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Department of the Treasury

EXTENDED TO NOVEMBER 15, 2018

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

▶ 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

Internal Revenue Service For the 2017 calendar year, or tax year beginning and ending D Employer identification number Check if applicable C Name of organization Address change THE MEDIA MOBILIZING PROJECT Name change 26-0307123 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ 215-821-9632 4534 BALTIMORE AVE. termin-ated 728,667. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended return PHILADELPHIA, PA 19143 H(a) Is this a group return Applica F Name and address of principal officer TODD WOLFSON Yes X No for subordinates? pending SAME AS C ABOVE JYes ∖ H(b) Are all subordinates included? Tax-exempt status X 501(c)(3) ____ 501(c) () (insert no.) If "No," attach a list (see instructions) J Website: ► WWW.MEDIAMOBILIZING.ORG H(c) Group exemption number K Form of organization X Corporation Year of formation: 2007 M State of legal domicile PA Part I | Summary 1 Briefly describe the organization's mission or most significant activities THE MEDIA MOBILIZING PROJECT'S Activities & Governance MISSION IS TO INCREASE MEDIA/TECHNOLOGICAL LITERACY AND COMPETENCY oxdot if the organization discontinued its operations or disposed of more than 25% of its net assets Check this box 13 Number of voting members of the governing body (Part VI, line 1a) 13 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 5 50 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 593,425 670,567. Contributions and grants (Part VIII, line 1h) 45,425 58,000. Program service revenue (Part VIII, line 2g) 0. 0. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 575. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 100. 639 425. 728,667. Total revenue - add lines 8 through 11 (must equal Part VIII, co Ο. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 399,328. 537,654. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 b Total fundraising expenses (Part IX, column (D), line 25) 202,799. 237,260. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 602,127. 774,914. 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 37,298. <46,247.>Revenue less expenses Subtract line 18 from line 12 Beginning of Current Year **End of Year** 358,696. 338,193. 20 Total assets (Part X, line 16) .308 30,052. 21 Total liabilities (Part X, line 26) ξĔ 354,388. 308.141 Net assets or fund balances Subtract line 21 from line 20 | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Signature of officer Sign BRYAN MERCER, EXECUTIVE DIRECTOR Here Type or print name and title Print/Type preparer's name Paid P00162638 KENNETH E. LEHRER, CPA self-employed 06-1832487 Preparer Firm's name KENNETH E. LEHRER, CPA, LLC Firm's EIN Firm's address ▶ 730 EAST RAILROAD AVENUE, Use Only SUITE

LHA For Paperwork Reduction Act Notice, see the separate instructions.

BRYN MAWR, PA 19010

May the IRS discuss this return with the preparer shown above? (see instructions)

Form 990 (2017)

X Yes

Phone no. 610 - 581 - 8850

orm	990 (2017) THE MEDIA MOBILIZING PROJECT	26-0307123	Page 2
Pa	rt.III 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		
	THE MEDIA MOBILIZING PROJECT'S MISSION IS TO INCREASE		
	MEDIA/TECHNOLOGICAL LITERACY AND COMPETENCY IN LOW-INCOM	ME COMMUNITI	ES
	IN PHILADELPHIA.		
_			
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	Yes	X No
	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?	Yes	X No
-	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 other		
	revenue, if any, for each program service reported		
 4а	(Code) (Expenses \$. 58.	100.)
	(Cocco / Lexpenses \$ / Revenue	•• <u></u>	
	MEDIA MOBILIZING PROJECT FOCUSED ON PROGRAMS RANGING FRO	M SHORT	
	DOCUMENTARY PRODUCTION TO USING MEDIA STRATEGIES IN COMM		TGNS
	FOR EDUCATION AND AFFORDABLE INTERNET ACCESS.	TOTAL TI CIMILIA	10110
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4b	(Code) (Expenses \$	ie\$	
			
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		_ 	
4c	(Code) (Expenses \$) (Revenue	ie \$)
		<u> </u>	_
	,		
4d	Other program services (Describe in Schedule O.)		
74	(Expenses \$ including grants of \$) (Revenue \$	١	•
4e	Total program service expenses 589,721.		
<u></u>		Form 9	90 (2017)

Form 990 (2017) THE MEDIA MOBILIZING PROJECT
Part.IV Checklist of Required Schedules

1 Is the organization described in section SDIC(X) or 4947(a)(1) (other than a private foundation)? If ''Res', Complete Scheduke B, Scheduke B, Scheduke of Contributors? 2 Is the organization required to complete Scheduke B, Scheduke of Contributors? 3 Did the organization engage in direct or indirect objective amaging activities, or have a section 501(n) electron in effect during the tax year? If ''Yes', complete Scheduke C, Part II 3 X X Section 501(c)(3) organizations. On the organization engage in lobbying activities, or have a section 501(n) electron in effect during the tax year? If 'Yes', complete Scheduke C, Part III 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Reviewa Proceeding #917 If 'Yes', complete Scheduke C, Part III 6 Did the organization analysis of interest and analysis of the organization and analysis of the organization reviewed funds or any semilar funds or accounts? If 'Yes', complete Scheduke D, Part II 7 Did the organization receives or hold a conservation easement, including easements to preserve open space. 8 The environment, instruction and reasy, or hatomatic structures? If 'Yes', complete Scheduke D, Part II 9 Did the organization maintain any disconsistive of art, instructional researce, in the environment, instruction and reasy, or hatomatic analysis of a structures? If 'Yes', complete Scheduke D, Part II 9 Did the organization organization and the Tart X, line 21, for escrow or custodial account liability, sarve as a custodian for amounts on tisted in Part X, line 10				Yes	No
2 Is the organization required to complete Schedule (7, Cantibutors) 3 Is the organization engage in direct or indirect or public office? If "Yes," complete Schedule (7, Part I) 4 Section 501(k)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule (7, Part II 5 Is the organization as extend 501(k)(4), 501(k)(5), or 501(k)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure (8, Part III 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advised on the distribution or investment of amounts in such finds or accounts? If "Yes," complete Schedule (9, Part II) 7 Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule (9, Part II) 8 Did the organization receive or hold a conservation easement, including easements to presence open space, the environment, historic laind areas, or historic structures? If "Yes," complete Schedule 0, Part III 9 Did the organization report an amount in Part X, line 21, for escrive or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debit management, credit repair, or debt negotiation services? If "Yes," complete Schedule 0, Part II 10 Did the organization report an amount for leading organization, hold assets in temporarily restricted endowments, permanent endowments, or quasiendowners? If "Yes," complete Schedule 0, Part VI 11 Did the organization report an amount for leading, and equipment in Part X, line 10? If "Yes," complete Schedule 0, Part VI 12 Did the organization report an amount for leading, and equipment in Part X, line 10? If "Yes," complete Schedule 0, Part VI 13 Did the organization report an amount for leading the secondary organization or separate or consolidated inancial statements for the tax year? 13 D	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3 Dd the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 5 Is the organization a section 501(c)(4), 501(c)(6),		If "Yes," complete Schedule A	1_		
public office? If *Yes,** complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If *Yes,** complete Schedule C, Part III 1 is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6), organization that receives membership dues, assessments, or amiliar amounts as defined in Revenue Procedure 98-197 If *Yes,** complete Schedule C, Part III 6 Od the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such thad so raccounts? If *Yes,** complete Schedule D, Part III 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic artisturties? If *Yes,** complete Schedule D, Part III 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If *Yes,** complete Schedule D, Part III 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If *Yes,** complete Schedule D, Part VIII 10 Did the organization report an amount for Iran by the following questions is *Yes,** then complete Schedule D, Part VIII 11 Did the organization report an amount for fland, buildings, and equipment in Part X, line 10? If *Yes,** complete Schedule D, Part VIII 11 Did the organization report an amount for fland, buildings, and equipment in Part X, line 10? If *Yes,** complete Schedule D, Part XIII 12 Did the organization report an amount for fland, buildings, and equipment in Part X, line 10? If *Yes,** complete Schedule D, Part XIII 11 Did the organization of school parts, complete Schedule D, Part XIII 12 Did the organization of school parts, comple	2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	_X_	
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(i) election in effect during the tax year? If "Yes," complete Schedule C, Part III 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 6 Did the organization review or hold a conservation easement, including assements to preserve open space, the environment, historic land areas, or historic structure? If "Yes," complete Schedule D, Part II 7 Did the organization member or hold a conservation easement, including assements to preserve open space, the environment, historic land areas, or historic structure? If "Yes," complete Schedule D, Part III 8 Did the organization manual in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 9 Did the organization and itself in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V 10 Did the organization report an amount for liand, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 11 If the organization report an amount for investments or other securities in Part X, line 10? If "Yes," complete Schedule D, Part V 11 Did the organization report an amount for or investments or other securities in Part X, line 12 If the schedule D, Part X 12 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X II 12 Did the organization report an amount for other assets in Part	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
during the tax year? If Yes," complete Schedule C, Part I I Is the organization a section 501(s)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-18? If Yes," complete Schedule C, Part II I Did the organization maintain any donor advised funds or any smilar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If Yes," complete Schedule D, Part I I Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic rail areas, or historic structures If Yes," complete Schedule D, Part IV I Did the organization maintain collections of works of art, historical treasures, or other similar assets? If Yes," complete Schedule D, Part IV I Did the organization maintain collections of works of art, historical treasures, or other similar assets? If Yes," complete Schedule D, Part IV I Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If Yes, are provide redit counseling, debt management, credit repair, or debt negotiation services? If Yes, are provide redit counseling, debt management, credit repair, or debt negotiation services? If Yes, as applicable D, Part IV II the organization report an amount for land, buildings, and equipment in Part X, line 10? If Yes, complete Schedule D, Part IV II If the organization report an amount for investments - other securities in Part X, line 10? If Yes, complete Schedule D, Part IV II Did the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If Yes, complete Schedule D, Part X II I		public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
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similar amounts as defined in Revenue Procedure 98-189 // "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization receive or hold a conservation easement, including easements to preserve open space. The environment, instonic laid areas, or historic structures? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization directly or through a related organization, hold assets in temporanily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part IV Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part IVI Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part IVII Did the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IVII Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IVII Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IVIII Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part X IVIII Did the organization report an amount for oth			4_	-	X
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amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization, develop a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part VI, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII d Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII d Did the organization report an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII d Did the organization report an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X III Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X 110 W X 1110 W X 1111 W X Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X IIII W X 112a W IIII W X 113 Is the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X IIII W X 114 Did the organization included in consolidated, independent audited financial statements for the tax y	8		8		х
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complete Schedule G, Part III			18		<u>X</u> _
	19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
		complete Schedule G, Part III			

Part IV Checklist of Required Schedules (continued)

	and officer to the quite of the		Yes	No
202	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	1	Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
00	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
23				
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	23		X
04-	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
24a				l
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	24a		х
	Schedule K. If "No", go to line 25a	24b		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	242		
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			v
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_X_
b	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	l		77
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			47
	complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	İ		
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)	-		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	-	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		ļ	
	contributions? If "Yes," complete Schedule M	30	ļ	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31	ļ	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	ļ		
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33_		_X_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	<u> </u>	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	Ī		
	If "Yes," complete Schedule R, Part V, line 2	36	<u></u>	X
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	L_	_ X_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note, All Form 990 filers are required to complete Schedule O	38	X	
		Form	990	(2017)

Form 990 (2017) THE MEDIA MOBILIZING PROJECT Part.V Statements Regarding Other IRS Filings and Tax Compliance

Effect the number reported in Box 3 of Form 1096. Enter 0-if not applicable Effect the number of Forms W 25 included in line 1a. Enter 0-if not applicable Colf the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambing) winnings to prize winners? Effect of the calendar year ending with or within the year covered by this return. If life for the calendar year ending with or within the year covered by this return. If life for the calendar year ending with or within the year covered by this return. If life for the calendar year ending with or within the year covered by this return. If life for the calendar year ending with or within the year covered by this return. If life for the calendar year ending with or within the year covered by this return. If life is the simple of the calendar year ending with or within the year covered by this return. If life is the simple of the calendar year ending with or within the year covered by this return. If life is the simple of the calendar year ending with or within the year covered by this return. If life or each or the simple of the calendar year ending within the requirements of the calendar year, did the organization have an interest in, or a signiture or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accountry (such as a bank account, securities account, or other financial accountry (such as a bank account, securities account, or other financial accountry (such as a bank account, securities account, or other financial accountry (such as a bank account, securities account or other financial accountry (such as a bank account, securities account or other financial accountry (such as a bank accountry accounts account or other financial accountry (such as a bank account, securities account or other financial accountry (such as a bank accountry accounts account to the financial accountry (such as a bank accountry accountry (suc		Check if Schedule O contains a response or note to any line in this Part V			بيا
be Enter the number of Forms W.25 included in line 1a. Enter 0. In dia applicable 10. Old the organization congly with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 10. 1. 22. Enter the number of employees reported on Form W.3. Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return. 1.3 1. 3. It is least one is reported on line 2A, did the organization field in equipal federal employment tax returns? 2b. X. 3. Note, if the sum of fines 1 and 750, you may be required to 6-ride feel eminitations in Schedule O 3. X. 3. It is with organization have unrelated business gross income of \$1,000 or more during the year? 3a. X. 3. It is with organization and the organization of \$1,000 or more during the year? 3a. X. 3. It is with organization and the organization of \$1,000 or more during the year? 3a. X. 3. It is with organization and the organization of \$1,000 or more during the year? 3a. X. 3. It is with organization and the organization of \$1,000 or more during the year? 3a. X. 3. It is with the organization organization of the organization and scoourity yellow as a bank account, secretive account, or other financial accounts (FBAR). X. 3. It is with the organization appropriate that school organization and party to a prohibited tax sheller transaction? See instructions of finding requirements for FincENForm 114, Report of Foreign Bank and Financial Accounts (FBAR). See instructions of finding requirements for FincENForm 114, Report of Foreign Bank and Financial Accounts (FBAR). See X. Did any transpiration for finding requirements for FincENForm 114, Report of Foreign Bank and Financial Accounts (FBAR). See X. Did any transpiration foreign and party that was or a party to a prohibited tax sheller transaction? See X. Did any transpiration foreign and transpiration foreign and transpiration foreign an				Yes	No
to the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambing) winnings to prave winners? 2 Einter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return 1 It all east one is reported on line 2, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2 as i greater than 250, you may be required to e-five (see instructions) 3 Did the organization have unretated business gross income of \$1,000 or more dumpt the year? 3 At any time during the calendar year, did the organization have an explanation in Schedule O 5 If "Yes," has if itsed a form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 6 If "Yes," an explanation in Schedule or the sum of the year? 8 At any time the harms of the foreign country. 9 See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5 Was the organization of refing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5 Was the organization of the organization that in was or is a party to a prohibeted tax shefler transaction? 5 If "Yes," to line 5 a of 5b, did the organization file Form 8886-T? 6 If "Yes," to line 5 a of 5b, did the organization file Form 8886-T? 6 If "Yes," to line 5 a of 5b, did the organization file Form 8886-T? 6 If "Yes," to line 5 a of 5b, did the organization file Form 8886-T? 6 If "Yes," to line 5 a of 5b, did the organization file Form 8886-T? 6 If "Yes," to line 5 a of 5b, did the organization file form 889 as required to the Form 8882-T. 9 If "Yes," did the organization end year of the wave of the popers of the organization solicit and any contributions that were not tax deductible? 9 If "Yes," indicate the number of Forms 8282 filed duming the year. 9 If the organization received a contribution of care	1a				
(gambling) winnings to prize winners? 2	b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
28 Enter the number of employees reported on Form W.3, Transmittat of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3 Did the organization have unrelated business gross income of \$1,000 or more dumpt the year? 3 A Tan yit me during the calendar year, did the organization have an explanation in Schedule O 3 B If "Yes," has if filed a form 990-T for this year? If "No," to file 3b, provide an explanation in Schedule O 4 A Tan yit me 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. b If "Yes," and the name of the foreign country. b If "Yes," explained party notify the organization that was or is a party to a prohibeted tax shefter transaction? c If "Yes," to line 5a or 5b, did the organization that was or is a party to a prohibeted tax shefter transaction? b If "Yes," to line 5a or 5b, did the organization that was or is a party to a prohibeted tax shefter transaction? c If "Yes," to line 5a or 5b, did the organization that was or is a party to a prohibeted tax shefter transaction? b If "Yes," and did programization more than a commandary greater than \$100,000, and did the organization solicid any contributions that were not tax deductible as charitable contributions? b If "Yes," and did programization more than a commandary greater than \$100,000, and did the organization solicid any contribution of cars, between the contributions or grits were not tax deductible? b If Yes," did the organization enders deductible contributions under section 170(c). b If the contributions the transpect or deductible contributions under section 170(c). c Did the organization sell-exchange, or otherwas dispose of tangible personal property for w	C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		-	
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b If a least one is reported on line 2a, did the organization file all required federal employment tax returns? Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 5a If Yes, 1 has it filed a Form 990. The this year? If 100, 10 has 3b, provide an explanation in Schedule O 5a At any time during the calendary year, did the organization have an interest in, or a significant or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 5b If 110 110 110 110 110 110 110 110 110 11	2a				
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38 bill the organization have unreliated business gross income of \$1,000 or more during the year? 49 bill Yes, "has it filled a Form 990 F for this year? If "No," to line 3b, provide an explination in Schedule O 40 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 accounts; Park 19 bill **No, "to line of the foreign country (such as a bank account, securities account, or other financial accounts; PBAR). 50 Was the organization or party to a prohibeted that sheller transaction? 51 Was the organization or party to a prohibeted that sheller transaction? 52 Was 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? 52 Was the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 53 Organizations that may receive deductible contributions under section 170(c). 54 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 55 Organizations that may receive deductible contributions under section 170(c). 56 If "Yes," did the organization notify the donor of the value of the goods or services provided? 56 Organization sele, exchange, or otherwise dispose of tangible personal property for which it was required to fee Form 8828? filed during the year 57 Organizations receive a payfunds, directly or indirectly, to pay premiums on a personal benefit contract? 58 Organization received a contribution of cash, boats, anplanes, or other vehicles, did the organization file a Form 1098 C? 59 Organization received a contribution of cars, boats, anplanes, or other vehicles, did the organization file a Form 1098 C? 79 Organization received a contribution of car	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		<u>X</u>
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	b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		000	

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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

	Check if Schedule O contains a response or note to any line in this Part VI										
<u>Sec</u>	tion A. Governing Body and Management										
					Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year	1a_	13	3		,					
	If there are material differences in voting rights among members of the governing body, or if the governing					,					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O										
b	Enter the number of voting members included in line 1a, above, who are independent	1b	13	3		1					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with		1		* ;					
	officer, director, trustee, or key employee?	•	•	2		X					
3	Did the organization delegate control over management duties customarily performed by or under the	e direc	t supervision								
	of officers, directors, or trustees, or key employees to a management company or other person?		•	3		X					
4	Did the organization make any significant changes to its governing documents since the prior Form	990 wa	s filed?	4		X					
5	Did the organization become aware during the year of a significant diversion of the organization's as			5		X					
6	Did the organization have members or stockholders?			6		X					
7a											
	more members of the governing body?			7a		X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or								
_	persons other than the governing body?			7b		Х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye	ar by th	e followina:								
а	The governing body?	- y • 1	- ·-··-······ ɔ·	8a	X						
b	Each committee with authority to act on behalf of the governing body?			8b	X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ched:	at the								
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	Code)								
					Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?			10a		X					
	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapter	s, 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 boo	ly befo	re filing the form?	11a	X						
	Describe in Schedule O the process, if any, used by the organization to review this Form 990		J								
	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	_					
b		e to con	flicts?	12b	X						
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	∕es," d	escnbe								
	in Schedule O how this was done			12c	х						
13	Did the organization have a written whistleblower policy?			13	X						
14	Did the organization have a written document retention and destruction policy?			14	X						
15	Did the process for determining compensation of the following persons include a review and approv	al by ır	dependent			1					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?										
а	The organization's CEO, Executive Director, or top management official			15a	X						
b	Other officers or key employees of the organization			15b	X						
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					ì					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	vith a		_	لـ ـــ.ا					
	taxable entity during the year?			16a		_X_					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ite its p	participation								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organical statements are safeguard to safeguard the organical statements.	nızatıo	n's								
	exempt status with respect to such arrangements?			16b							
	tion C. Disclosure			_							
17 '	List the states with which a copy of this Form 990 is required to be filed ▶PA										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Sect	ion 501(c)(3)s only)	avaılab	le						
	for public inspection. Indicate how you made these available. Check all that apply										
	Own website Another's website X Upon request Other (explain		·								
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	nflict o	of interest policy, an	d fınan	cıal						
	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 bo	oks ar	nd records 🕨								
	BRYAN MERCER - 215-821-9632										
	4534 BALTIMORE AVENUE, PHILADELPHIA, PA 19143										
				F	4 14 15 1	(0047)					

Form 990 (2017) 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

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

(A) Name and Title	(B) Average hours per week	box	not c	Pos heck ss pe	more rson	than is bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	stee or director	Institutional trustee	Officer	Key employee	Highest compensated employee		the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) ERIKA OWENS	2.00									
BOARD MEMBER		X	<u> </u>		<u> </u>			0.	0.	0
(2) YESSENIA GUTIERREZ	2.00				İ	İ	ļ		_	
BOARD MEMBER		X	_	_		ļ	<u> </u>	0.	0.	0
(3) ISSAC AMENDU EVANS	2.00		1				l			
BOARD MEMBER		X	_		<u> </u>	<u> </u>	_	0.	0.	0
(4) DAVID LOVE	2.00	∤							_	
BOARD MEMBER	2.00	X	<u> </u>	<u> </u>	\vdash			0.	0.	0
(5) SHIVAANI SELVARAJ	2.00	١,,					ŀ			
SECRETARY	2 00	X	├			┢	}	0.	0.	0
(6) AUDRA TRAYNHAM	2.00	x					ļ	0.	0.	0
BOARD MEMBER	4.00	₽	╁	╁		╁				
(7) TODD WOLFSON	4.00	X						0.	0.	0
PRESIDENT (8) JAMILA MEDLEY	2.00	1	 				 		ļ 	
BOARD MEMBER	2.00	x	ŀ					0.	0.	0
(9) SAM REED	4.00	 -	1							
TREASURER		x						0.	0.	0
(10) RENEE KOUBIADIS	2.00									
BOARD MEMBER		X					ļ	0.	0.	0
(11) KOBY MURPHY	2.00									
BOARD MEMBER		X				_		0.	0.	0
(12) CHRIS WILLIS	2.00									
BOARD MEMBER		X		<u> </u>			$oxed{oxed}$	0.	0.	0
(13) BRYAN MERCER	40.00	1	1	ĺ			1			1
EXECUTIVE DIRECTOR			<u> </u>	X	<u> </u>	_	_	47,741.	0.	0
				Ì						
		<u> </u>	<u> </u>		_	-	ļ	ļ		
									1	
		₩	<u> </u>	<u> </u>	-	\vdash	⊢		<u> </u>	
		1	l	1	1	1				
		-	1	-	-	├	⊬		 	
		+								
		<u> </u>	Щ.	<u> </u>	Ц.	1			L	Form 990 (201)
220007 44 20 47										

	(A) Name and title	(B) - Average hours per week (list any hours for related	verage urs per week st any purs for			(C) Softion —— ck more than one person is both an a director/trustee)			(D)Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)		(F) Estimated amount of other compensation from the organization and related organizations	
	· · · · · · · · · · · · · · · · · · ·	organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Богтег			ì		
								_					<u>-</u>
		,											
	·												
											-	<u></u>	
- <u></u> 1b	Sub-total Sub-total		<u> </u>					-	47,741.).		0.
	Total from continuation sheets to Part V Total (add lines 1b and 1c) Total number of individuals (including but r		ose	liste	ed al	bove	e) wł	o re	0. 47,741. eceived more than \$100).		0.
3	Did the organization list any former officer	, director, or tru	uste	e, ke	y er	nplo	yee,	or	highest compensated e	mployee on		Yes	No -
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the si and related organizations greater than \$15	um of reportab	le co	•						the organization	4	-	X
5 Sec	Did any person listed on line 1a receive or rendered to the organization? If "Yes," contion B. Independent Contractors	· ·						elat	ed organization or indivi	dual for services			х
1	Complete this table for your five highest co the organization. Report compensation for	•	-								ensatio	n from	
-	(A) Name and business	address	NO	ONE	<u> </u>				Description of s	ervices	Com	pensatio	on
				_									
				<u></u>			-				-		
						_							
2	Total number of independent contractors (\$100,000 of compensation from the organ		ot lu	mite	d to		se lis	stec	above) who received m	ore than	For	m 990 (2017)

			Check if Schedule O cont	ains a response	or note to any line				
		•	a a a a a a a a a a a a a a a a a a a	- Maryamanaharaharahan yakan da -		(A) Total revenue	(B) - Related or exempt function revenue	— (C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
nts	1 8	а	Federated campaigns	1a					
irar our			Membership dues	1b					
S, G	(С	Fundraising events	1c				•	
a ji		d	Related organizations	1d					
S,E			Government grants (contribut	ions) 1e					
r S	1	f	All other contributions, gifts, gran	ts, and					
호			similar amounts not included abor	ve 1f	670,567.				
Contributions, Gifts, Grants and Other Similar Amounts	9	g	Noncash contributions included in lines	1a-1f \$,
<u>5 5</u>	[h_	Total. Add lines 1a-1f			670,567.			
ay	2 :	a	PROGRAM INCOME		Business Code 611420	58,000.	58,000.		
Program Service Revenue		b			1		<u> </u>		
Se		С							
eve		d						<u></u>	
P. C.	(е							
٩	1	f	All other program service reve	nue			<u></u>		
		q	Total, Add lines 2a-2f		•	58,000.			
- 1	3		Investment income (including	dividends, intere	est, and				
			other similar amounts)		>				
	4		Income from investment of tax	x-exempt bond p	oroceeds 🕨				
	5		Royalties		_ _	<u> </u>			
Ì				(i) Real	(II) Personal				,
	6 8		Gross rents	100.					
	1		Less rental expenses	0.		:			
J	(Rental income or (loss)	100.		100.	100.	•	
			Net rental income or (loss) Gross amount from sales of	(i) Securities	(II) Other		_100.	· - · · · · · · · · · · · · · · · · · · ·	
	/ (a	assets other than inventory	(i) Securities	(ii) Other				
		h	Less cost or other basis						
		_	and sales expenses		1				
		c	Gain or (loss)						
			Net gain or (loss)		•	••	'-		-
ne ne			Gross income from fundraisin	g events (not					
Other Reven			including \$	of					
Re			contributions reported on line	•			ľ		
ЪĒ			Part IV, line 18	а					
ŏ			Less direct expenses	b		-			
			Net income or (loss) from fund Gross income from gaming ad			· · · · · · · · · · · · · · · · · · ·	 		
	9 (d	Part IV, line 19	a a	1				
		h	Less direct expenses	a b					
			Net income or (loss) from gam			•	,		-
			Gross sales of inventory, less	_				-	
		_	and allowances	а					
- 1	ı	b	Less cost of goods sold	b					
			Net income or (loss) from sale	s of inventory				-	
{			Miscellaneous Revenu		Business Code				
	11 :	а							
ľ	ı	b							
		С							
		d	All other revenue						
		е	Total. Add lines 11a-11d		▶].				
	12		Total revenue See instructions.		<u> </u>	728,667.	58,100.		0.

Do	Check if Schedule O contains a responsion include amounts reported on lines 6b,	(A)	(B)	(C)	(D) Fundraising
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				-
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	45 544	00 645	11 025	F 161
	trustees, and key employees	47,741.	28,645.	11,935.	7,161
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	250 525	200 856	FF F01	
	persons described in section 4958(c)(3)(B)	378,537.	322,756.	55,781.	
7	Other salaries and wages				
8	Pension plan accruals and contributions (include		j		
_	section 401(k) and 403(b) employer contributions)	62 000	30 636	23,385.	707
9	Other employee benefits	62,808.	38,636. 40,902.	6,832.	787 834
10	Payroll taxes	48,568.	40,902.	0,034.	034
11	Fees for services (non employees)				
a			·· ·		
b	_ ~	11,199.		11,199.	
C	Accounting Lobbying	11,1990			
	0.45.				<u> </u>
e f	Investment management fees				"
g					· · · · · · · · · · · · · · · · · · ·
9	column (A) amount, list line 11g expenses on Sch 0	66,009.	66,009.		
12	Advertising and promotion	0070031	3070031	· ·	
13	Office expenses	15,879.	4,011.	11,697.	171
14	Information technology				
15	Royalties				
16	Occupancy	36,384.	16,078.	20,306.	
17	Travel	16,412.	13,147.	3,265.	
18	Payments of travel or entertainment expenses				
-	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	15,909.	9,643.	6,156.	110
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,976.		1,976.	
23	Insurance	4,457.		4,457.	· · · · · · · · · · · · · · · · · · ·
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule O.)				
а	PROGRAM EXPENSES	39,510.	39,510.		
b	MISCELLANEOUS	5,985.	4,727.	1,208.	50
С	TELEPHONE AND COMMUNICA	5,613.	563.	5,050.	
d	PAYROLL SERVICE	3,277.	1,128.	2,149.	
е	All other expenses	14,650.	3,966.	5,784.	4,900
25	Total functional expenses Add lines 1 through 24e	774,914.	589,721.	171,180.	14,013
26	Joint costs Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	Check here If following SOP 98-2 (ASC 958-720)	1			

Form 990 (2017)
Part.X Balance Sheet

<u>t.X</u>	Balance Sheet		
	Check if Schedule O contains a response or note to any line in this Part >	X	
		(A) (B) Beginning of year End of year	
1	Cash - non-interest-bearing	179,181. 1 92,93	11
2	Savings and temporary cash investments	2	
3		168,524. 3 213,09	53
4	Accounts receivable, net	800. 4 12,1	50
5	Loans and other receivables from current and former officers, directors,		
	trustees, key employees, and highest compensated employees. Complet	ete	
	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 contri	ributing	
		n L 6	
7		7	
8	Inventories for sale or use	8	
9	Prepaid expenses and deferred charges	4,033. 9 8,0	10
10a			
		, 363.	
b	Less accumulated depreciation 10b 35,	4,158. 10c 10,0	69
11		11	
12	Investments - other securities See Part IV, line 11	12	
		13	
14	· · · · · · · · · · · · · · · · · · ·	14	
15	-	2,000. 15 2,0	00
16		358,696. 16 338,1	93
17	Accounts payable and accrued expenses	4,308. 17 30,0	52
18	Grants payable	18	
19	Deferred revenue	19	
20	Tax-exempt bond liabilities	20	
21	Escrow or custodial account liability Complete Part IV of Schedule D	21	
22	Loans and other payables to current and former officers, directors, truste	tees,	
	key employees, highest compensated employees, and disqualified perso	ons	
	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	X of	
	Schedule D	25	
26	Total liabilities. Add lines 17 through 25	4,308. 26 30,0	<u>52</u>
	Organizations that follow SFAS 117 (ASC 958), check here ▶ X	and	
	complete lines 27 through 29, and lines 33 and 34.		
27	Unrestricted net assets		
28	Temporarily restricted net assets	421,026. 28 295,0	<u>53</u>
29	Permanently restricted net assets		
	Organizations that do not follow SFAS 117 (ASC 958), check here	▶ └	
	and complete lines 30 through 34.		
30	Capital stock or trust principal, or current funds	30	
31	Paid in or capital surplus, or land, building, or equipment fund	31	
20	Retained earnings, endowment, accumulated income, or other funds	32	
32			4 4
33	Total net assets or fund balances	354,388. 33 308,1 358,696. 34 338,1	
	2 3 4 5 5 6 6 7 8 9 10a b 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30	Check if Schedule O contains a response or note to any line in this Part Cash - non-interest-bearing Savings and temporary cash investments Pledges and grants receivable, net Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Completer Part II of Schedule L Loans and other receivables from other disqualified persons (as defined section 4958f(f(1)), persons described in section 4958f(c)(3)(E), and contemployers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instr). Complete Part II of Schedule D Prepaid expenses and deferred charges Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment cost or other basis Complete Part IV of Schedule D Less accumulated depreciation Investments - publicity traded securities Investments - other securities See Part IV, line 11 Investments - program-related See Part IV, line 11 Interpolity assets Other assets See Part IV, line 11 Total assets, Add lines 1 through 15 (must equal line 34) Accounts payable and accrued expenses Grants payable Deferred revenue Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trus key employees, highest compensated employees, and disqualified personal complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties Ofther liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here Total liabilities. Add lines 10 through 34. Capital stock o	Check if Schedule C contains a response or note to any line in this Part X Cash - non-interest bearing 179, 181. 1 92, 9

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(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.

OMB No 1545-0047

2017

Open to Public

Name of the organization

THE MEDIA MORILIZING PROJECT

Employer identification number

				DIVING PROOF				0 0307123					
Pa	rt I	Reason for Public (Charity Status (A	All organizations must co	mplete th	s part) Se	e instructions.						
he	organı	zation is not a private found	ation because it is. (For lines 1 through 12, c	heck only	one box)		Na					
1		A church, convention of chi	urches, or association	n of churches described	ın sectio	n 170(b)(1)(A)(i).						
2		A school described in secti					X X /	()7					
3	一	A hospital or a cooperative					iì	\cup $ $					
4	Ħ	A medical research organization	, -				*	the hospital's name					
4	لــــا	city, and state	ation operated in col	nanction with a nospital	described	366110	ii ii o(b)(i)(A)(iii). Line:	ino noopital o namo,					
_		An organization operated for	united benefit of a col	logo or conversity overse	1 01 000101	ad by a a	warnmantal unit danarih	ad in					
5	ш			lege of university owner	i or operat	eu by a go	overninental unit describ	eu iii					
_		section 170(b)(1)(A)(iv). (C											
6	 	A federal, state, or local gov	•				• •						
7	LX												
		section 170(b)(1)(A)(vi). (Co	omplete Part II)										
8		A community trust describe	, .,		-								
9		An agricultural research org	anization described	in section 170(b)(1)(A)(ix) operate	ed in conju	nction with a land-grant	college					
		or university or a non-land-g	rant college of agric	ulture (see instructions)	Enter the	name, city	, and state of the colleg	e or					
		university											
10		An organization that normal	lly receives (1) more	than 33 1/3% of its sup	port from	contribution	ons, membership fees, a	nd gross receipts from					
		activities related to its exem	npt functions - subjec	ct to certain exceptions,	and (2) no	more tha	n 33 1/3% of its support	from gross investment					
		income and unrelated busin											
		See section 509(a)(2). (Cor	nolete Part III)			·	,						
11		An organization organized a	-	vely to test for public sa	fetv See	section 50)9(a)(4).						
12	一	An organization organized a	•	•	-			purposes of one or					
	_	more publicly supported or	•		•								
		lines 12a through 12d that	-										
а		Type I. A supporting orga	• •			•	-	aivina					
а	ш	the supported organization	•	·	•								
				•	i majority (on the three	ciois of trustees of the s	apporting					
		organization You must o	•				ad arganization(a), by ba	.upa					
D	<u> </u>	Type II. A supporting org											
		control or management o			ame perso	ons that co	ontrol or manage the sup	ропеа					
	_	organization(s) You mus	•										
С	L	Type III functionally inte	-					ed with,					
	_	its supported organization	n(s) (see instructions) You must complete i	Part IV, Se	ctions A,	D, and E.						
d	L	Type III non-functionally	integrated. A supp	orting organization oper	ated in co	nnection v	vith its supported organi	zation(s)					
		that is not functionally int	egrated The organiz	ation generally must sat	isfy a disti	ribution re	quirement and an attent	veness					
		requirement (see instructi	ions) You must con	nplete Part IV, Sections	A and D,	and Part	V.						
е		Check this box if the orga	inization received a v	written determination fro	m the IRS	that it is a	Type I, Type II, Type III						
		functionally integrated, or	Type III non-functio	nally integrated support	ing organiz	zation							
f	Ente	r the number of supported o	organizations										
g		ide the following information											
	(1) Name of supported	(II) EIN	(III) Type of organization (described on lines 1 10	(iv) is the orga in your governi	nization listed ng document?	(v) Amount of monetary	(vi) Amount of other					
		organization		above (see instructions))	Yes	No	support (see instructions)	support (see instructions)					
				·····				1.00					
					 								
													
				<u> </u>									
Γ∩t≥	al .				ı	i	İ						

26-0307123 Page 2

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

(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)

Sed	Section A. Public Support											
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total					
	Gifts, grants, contributions, and											
	membership fees received (Do not											
	include any "unusual grants ")	378,517.	431,160.	447,087.	593,425.	670,567.	2520756.					
2	Tax revenues levied for the organ-		•									
	ization'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	<u> </u>										
4	Total. Add lines 1 through 3	378,517.	431,160.	447,087.	593,425.	670,567.	2520756.					
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)						994,258.					
6	Public support. Subtract line 5 from line 4						1526498.					
	ction B. Total Support											
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total					
7	Amounts from line 4	378,517.	431,160.	447,087.	593,425.	670,567.	2520756.					
8	Gross income from interest,	•	*									
	dividends, payments received on											
	securities loans, rents, royalties,											
	and income from similar sources					<u> </u>						
9	Net income from unrelated business											
	activities, whether or not the											
	business is regularly carried on											
10	Other income Do not include gain											
	or loss from the sale of capital											
	assets (Explain in Part VI)	4,510.	1,170.	9,395.	46,000.	58,100.	119,175.					
11	Total support. Add lines 7 through 10						2639931.					
	Gross receipts from related activities,	etc (see instruction	ons)			12						
	First five years. If the Form 990 is for	•		d, fourth, or fifth ta	ax year as a section	n 501(c)(3)						
	organization, check this box and stor	here			<u> </u>	<u> </u>						
Sec	ction C. Computation of Publ	ic Support Pe	rcentage									
14	Public support percentage for 2017 (line 6, column (f) di	vided by line 11, c	olumn (f))		14	<u>57.82 %</u>					
15	Public support percentage from 2016	Schedule A, Part	II, line 14			15	<u>65.93 %</u>					
16a	33 1/3% support test - 2017. If the o	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or m	nore, check this bo						
	stop here. The organization qualifies		-				\triangleright X					
b	33 1/3% support test - 2016. If the o	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box					
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation								
17a	10% -facts-and-circumstances tes	t - 2017. If the org	anization did not d	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,					
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	ns box and stop h	ere. Explain in Pai	t VI how the organ	ization					
	meets the "facts-and-circumstances"	test The organiza	tion qualifies as a	publicly supported	dorganization		ightharpoons					
b	10% -facts-and-circumstances tes	t - 2016. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or 1	17a, and line 15 is	10% or					
	more, and if the organization meets the	ne "facts-and-circu	mstances" test, cl	neck this box and	stop here. Explain	in Part VI how the	<u></u>					
	organization meets the "facts-and-circ	cumstances" test	The organization of	jualifies as a public	cly supported orga	nızatıon	▶□					
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	nd see instruction	<u>s</u> ▶□					
					Sche	dule A (Form 990	or 990-EZ) 2017					

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) Section A. Public Support <u>(e)</u> 2017 (f) Total Calendar year (or fiscal year beginning in) (a) 2013 (b) 2014 (c) 2015(d) 2016 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 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 c Add lines 7a and 7b Public support. (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (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 c 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 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is/for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage, for 2017 (line 8, column (f) divided by line 13, column (f)) % 15 16 Public support percentage from 2016 Schedule A, Part III, line 15 % 16 Section D. Computation of Investment Income Percentage Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f)) 17 % 18 Investment income percentage from 2016 Schedule A, Part III, line 17 18 % 19a 33 1/3% support tests - 2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and ${f stop}$ here. The organization qualifies as a publicly supported organization b 33 1/3%/ support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2017

732023 10-06-17

Part IV | 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.)

ec	tion A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by		•	-
_	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported	-	-	-
_	organization was described in section 509(a)(1) or (2)	2		
за	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	-		
	(b) and (c) below	3a	-	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the	- 2h	-	-
	organization made the determination	3b	-	
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)	3c		_
4-	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	30		<u> </u>
48	Was any supported organization not organized in the United States ("foreign supported organization")? If	4a	-	İ
	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	-+a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion		*	
	despite being controlled or supervised by or in connection with its supported organizations.	4b		
,	Did the organization support any foreign supported organization that does not have an IRS determination	- 45		_
C	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)	1		
	purposes	4c	-	-
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
-	answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class			
	benefited by one or more of its supported organizations, or (iii) other supporting organizations that also			
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in	_		
	Part VI.	6		1
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with		-	-
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?		-	
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8	ļ	
9a		1		
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described		-	
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		-
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which		-	
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b	 	
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		-
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	10a		
	SUPPORTING OF GARLEGUES). IL 169' GROMEL LOD DELOM	, iva	1	

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)

732025 10-06-17

Schedule A (Form 990 or 990-EZ) 2017

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

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

☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2017

instructions)

Schedule A (Form 990 or 990-EZ) 2017

Part VI See instructions

B Breakdown of line 7
a Excess from 2013
b Excess from 2014
c Excess from 2015
d Excess from 2016
e Excess from 2017

and 4c

7 Excess distributions carryover to 2018. Add lines 31

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No 1545-0047 Open to Public -Inspection

Name of the organization

THE MEDIA MOBILIZING PROJECT

Employer identification number 26-0307123

Pai	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the						
	organization answered "Yes" on Form 990, Part IV, Iir						
		(a) Donor advised funds	(b) Funds and other accounts				
1	Total number at end of year		<u> </u>				
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 advisors in	writing that the assets held in donor advise	d funds				
	are the organization's property, subject to the organization's		Yes No				
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be u	sed only				
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring						
	impermissible private benefit?		Yes No				
Pai	t II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990, Pa	art IV, line 7				
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply)					
	Preservation of land for public use (e.g., recreation or o	education) Preservation of a histor	rically important land area				
	Protection of natural habitat	Preservation of a certification	ed historic structure				
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form o	f 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 historic sti	ructure included in (a)	2c				
d	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic structur	re				
	listed in the National Register		2d				
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	organization during the tax				
	year ▶	_					
4	Number of states where property subject to conservation ea						
5	Does the organization have a written policy regarding the pe	- · · · · · · · · · · · · · · · · · · ·					
	violations, and enforcement of the conservation easements		☐ Yes ☐ No				
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, and enforcing conse	ervation easements during the year				
_							
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservati	on easements during the year				
_	Data and appropriate accompation and the 2/d) sho	via antiofy the requirements of section 170/h	NAVRVI				
8	Does each conservation easement reported on line 2(d) about control 170/b/4//R/w/3	ve satisfy the requirements of section 170(i	Yes No				
9	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservat	ion assements in its revenue and expense					
9	include, if applicable, the text of the footnote to the organization						
	conservation easements	along mandal statements that occombes to	to organization o docounting to:				
Pai	t III Organizations Maintaining Collections of	of Art. Historical Treasures, or Ot	her Similar Assets.				
	Complete if the organization answered "Yes" on Forn						
	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art,						
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XII the text of the footnote to its financial statements that describes these items						
b	the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s						
-	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts						
	relating to these items	•	•				
	(i) Revenue included on Form 990, Part VIII, line 1		> \$				
	(ii) Assets included in Form 990, Part X		> \$				
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial					
_	the following amounts required to be reported under SFAS		•				
а	Revenue included on Form 990, Part VIII, line 1		> \$				
	Assets included in Form 990, Part X		\$				
	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.	Schedule D (Form 990) 2017				

		A MOBILIZ								Page 2
Par	rt III Organizations Maintaining Co	ollections of Ar	t, Hist	orical Tre	easures, o	r Othe	r Simil	ar Asse	S (continu	ıed)
3	Using the organization's acquisition, accession	sing the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items								
	(check all that apply)									
а	Public exhibition	d		Loan or excl	nange progra	ıms				
b	Scholarly research	е		Other						
С	Preservation for future generations									
4	Provide a description of the organization's coll	lections and explair	n how th	ey further th	ne organizatio	on's exer	npt purp	ose in Part	XIII	
5	During the year, did the organization solicit or	receive donations of	of art, hi	storical treas	sures, or othe	er sımılar	assets		_	
	to be sold to raise funds rather than to be mail	ntained as part of t	he orga	nization's co	llection?				Yes	No_
Par	rt IV Escrow and Custodial Arrang	ements. Comple	te if the	organizatio	n answered "	Yes" on	Form 990	0, Part IV,	line 9, or	
	reported an amount on Form 990, Part	X, line 21								
1a	Is the organization an agent, trustee, custodia	n or other intermed	liary for	contribution	s or other as:	sets not	ıncluded		_	
	on Form 990, Part X?								Yes	L No
b	If "Yes," explain the arrangement in Part XIII a	nd complete the fol	llowing t	able					_	
									Amount	
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 For	rm 990, Part X, line	21, for	escrow or cu	istodial acco	unt liabili	ıty?		Yes	∐ No
	If "Yes," explain the arrangement in Part XIII C	Check here if the ex	planation	n has been	provided on	Part XIII				<u> </u>
Pai	rt V Endowment Funds. Complete if	the organization an	swered	"Yes" on Fo	rm 990, Part	IV, line 1	0			
		(a) Current year	(b) P	rior year	(c) Two year	s back	(d) Three	years back	(e) Four	years back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs				_					
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curre	ent year end balanc	e (line 1	g, column (a	ı)) held as					
а	Board designated or quasi-endowment > _		_%							
þ	Permanent endowment	%								
C	Temporarily restricted endowment	%								
	The percentages on lines 2a, 2b, and 2c shou	ld equal 100%								
За	Are there endowment funds not in the posses	sion of the organiza	ation tha	at are held a	nd administe	red for th	ne organı	zation	_	
	by Yes No									
	(i) unrelated organizations 3a(i)									
	(ii) related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization	ions listed as requir	red on S	chedule R?					3b	
4	Describe in Part XIII the intended uses of the		wment	funds						
Pai	rt VI _ Land, Buildings, and Equipme									
	Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10									
	Description of property	(a) Cost or o			or other		ccumulat		(d) Book	value
		basis (investr	nent)	basis	(other)	dep	oreciation	1		
1a	Land									
b	Buildings							- -		
	• • • • • • • • • • • • • • • • • • •	-				_				
	Equipment				- 262		25 2	0.4	4.0	0.00
	Other				5,363.		35,2	94.		0.069.
Tota	N. Add lines 1a through 1e (Column (d) must eq	ual Form 990. Part	X. colur	nn (B). line 1	(OC)					0,069.

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017 THE MEDIA M	OBILIZING PR	OJECT	26	<u>-0307123 r</u>	<u> Page 3</u>
Part VII Investments - Other Securities.			-		
Complete if the organization answered "Yes"					
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v	aluation Cost or end	d-of-year market val	lue
(1) Financial derivatives					
(2) Closely-held equity interests					
(3) Other					
(A)					
(B)		·			
(C)					
(D)					
(E)					
(F)					
(G)					
(H)		`			
Total (Col (b) must equal Form 990, Part X, col (B) line 12)					
Part VIII Investments - Program Related.					
Complete if the organization answered "Yes"	on Form 990, Part IV, Iir	ne 11c See Form 990,	Part X, line 13		
(a) Description of investment	(b) Book value	(c) Method of v	aluation Cost or end	d-of-year market val	lue
(1)					
(2)					
(3)	•			***************************************	
(4)		44444444444		***************************************	
(5)	***************************************			•••••	
(6)	***************************************				
(7)					
(8)					
(9)					
Total (Col (b) must equal Form 990, Part X, col (B) line 13.)					3
Part IX Other Assets.					
Complete if the organization answered "Yes"	on Form 990, Part IV, lir	ne 11d See Form 990,	Part X, line 15		
	Description			(b) Book valu	ie
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col (B) lin	e 15)		•		
Part X Other Liabilities.					
Complete if the organization answered "Yes"	on Form 990, Part IV, III	ne 11e or 11f See Forr	n 990, Part X, line 25	5	
1. (a) Description of liability		(b) Book value			
(1) Federal income taxes		_]	•	
(2)]		
(3)]		
(4)]		
(5)			,		
(6)] `		
A. Albania			1 .		

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

Schedule D (Form 990) 2017

(8)

SCHEDULE 0

(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.

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990 or 990-EZ.

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

	Open to Public
nployer	identification numb

THE MEDIA MOBILIZING PROJECT	26-0307123				
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MIS	SION:				
IN LOW-INCOME COMMUNITIES IN PHILADELPHIA.					
FORM 990, PART VI, SECTION B, LINE 11B:					
ALL MEMBERS OF THE BOARD RECEIVE A COPY OF FORM 990 BEFOR	E IT IS FILED.				
AN OFFICER OF THE BOARD REVIEWS THE FORM 990 BEFORE SIGNI	NG THE FORM.				
FORM 990, PART VI, SECTION B, LINE 12C:					
THE PRESIDENT OF THE BOARD REVIEWS THE CONFLICT OF INTERE	ST STATEMENTS,				
WHICH HAVE BEEN COMPLETED ANNUALLY.					
FORM 990, PART VI, SECTION B, LINE 15:					
COMPENSATION OF SENIOR MANAGEMENT AND OTHER KEY EMPLOYEES	S IS DETERMINED BY				
THE BOARD OF DIRECTORS ACCORDING TO THE ORGANIZATION'S ST	PATEMENT ON MONEY				
AND HIRING POLICY AAND ON COMPENSATION DATA.					
FORM 990, PART VI, SECTION C, LINE 19:					
CONFLICT OF INTEREST POLICY IS AVAILABLE TO THE PUBLIC UP	ON REQUEST.				