Total gra	ants to related organization \$1,260,631, of which, \$175,426 were due as
of 12/31/18.	
le) Organiza	tion owed related organization \$18,972 for shared costs as of 12/31/18.
1n, 10, 1g)	\$1,864,171 of shared expenses based on allocation of time sheets.