PUBLIC DISCLOSURE COPY

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

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

2023 Open to Public Inspection

OMB No. 1545-0047

<u>A</u>	For the	e 2023 <u>calendar year, or tax year beginning</u> , and ending	g			
В	Check if a	applicable: C Name of organization			D Employe	r identification number
	Address of	change Race Forward				
Η		Doing husiness as			94-2	759879
\sqsubseteq	Name cha	Number and street (or P.O. box if mail is not delivered to street address)		Room/suite	E Telephon	e number
	Initial retu	m PO Box 96353			212-	513-7925
	Final retur					
믬	terminated	Washington DC 20090			G Gross red	ceipts\$ 27,436,343
Ш	Amended				O 01033 100	
	Application			H(a) Is this a gi	oup return for	subordinates? Yes X No
ш		GICIII IIGII II		LI/b) Are all acc	L ! ! !	duded? Yes No
		PO Box 96353		H(b) Are all su		.aaca.
		Washington DC 20090		II TNO	" attach a list	. See instructions
<u></u>	Tax-exen	mpt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	527			
J	Website:	www.raceforward.org		H(c) Group exe	emption numb	er
<u>—</u>	Form of o	organization: X Corporation Trust Association Other	L Y	ear of formation: $oldsymbol{1}$	981	M State of legal domicile: CA
	Part I	Summary	•			J
_	$\overline{}$	Briefly describe the organization's mission or most significant activities:				
Ф	' '	Race Forward catalyzes movement building for	r ragial :	iugtigo		ctnorghin
u						
rna		with communities, organizations, and sectors				
ĕ		advance racial justice in our policies, ins				
Governance	2 (Check this box if the organization discontinued its operations or disposed	of more than 25°	% of its net as	sets.	
∞ఠ	3 1	Number of voting members of the governing body (Part VI, line 1a)			3	14
S	4 1	Number of independent voting members of the governing body (Part VI, line 1	b)		4	14
Activities	5 7	Total number of individuals employed in calendar year 2023 (Part V, line 2a)	~,		5	112
妄		Total number of valuations (actionate if naccoons)				14
Ĭ					🗀	
	/a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0	
	l bı	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u></u>			0
		0 (7 (7 (7 (7 (7 (7 (7 (7 (7 (7 (7 (7 (7	-	Prior Ye		Current Year
ē	1	Contributions and grants (Part VIII, line 1h)	11,850		25,292,425	
Revenue	1	Program service revenue (Part VIII, line 2g)			614	1,445,066
é		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)			5,956	428,100
œ	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		13'	7,129	59,132
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line		16,435	5,117	27,224,723
		Oneste and similar assessment and (Dout IV, ashuran (A) lines 4.0)			7,500	1,767,145
	1	Panefits paid to as far members (Part IV, solumn (A), line 4)		•	0	0
	. ـ . ا	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-		10,739	068	13,522,953
ses	10 0		⁻¹⁰⁾ ······- -	10,73.	0	13,322,333
eü	16aF	Professional fundraising fees (Part IX, column (A), line 11e)			U	
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25) 1,037,				10 111 050
ш	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		12,775		10,644,058
	18 ⊺	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		25,022		<u>25,934,156</u>
_	19 F	Revenue less expenses. Subtract line 18 from line 12	<u></u>	-8,586		1,290,567
, Or	<u></u>			Beginning of Cu		End of Year
Net Assets or	∰ 20 T	Total assets (Part X, line 16)	L	34,918		37,006,218
ASA	21 T	Total liabilities (Part X, line 26)		4,694	1,842	4,203,567
Red	22 N	Net assets or fund balances. Subtract line 21 from line 20		30,223	3,937	32,802,651
	Part II	Signature Block		-		•
		nalties of perjury, I declare that I have examined this return, including accompanying so	chadulas and stata	ments and to th	a bast of m	v knowledge and belief it is
		ect, and complete. Declaration of preparer (other than officer) is based on all informatic				y knowledge and belief, it is
			· · ·		_	14/2024
٥.		Signature of officer				14/2024
Sig	_				Date	
He	ere	Randall Oakley VP	, Financ	e		
		Type or print name and title				
		Print/Type preparer's name Preparer's signature		Date	Check	if PTIN
Pai	id	Joyce Miller		11/14	/24 self-em	ployed P00047160
Pre	eparer	Firm's name J. Miller & Associates LLC	' I	irm's EIN	27-2001590	
	e Only	P.O. Box 27308			LIN	
	,	Dhiladalahia Da 10110			Dhama	215-600-1701
14-	v tha In	Firm's address PNIIAGEIPNIA, PA 19118		<u> </u> F	Phone no.	X Yes No
ıvıa'	v ine ik	so discuss this return with the preparer shown above? See instructions				IXIYASIINO

Part III	2023) Race				94-2759879		Page 2
art III		_	am Service Acc	•	na in thia Dant III		X
Driefly				nse or note to any li	ne in this Part III.		A
	describe the or			nt building	for radial	inatiao	In partnersh
				ns, and sect			
advar	nce racı	aı just	ice in our	policies, i	nstitutions	, and cul	ture.
Did the		malantalia any i	siana Missaust In Management Inc.		iah wasa mat liatad as s	ماد م	
	•	•		rvices during the year wh			Yes X No
•	orm 990 or 990						Tes A No
			s on Schedule O.				
		ease conductir		t changes in how it cond			□ v ∵ u.
service							Yes X No
	s," describe thes	-					
	_		•	ents for each of its three			
-				re required to report the	amount of grants and	allocations to other	S,
the tota	al expenses, an	id revenue, if a	any, for each program	service reported.			
(0 1	\ /=		20 042 200		1 767 115) (D	1 445 066
		•				• •	1,445,066)
ee :	Schedule						
(Code:	:) (E)	xpenses \$		including grants of \$) (Revenue \$)
T / 7A							
				including grants of\$			
(Code:							
/A	:) (E)	xpenses \$					
Other		xpenses \$		including grants of\$			

94-2759879 Form 990 (2023) Race Forward Page 3 **Checklist of Required Schedules** Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 Х complete Schedule A 1 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions X 2 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I X 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 X 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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III 5 Х 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors 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 X 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II X 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." complete Schedule D, Part III X 8 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 X 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V Х If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 11 VII, VIII, IX, or X, as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI X 11a Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII X 11b 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 X Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 11d X Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X X 11e

f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	446	х	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		_X_
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		_X_
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		_X_
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		_X_

17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions 17 X 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II X Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 Х

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other

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

for any foreign organization? If "Yes," complete Schedule F, Parts II and IV

assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

If "Yes," complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H Х If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21

15

16

X

X

15

16

			Yes	No
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	х	
24a		23		
_	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 2dd and complete School do K. If "No." go to line 250	24a		Х
b		24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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 Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) 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 the Schedule			
	L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			37
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	00.		v
00	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	20		х
24	conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	30		X
31		31		
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		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33	204 7704 0 and 204 7704 00 K W/ca II accorded to Octobrida D. Darid	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	33		
٠.	and Named Dank V. Jima 4	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
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	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		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		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O.	38	X	
Pa	art V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		<u></u>	Ш
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 209	-		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		77	
	reportable gaming (gambling) winnings to prize winners?	1c	X	

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance (co.	ntinue	ed)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	112			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax re	turns?		2b	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedu	ıle O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	er auth	ority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial	cial acc	count)?	4a		X
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financia	al Acco	unts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans	saction'	?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did	the				
	organization solicit any contributions that were not tax deductible as charitable contributions? \dots			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	itions o	r			
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	or good	S			
	and services provided to the payor?			7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? \dots			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it	was				
	required to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit co			7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organ			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund mainta			8		
9				0		
a	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:			35		
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		1		
11	Section 501(c)(12) organizations. Enter:			-		
а		11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources					
	against amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of F	orm 10	41?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note: See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which					
	the organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand	13c				
14a				14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Scheol			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remu	neratio	n or			
	excess parachute payment(s) during the year?			15		X
	If "Yes," see instructions and file Form 4720, Schedule N.					7.7
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment (1704). The control of the section 4968 excise tax on net investment (1704).	ent inco	ome?	16		X
4-	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any a					
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.					

	Check if Schedule O contains a response or note to any line in this Part VI					\mathbf{X}
Sec	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	14			
	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 on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with					
	any other officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct					
	supervision of officers, directors, trustees, or key employees to a management company or other person? \dots			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was file	ed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets? \dots			5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint					
	one or more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,					
	stockholders, or persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the	ear by	the following	:		
а	The governing body?			8a	<u> </u>	
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 reached at					
<u></u>	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9	-l- \	X
Sec	tion B. Policies (This Section B requests information about policies not required by the	mem	ai Revenue	9 00		NI-
40-	Did the conseinsting have been been been been about an efficience			40-	Yes	
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			40h		
44-	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before fill	ng the	iorm?	11a	Λ	
b 120	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			120	х	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	rico to	conflicte?	12a 12b	X	
b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	1156 10	COMMICIS!	120		
С	describe on Schedule O how this was done			12c	х	
13	Did the organization have a written whictleblower 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 approval by					
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision	?				
а	The organization's CEO, Executive Director, or top management official			15a	х	
b	Other officers or key employees of the organization			15b	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement					
	with a taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its					
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the					
	organization's exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed CA,NY,AK,AR,AL,CO,CT,F	L,KS	,MD,ME,M	A,M	3	
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T	(sectio	n 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.					
	Own website Another's website X Upon request Other (explain on Schedule O)					
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of ir	terest	policy,			
	and financial statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords.				
Ra	indall Oakley PO Box 96353					

Washington

DC 20090 212-513-7925

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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week	box	, unle cer ar	ss pe	ition more rson is	than one s both ar r/trustee)	n	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations		
(1)Glenn Harris							1					
	40.00							000 801	•	24 005		
President (2) Eric Ward	1.00			Х			\dashv	282,791	0	34,295		
(2) Elic Ward	40.00											
Vice President	0.00					x		215,462	0	21,689		
(3) Julie Nelson							\dashv					
.,	40.00											
SVP, Programs	0.00			X				198,878	0	33,958		
(4)Randall Oakley												
· · · · · · · · · · · · · · · · · · ·	40.00								_			
VP, Finance	0.00					Х	4	166,882	0	31,332		
(5) Cathy Albisa	40.00											
VP Inst & Sec Change	0.00					x		153,635	0	41,259		
(6) Magnada Dory	0.00					^	+	133,033	<u> </u>	11,239		
(o)liagliada 2017	40.00											
VP Human Resources	0.00					x		154,723	0	39,986		
(7) Cheryl Blakemor	е											
	40.00											
VP, Strategic Comms	0.00					Х	_	161,049	0	30,336		
(8) Faron McLurkin												
	40.00			٠,				150 445	•	02 506		
SVP, Dev. & Part. (9) Charlene Sincla	0.00			Х			+	150,447	0	23,506		
(9) Chartene Sincia	40.00											
Chief of Staff	0.00			x				148,777	0	15,088		
(10)Kevin Allis	0.00						\dashv	220,777		13,000		
(,,===================================	1.00											
Director	0.00	X						0	0	0		
11)Lori Bezahler				\Box								
	1.00											
Vice Chair	0.00	X		X				0	0	0		

(A) Name and title	(B) Average hours per week	òox	, unle	Pos heck ss pe	more rson i	than o s both or/truste	an	(D) Reportable compensation from the	(E) Reportable compensation from related		(F) timated a of othe	er
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	or	from the ganization ted organization	ne n and
(12) Rebecca Fox (12) Director	1.00	х						0	0			0
(13) Rodney Foxwo (13) Treasurer	rth 1.00 0.00	x		x				0	0			0
(14) LeeAnn Hall (14) Director	1.00	x						0	0			0
(15) Richard Kim (15) Director	1.00	x						0	0			0
(16) Aletha Mayba (16) Director	nk 1.00 0.00	х						0	0			0
(17) Kavitha Medi (17) Secretary	ratta 1.00 0.00	x		х				0	0			0
(18) Ramon Ramire (18) Director		x						0	0			0
(19) Ralph Reming (19) Director		x						0	0			0
1b Subtotal c Total from continuation she d Total (add lines 1b and 1c)	eets to Part VII	Sec						1,632,644				1,449
Total number of individuals (ir reportable compensation from	ncluding but not	limite	ed to				abo		an \$100,000 of			Yes No
 Did the organization list any form employee on line 1a? If "Yes, For any individual listed on line organization and related organization. 	" complete Sche	edule n of a	J fo	or su rtable	ch ii e co	ndivia mper	<i>lual</i> nsat	ion and other compensation	n from the		3	х
 individual Did any person listed on line for services rendered to the company 	1a receive or ac	crue	con	npen	 Isatio	on fro	m a	any unrelated organization			5	X
Section B. Independent Contract 1 Complete this table for your for compensation from the organization.	ive highest compization. Report o							ndar year ending with or w	ithin the organization's tax	year.		(0)
Kerry Mitchell Brow Orlando		. 3	28		603	1 1		Descrip ne Valley Dr Research & Pro	(B) ion of services		Con	(C) mpensation 393,062
Dalberg Consulting New York Propane Studio LLC	US LLC		00	11			23	3rd St FL 6 Consulting Street 3a				292,999
San Francisco Greater Good Studio Chicago	LLC		41	<u>10</u>			7.	Web Design Diversey Ave.				224,110
Spencer Mann	CA		06				cuc	Eng Services ce Street Communications	3			198,068
2 Total number of independent received more than \$100,000								ose listed above) who	5		Form	990 (2023)

Pa	rt V			of Revenue ledule O con	itains	a respo	onse or not	te to any line in	this Part VIII		
								(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated cam	paigns		1a						
Gra	b	Membership du	es		1b						
S, An	С	Fundraising eve	ents		1c						
Gift	d	Related organiz	zations	· · · · · · · · · · · · · · · · · · ·	1d						
s, imi	е	Government grants (1e						
ion	f	All other contributions	, gifts, gi	rants,	4.	25	202 425				
but	_	and similar amounts r Noncash contributions			1f	45 ,	292,425				
nti d	9	lines 1a-1f			1g	\$					
a S	h	Total. Add lines	s 1a–1	f				25,292,425			
							Business Code				
ce	2a	Sponsorshi	ps a	nd Events			541610	730,205	730,205		
Program Service Revenue	b	Fees and (Contr	acts			541610	714,861	714,861		
n S enu	С										
gran	d										
)LO	е										
_	f	All other progra	m ser	vice revenue							
	g	Total. Add lines						1,445,066			
	3	Investment inco						630 5 00			
	_	other similar an	nounts) _:				639,720			639,720
	4	Income from inv		•		•	s				
	5	Royalties									
	•			(i) Real	,700	(11) 1	Personal				
		Gross rents	6a	7	, /00						
	D	Less: rental expenses		7	,700						
	C	Rental inc. or (loss)	6c					7,700			7,700
	d 7a	Net rental incon Gross amount from	ne or (Othor	7,700			7,700
		sales of assets	7-	(i) Securities	5	(11)	Other				
<u>o</u>	L	other than inventory	7a_								
Revenue	b	Less: cost or other	7b	211	,620						
ě	_	basis and sales exps. Gain or (loss)	7c	-211							
		Net gain or (loss)						-211,620	-211,620		
ther		Gross income from									
٥	ou	(not including \$									
		of contributions re									
		1c). See Part IV, I			8a						
	b	Less: direct exp			8b						
		Net income or (events						
		Gross income fi	٠,	-							
		activities. See F			9a						
	b	Less: direct exp			9b						
	С	Net income or ((loss) f	rom gaming ac	tivities						
	10a	Gross sales of	invent	ory, less							
		returns and allo	wance	es	10a						
	b	Less: cost of go	ods s	old	10b						
	С	Net income or (loss) f	rom sales of in	ventory						
SZ							Business Code				
Miscellaneous Revenue	11a	Other Inco	ome				900099	51,432	51,432		
llan	b										
Sce	С										
Ξ̈́		All other revenu						F4 400			
		Total. Add lines						51,432	1 004 000		CAR 400
	12	Total revenue.	See i	nstructions				27,224,723	1,284,878	0	647,420

Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must con Check if Schedule O contains a respor			omplete column (A).	X
Do r	not include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
	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	1,767,145	1,767,145		
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,				
	trustees, and key employees	887,741	693,831	24,048	169,862
6	Compensation not included above to disqualified	•	,	,	
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	9,405,631	7,341,924	1,614,416	449,291
8	Pension plan accruals and contributions (include	•			<u>,</u>
-	section 401(k) and 403(b) employer contributions)	191,127	146,626	34,355	10,146
9	Other employee benefits	2,202,543	1,722,580	364,768	115,195
10	Payroll taxes	835,911	652,606	134,251	49,054
11	Fees for services (nonemployees):		,	,	<u>,</u>
	Management				
	Legal	58,006	46,936	9,894	1,176
С	Accounting	52,811	42,732	9,008	1,071
d	Lobbying	•	•	•	•
е	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column				
ŭ	(A) amount, list line 11g expenses on Schedule O.)	6,884,750	5,611,478	1,158,037	115,235
12	Advertising and promotion	33,834	26,909	5,072	1,853
13	Office expenses	214,078	136,829	59,181	18,068
14	Information technology	689,422	517,232	133,854	38,336
15	Royalties	_	-		
16	Occupancy	595,547	464,953	95,646	34,948
17	Travel	660,702	626,256	26,574	7,872
	Payments of travel or entertainment expenses	_	-		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	934,127	933,738	389	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	123,302		123,302	
23	Insurance	124,465	97,172	19,989	7,304
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Miscellaneous Fees & Tax	174,262	95,687	75,477	3,098
b	Dues & Subscriptions	82,745	17,749	59,737	5,259
С	Sponsorships	16,007	1,007	5,000	10,000
d					
е					
25	Total functional expenses. Add lines 1 through 24e	25,934,156	20,943,390	3,952,998	1,037,768
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)				
DAA					Form 990 (2023)

Balance Sheet Part X Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 5,385,930 4,915,289 Cash—non-interest-bearing Savings and temporary cash investments 17,242,600 21,412,068 2 4,028,433 11,307,718 Pledges and grants receivable, net 3 Accounts receivable, net Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net Inventories for sale or use 8 Prepaid expenses and deferred charges 352,616 405,024 9 10a Land, buildings, and equipment; cost or other basis. Complete Part VI of Schedule D 10a 1,805,601 **b** Less: accumulated depreciation 10b 845,715 1,146,410 959,886 10c Investments—publicly traded securities 11 Investments—other securities. See Part IV, line 11 12 12 Investments—program-related. See Part IV, line 11 13 13 Intangible assets _____ 14 14 2,593,322 2,175,701 Other assets. See Part IV, line 11 15 15 34,918,779 37,006,218 Total assets. Add lines 1 through 15 (must equal line 33) 16 16 Accounts payable and accrued expenses 1,456,613 1,300,154 17 17 Grants payable 18 18 584,958 636,598 Deferred revenue 19 19 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 2,653,271 2,266,815 25 of Schedule D 4,694,842 4,203,567 26 26 **Total liabilities.** Add lines 17 through 25 Organizations that follow FASB ASC 958, check here X Assets or Fund Balances and complete lines 27, 28, 32, and 33. 11,730,645 Net assets without donor restrictions 18,691,707 27 27 Net assets with donor restrictions 11,532,230 28 21,072,006 28 Organizations that do not follow FASB ASC 958, check her and complete lines 29 through 33. Capital stock or trust principal, or current funds 29 29 Paid-in or capital surplus, or land, building, or equipment fund 30 30 Retained earnings, endowment, accumulated income, or other funds 31 31 Š 30,223,937 32,802,651 Total net assets or fund balances 32 32 34,918,779 37,006,218 Total liabilities and net assets/fund balances

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Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

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3a

Х

	(A) Name and title	(B) Average hours per week	offi	, unle	Pos check ess pe nd a d	more rson i	than dis both	an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation	t
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organization	IS
(20) (12) Direc	Alberto Reta	na 1.00 0.00	х						0	0		0
(21) (13) Direc	:tor	1.00	х						0	0		0
(22) (14) Direct	tor	Breitfel 1.00 1.00	d x						0	0		0
	Christi Tran	1.00	х		х				0	0		0
(16)												
(17)												
(18)												
(19)												
с То	ubtotal otal from continuation sho otal (add lines 1b and 1c)	ets to Part VII	, Se	ction	1 A							
	otal number of individuals (in portable compensation from	•		ed to	tho	se li	sted	abo	ove) who received more that	an \$100,000 of	Yes	No
er 4 Fo or <i>in</i>	d the organization list any for a ployee on line 1a? If "Yes, or any individual listed on ling ganization and related organization and related organization and related organization line dany person listed on line	" complete Schene 1a, is the sun inizations greate	edule n of r tha	J for report n \$1	r su rtable 150,0	ch ii e co)00?	ndivid mper If "Y	dual nsat 'es,'	tion and other compensation complete Schedule J for	on from the such	3	
fo	r services rendered to the or B. Independent Contrac	organization? If "									5	
1 C	omplete this table for your fampensation from the organ	ive highest comp									vear.	
		(A) I business address								(B) tion of services	(C) Compensat	tion
	otal number of independent ceived more than \$100,000								nose listed above) who			
DAA											Form 990	(2023)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

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.

OMB No. 1545-0047

Open to Public Inspection

Attach to Form 990 or Form 990-EZ.

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

Name of the organization Employer identification number Race Forward 94-2759879 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes (A) (B) (C) (D) (E)

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

Part II

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.)

	tion A. Public Support						
Caler	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	8,110,537	17,295,773	31,812,017	11,850,418	25,292,425	94,361,170
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	8,110,537	17,295,773	31,812,017	11,850,418	25,292,425	94,361,170
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						
e	shown on line 11, column (f)						19,069,636
<u>6</u> Soc	Public support. Subtract line 5 from line 4. tion B. Total Support						75,291,534
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	8,110,537	17,295,773	31,812,017	11,850,418	25,292,425	94,361,170
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	19,177	9,385	17,317	357,706	647,420	1,051,005
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.)	75,021	53,693	9,053	128,229	51,432	317,428
11	Total support. Add lines 7 through 10	·		·	·	·	95,729,603
12	Gross receipts from related activities, etc.	(see instructions)	•			12	15,138,778
13	First 5 years. If the Form 990 is for the o						
	organization, check this box and stop he	•				. , . ,	
Sec	tion C. Computation of Public S	Support Perce					
14	Public support percentage for 2023 (line 6	6, column (f) divide	d by line 11, colu	mn (f))		14	78.65 %
15	Public support percentage from 2022 Sch	edule A, Part II, Iir	ie 14			15	80.87 %
16a	33 1/3% support test — 2023. If the org	anization did not cl	neck the box on li	ne 13, and line 14	is 33 1/3% or mo	re, check this	
	box and stop here. The organization qua						X
b	33 1/3% support test — 2022. If the org						
	this box and stop here. The organization						
17a	10%-facts-and-circumstances test — 2						
	10% or more, and if the organization meets Part VI how the organization meets the fa organization	acts-and-circumsta	nces test. The org	ganization qualifies	as a publicly sup	pported	
b	10%-facts-and-circumstances test — 2 15 is 10% or more, and if the organization in Part VI how the organization meets the	2022. If the organize meets the facts-and-circums	zation did not cheo and-circumstances stances test. The	ck a box on line 13 s test, check this b organization qualif	3, 16a, 16b, or 17a ox and stop here ies as a publicly s	a, and line e. Explain supported	
18	organization Private foundation. If the organization d instructions	d not check a box	on line 13, 16a, 1	16b, 17a, or 17b, c	heck this box and	see	

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.)

Sec	tion A. Public Support			· ·	•	,		
Caler	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 202	3	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")							
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5						\longrightarrow	
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.							
С	Add lines 7a and 7b							
8	Public support. (Subtract line 7c from line 6.)							
Sec	tion B. Total Support							
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 202	3	(f) Total
9	Amounts from line 6	(4) 2010	(3) 2020	(6) 2021	(4) 2022	(0) 202		(i) rotal
10a								
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
С	Add lines 10a and 10b						\rightarrow	
11	Net income from unrelated business activities not included on 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 5 years. If the Form 990 is for the organization, check this box and stop he			•		. , . ,		
Sec	tion C. Computation of Public		entage				<u></u>	
15	Public support percentage for 2023 (line			umn (f))			15	%
16	Public support percentage from 2022 Sch						16	%
	tion D. Computation of Investm							
17	Investment income percentage for 2023	(line 10c, column	(f), divided by line	13, column (f))			17	%
18 I	nvestment income percentage from 2022		III . C 47				18	%
19a	33 1/3% support tests — 2023. If the or	rganization did not					ine	
	17 is not more than 33 1/3%, check this b		=			-		
b	33 1/3% support tests — 2022. If the or	-						
	line 18 is not more than 33 1/3%, check t	-	_	•		-		
20	Private foundation. If the organization of	did not check a box	x on line 14, 19a,	or 19b, check this	box and see insti	uctions		

Part IV **Supporting Organizations**

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

Section A. All Supporting Organizations

- 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,
- 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).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and b satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes." explain in Part VI what controls the organization put in place to ensure such use.
- Was any supported organization not organized in the United States ("foreign supported organization")? If 4a "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- 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.
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c 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).
- 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?
- **Substitutions only.** Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
- 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.)

1			Yes	No
2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a				
2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a		1		
3a				
3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c		2		
3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c		20		
3c		Sa		
3c		3h		
4a		0.0		
4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a		3с		
4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a		42		
4c 5a 5b 5c 6 7 8 9a 9b 9c 10a		та		
4c 5a 5b 5c 6 7 8 9a 9b 9c 10a		4b		
5a 5b 5c 6 7 8 9a 9b 9c 10a				
5a 5b 5c 6 7 8 9a 9b 9c 10a		4c		
5b				
5c 6 7 8 9a 9b 9c 10a		5a		
5c 6 7 8 9a 9b 9c 10a		Eh		
6 7 8 9a 9b 9c 10a				
7 8 9a 9b 9c				
9a 9b 9c 10a		6		
9a 9b 9c 10a				
9a 9b 9c 10a		7		
9b 9c 10a		8		
9b 9c 10a				
9c 10a		9a		
10a		9b		
10a		9с		
10b Chedule A (Form 990) 2023		10a		
100		461		
	che	dule A	(Form 9	90) 2023

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Par	t IV Supporting Organizations (continued)		Vaa	Na
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
''	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
u	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c,</i>	- 112		
	provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of	of one or		
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization?	s officers,		
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization	(s)		
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one	supported		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated an	nong the		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			I
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
Secti	the supported organization(s). ion D. All Type III Supporting Organizations	1		
OCCI	on b. All Type III oupporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		100	140
- -	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	x		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI			
	how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instructions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity.	ntity (see instruction	ns).	1
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would			
^	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i> Did the experization have the power to regularly appoint or elect a majority of the efficace directors are			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	20		
h	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
	or no supported organizations: if 163, describe lift art vilue role played by the organization in this regard.	30		l

Sched	lle A (Form 990) 2023 Race Forward		94-2759	879	Page 6
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgan	nizations		
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on N			/l). See	
	instructions. All other Type III non-functionally integrated supporting organizations mu	ust co	mplete Sections A throug	h E.	
Sect	ion A – Adjusted Net Income		(A) Prior Year	` ′	rrent Year tional)
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3.	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or collection				
	of gross income or for management, conservation, or maintenance of				
	property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Sect	ion B – Minimum Asset Amount		(A) Prior Year	` ′	rrent Year tional)
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
а	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
C	Fair market value of other non-exempt-use assets	1c			
С	Total (add lines 1a, 1b, and 1c)	1d			
e	Discount claimed for blockage or other factors				
	(explain in detail in Part VI):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,				
	see instructions).	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by 0.035.	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion C – Distributable Amount			Curre	ent Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1			
2	Enter 0.85 of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
	emergency temporary reduction (see instructions).	6			
7	Check here if the current year is the organization's first as a non-functionally integrated	d Type	e III supporting organization	on	
	(see instructions).				

Schedule A (Form 990) 2023

94-2759879 Race Forward Schedule A (Form 990) 2023 Page 7 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D - Distributions **Current Year** 1 Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 3 Amounts paid to acquire exempt-use assets 4 5 Qualified set-aside amounts (prior IRS approval required—provide details in Part VI) Other distributions (describe in Part VI). See instructions. 6 Total annual distributions. Add lines 1 through 6. 7 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. Distributable amount for 2022 from Section C. line 6 9 9 10 Line 8 amount divided by line 9 amount (i) (ii) (iii) Section E - Distribution Allocations (see instructions) **Excess Distributions** Underdistributions Distributable Pre-2023 Amount for 2023 Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 (reasonable cause required-explain in Part VI). See instructions. Excess distributions carryover, if any, to 2023 **a** From 2018 **b** From 2019 **c** From 2020 **d** From 2021 **e** From 2022 f Total of lines 3a through 3e **g** Applied to underdistributions of prior years h Applied to 2023 distributable amount i Carryover from 2018 not applied (see instructions) Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2023 from Section D, line 7: a Applied to underdistributions of prior years **b** Applied to 2023 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2024. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2019 **b** Excess from 2020 c Excess from 2021

Schedule A (Form 990) 2023

d Excess from 2022e Excess from 2023

Schedule A (Fo	orm 990) 2023	Race	Forward			94-2759879	Page 8
Part VI	Supplemen III, line 12; F	Part IV, Section A	, lines 1, 2, 3l	b, 3c, 4b, 4c, 5	5a, 6, 9a, 9b, 9c, 11a	e 10; Part II, line 17a o a, 11b, and 11c; Part IV Part IV, Section E, line	/, Section
	3a, and 3b;	Part V, line 1; Pa	rt V, Section	B, line 1e; Par	t V, Section D, lines al information. (See	Part IV, Section E, line 5, 6, and 8; and Part \ instructions.)	, Section E
Part I		10 - Other					
Other	income			\$	317,428		

Race Forward

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DAA Schedule A (Form 990) 2023

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

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Department of the Treasury Internal Revenue Service

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

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

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

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

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

• 5	Section 501(c)(4), (5), or (6) organizations: Complete Part II	II.			
	e of organization Race Forward			Employer iden 94-27598	tification number 79
Pa	rt I-A Complete if the organization is exer	mpt under section 501	(c) or is a se	ction 527 organi	zation.
1	Provide a description of the organization's direct and indirect and in	ect political campaign activitie	s in Part IV. See	instructions for	
•	definition of "political campaign activities."			•	
2	Political campaign activity expenditures. See instructions				
_	Volunteer hours for political campaign activities. See instr				
	rt I-B Complete if the organization is exe		(C)(3).	Φ	
1	Enter the amount of any excise tax incurred by the organi	zation under section 4955		Þ	
2	Enter the amount of any excise tax incurred by organization	on managers under section 4s	955	ð	☐ Yes ☐ No
3	If the organization incurred a section 4955 tax, did it file Fe Was a correction made?				Yes No
	If "Yes," describe in Part IV.				. Tes Ino
	rt I-C Complete if the organization is exe	mpt under section 501	(c) excent so	ection 501(c)(3)	
<u>։ </u>	Enter the amount directly expended by the filing organization	-			
•	activities	·		\$	
2	Enter the amount of the filing organization's funds contribu			· · · · · · · · · · · · · · · · · · ·	
_	527 exempt function activities	J		\$	
3	Total exempt function expenditures. Add lines 1 and 2. Er			· · · · · · · · · · · · · · · · · · ·	
-	line 17b		•	\$	
4	Did the filing organization file Form 1120-POL for this year	ar?		*	Yes No
5	Enter the names, addresses, and employer identification r				
	organization made payments. For each organization listed		-		=
	the amount of political contributions received that were pro-	omptly and directly delivered t	o a separate polit	ical organization, such	
	as a separate segregated fund or a political action commi	ttee (PAC). If additional space	is needed, provid	de information in Part I	V.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Sch	edule C (Form 990) 2023 Race	Forward	94-2759879	Page 2
Pa		cation is exempt under section 501(c)(3)	and filed Form 5768	(election under
	section 501(h)).			
4	Check if the filing organization	belongs to an affiliated group (and list in Part I\	/ each affiliated group m	ember's name,
		, and share of excess lobbying expenditures).		
3	Check if the filing organization	checked box A and "limited control" provisions	apply.	
	Limits on Lob	oying Expenditures	(a) Filing	(b) Affiliated
		eans amounts paid or incurred.)	organization's totals	group totals
		ıblic opinion (grassroots lobbying)	250,000	
ı		egislative body (direct lobbying)	250,000	
(c Total lobbying expenditures (add lines 1a a	nd 1b)	500,000	
(-l Other		25,434,156	
(Total exempt purpose expenditures (add lin	es 1c and 1d)	25,934,156	
	f Lobbying nontaxable amount. Enter the am			
	columns.		1,000,000	
	If the amount on line 1e, column (a) or (b) is	The lobbying nontaxable amount is:		
	not over \$500,000,	20% of the amount on line 1e.		
	over \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.		
	over \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.		
	over \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000.		
	over \$17,000,000,	\$1,000,000.		
,	g Grassroots nontaxable amount (enter 25%	of line 1f)	250,000	
	h Subtract line 1g from line 1a. If zero or less		0	
	i Subtract line 1f from line 1c. If zero or less		0	
	j If there is an amount other than zero on eit	her line 1h or line 1i, did the organization file Form 47	20	
	reporting section 4911 tax for this year?			Yes No
		4-Year Averaging Period Under Section 501	(h)	
	(Some organizations that made	a section 501(h) election do not have to com	` '	umns below.
	` •	the separate instructions for lines 2a throu	•	
		•		
	l obl	wing Expenditures During 4-Vear Averaging	Period	

L	obbying Expenditu	res During 4-Year	Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a Lobbying nontaxable amount	801,503	937,835	1,000,000	1,000,000	3,739,338
b Lobbying ceiling amount (150% of line 2a, column (e))					5,609,007
c Total lobbying expenditures	26	63	854	500,000	500,943
d Grassroots nontaxable amount	200,376	234,459	250,000	250,000	934,835
e Grassroots ceiling amount (150% of line 2d, column (e))					1,402,253
f Grassroots lobbying expenditures			157	250,000	250,157

Schedule C (Form 990) 2023

DAA Schedule C (Form 990) 2023

Schedule C (Form	990) 2023	Race	For	rward		94-2759	879	Page 4
Part IV	Supplemental	Informa	tion	(continued)				
				(00000000000000000000000000000000000000				

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990,

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

2023
Open to Public Inspection

Name of the organization Employer identification number 94-2759879 Race Forward Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year _____ Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II **Conservation Easements** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a **b** Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included on line 2a 2c d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB 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 XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, 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 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 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items. a Revenue included on Form 990, Part VIII, line 1 \$ **b** Assets included in Form 990, Part X

	rt III Organizations Maintaining		of Art, Historica	l Treasures,	or Other S	imilar Ass	sets (co	ontinued)
	Using the organization's acquisition, accessi collection items (check all that apply).	on, and other record	ds, check any of the	following that ma	ake significant u	use of its	,	
а	Public exhibition	d 🗌	Loan or exchange p	rogram				
b	Scholarly research	е 🗌	Other					
С	Preservation for future generations	_						
4	Provide a description of the organization's c	ollections and expla	in how they further t	ne organization's	exempt purpos	se in Part		
	XIII.							
	During the year, did the organization solicit assets to be sold to raise funds rather than		·	•			Ye	s No
	rt IV Escrow and Custodial A		,					
	Complete if the organization 990, Part X, line 21.	•	es" on Form 990,	Part IV, line	9, or reporte	ed an amo	unt on	Form
1a	Is the organization an agent, trustee, custoo	lian or other interme	ediary for contribution	s or other assets	s not			
	included on Form 990, Part X?						. 🗌 Ye	s 🗌 No
b	If "Yes," explain the arrangement in Part XII				,			
							Amount	<u> </u>
С	Beginning balance					1c		
d	Additions during the year					1d		
е	Distributions during the year					1e		
	Ending balance					1f		
2a	Did the organization include an amount on F	Form 990, Part X, lir	ne 21, for escrow or	custodial accoun	t liability?		. 🗌 Ye	s 🗌 No
b	If "Yes," explain the arrangement in Part XIII	I. Check here if the	explanation has been	n provided on Pa	art XIII			
Pa	rt V Endowment Funds							
	Complete if the organization	n answered "Ye	s" on Form 990,	Part IV, line	10.			
		(a) Current year	(b) Prior year	(c) Two years b	back (d) Thre	ee years back	(e) Four	years back
1a	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains, and							
	losses							
d	Grants or scholarships							
	Other expenditures for facilities and							
	programs							
	Administrative expenses							
	End of year balance							
	Provide the estimated percentage of the cur	rent year end balan	ce (line 1g, column (a)) held as:	•			
	Board designated or quasi-endowment	-	, , ,	.,				
	Permanent endowment %							
	Term endowment %							
	The percentages on lines 2a, 2b, and 2c sh	ould equal 100%.						
3a	Are there endowment funds not in the posse	ession of the organi	zation that are held a	and administered	for the			
	organization by:	· ·					ſ	Yes No
	(i) Unrelated organizations?						3a(i)	
	(!!) Dalatad annonination 0						10 - /::\ 1	
	If "Yes" on line 3a(ii), are the related organization							
	Describe in Part XIII the intended uses of the							<u> </u>
	rt VI Land, Buildings, and Equ							
	Complete if the organization		s" on Form 990.	Part IV. line	11a. See Fo	rm 990. F	art X. li	ne 10.
	Description of property	(a) Cost or other		other basis	(c) Accumulate		(d) Book	
		(investment)	(ot	ner)	depreciation			
	Land							
b	Buildings		1.3	01,891	486,	123	81	5,768
c	Leasehold improvements			35,262		466		0,796
	Equipment		4	68,448	345,			3,322
	Other			,				-,- <u>-</u>
	. Add lines 1a through 1e. (Column (d) must	equal Form 990. Pa	art X, line 10c, colum	n (B))			95	9,886
	5 - (= (=) (=)	,	,,	. //				,

Part VII	Investments – Other Securities Complete if the organization answered "Yes" or	n Form 990, Part IV,	line 11b. See Form 990, Part X, line 1	2.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
(1) Financial	down with you		Cost of end-of-year market value	
	eld equity interests			
(A)				
(B)				
(C)				
(D)				
(E)				
. (F)				
(G)				
(H)				
	n (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII	Investments – Program Related	= 000 B + N/		_
	Complete if the organization answered "Yes" or			<u>3.</u>
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
(4)			Cost of end-of-year market value	
(1)				
(2)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colum	n (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX	Other Assets			
	Complete if the organization answered "Yes" or	n Form 990, Part IV,		5.
	(a) Description		(b) Book value 2,175,	701
(1)	Right-to-use Asset		2,1/5,	/ U T
(2)				
(3)				-
(4) (5)				
(6)				
(7)				
(8)				
(9)				
•	n (b) must equal Form 990, Part X, line 15, col. (B))		2,175,	701
Part X	Other Liabilities			
	Complete if the organization answered "Yes" o	n Form 990, Part IV,	line 11e or 11f. See Form 990, Part X	٠,
	line 25.			
1.	(a) Description of liability		(b) Book value	
	income taxes		2 266 9)1 E
	ating Lease Liability		2,266,8)TO
(3)				
(4)				
(5) (6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, line 25, col. (B))		2,266,8	315
	uncertain tax positions. In Part XIII, provide the text of the fo	ootnote to the organization		

Pa	Reconciliation of Revenue per Audited Financial States Complete if the organization answered "Yes" on Form 990,			Retu	irn
1	Total revenue, gains, and other support per audited financial statements			1	28,381,415
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			•	20/301/113
	Net unrealized gains (losses) on investments	2a	1,294,014		
a h	Donated convices and use of facilities	2b	1,271,011	-	
0	Donated services and use of facilities	2c		-	
4	Recoveries of prior year grants	_		-	
u	Other (Describe in Part XIII.)	Zu		2e	1,294,014
	Add lines 2a through 2d			3	27,087,401
3	Subtract line 2e from line 1			3	27,007,401
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	4a	127 222		
	Investment expenses not included on Form 990, Part VIII, line 7b	4a 4b	137,322		
	Other (Describe in Part XIII.) Add lines 4a and 4b			4c	137,322
	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 12.</i>)			5	27,224,723
	art XII Reconciliation of Expenses per Audited Financial State			-	
1 6	Complete if the organization answered "Yes" on Form 990,			CI IXC	atui ii
1	Total expenses and losses per audited financial statements			1	25,934,156
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			•	23,731,230
	Donated services and use of facilities	2a			
h	Prior year adjustments	2b		-	
C	Other losses	2c		-	
q	Other losses Other (Describe in Part XIII.)			-	
۰ م	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	25,934,156
	Amounts included on Form 990, Part IX, line 25, but not on line 1:	.]			
	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIII.)	4b			
	Other (Describe in Part XIII.) Add lines 4a and 4b			4c	
С	Add lines 4a and 4b			4c	25,934,156
5	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			-	25,934,156
5 Pa	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information			5	
5 Pa	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II	V, lines	th and 2b; Part V, line 4	5	
5 Pa Provi	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide	V, lines	: 1b and 2b; Part V, line 4 dditional information.	5 ; Part >	
5 Pa Provi	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II	V, lines	: 1b and 2b; Part V, line 4 dditional information.	5 ; Part >	
Provi 2; Pa	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide	V, lines	: 1b and 2b; Part V, line 4 dditional information.	5; Part >	K, line
Provi 2; Pa Provi	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide art X - FIN 48 Footnote the Organization follows the income tax st	V, lines e any a	and 2b; Part V, line 4 dditional information.	; Part >	n tax
Provi 2; Pa Provi	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide art X - FIN 48 Footnote the Organization follows the income tax st	V, lines e any a	and 2b; Part V, line 4 dditional information.	; Part >	n tax
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Provi 2; Pa Provi 2; Pa Provi Ti	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide art X - FIN 48 Footnote the Organization follows the income tax st	V, lines e any a anda embe	ard for uncer	5; Part >	n tax re are no
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c 5 Page Provided Pro	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provid art X - FIN 48 Footnote the Organization follows the income tax st ositions and has concluded that as of Dec ncertain tax positions taken or expected ecognition of a liability in the financia	V, lines e any a anda embe to 1	ard for uncer er 31, 2023, be taken that	5 Part > tai: the: wo	n tax re are no uld require closure.
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Pare Provided in the provided	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provid art X - FIN 48 Footnote the Organization follows the income tax st ositions and has concluded that as of Dec ncertain tax positions taken or expected ecognition of a liability in the financial	V, lines e any a anda embe to l	tatements or	5 Part > tain the: wo	n tax re are no uld require closure.
Provided the second of the sec	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provid art X - FIN 48 Footnote the Organization follows the income tax st ositions and has concluded that as of Dec ncertain tax positions taken or expected ecognition of a liability in the financial	V, lines e any a anda embe to 1	th and 2b; Part V, line 4 dditional information. ard for uncerer 31, 2023, the taken that tatements or	5 ; Part > tair the: wo	n tax re are no uld require closure.
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Provided the second of the sec	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provid art X - FIN 48 Footnote the Organization follows the income tax st ositions and has concluded that as of Decencertain tax positions taken or expected ecognition of a liability in the financia	V, lines e any a anda embe to 1	th and 2b; Part V, line 4 dditional information. ard for uncerer 31, 2023, be taken that tatements or	5 Part > tair the: wo	n tax re are no uld require closure.
Provide the provided the provid	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provid art X - FIN 48 Footnote the Organization follows the income tax st ositions and has concluded that as of Decencertain tax positions taken or expected ecognition of a liability in the financia	V, lines e any a anda embe to l	and 2b; Part V, line 4 dditional information. and for uncer ar 31, 2023, be taken that tatements or	5 ; Part >	n tax re are no uld require closure.
Provide the provided the provid	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provid art X - FIN 48 Footnote the Organization follows the income tax st ositions and has concluded that as of Deconcertain tax positions taken or expected ecognition of a liability in the financia	V, lines e any a anda embe to l	and 2b; Part V, line 4 dditional information. and for uncer ar 31, 2023, be taken that tatements or	5 ; Part >	n tax re are no uld require closure.
Provide the provided the provid	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) art XIII Supplemental Information ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provid art X - FIN 48 Footnote the Organization follows the income tax st ositions and has concluded that as of Deconcertain tax positions taken or expected ecognition of a liability in the financia	V, lines e any a anda embe to 1	th and 2b; Part V, line 4 dditional information. ard for uncerer 31, 2023, the taken that tatements or	5 Part > tain the: wo dis	n tax re are no uld require closure.

Schedule D (F	orm 990) 2023	Race I	orward	94-2759879	Page 5
Part XIII	Supplement	al Inform	Forward nation (continued)		
			(**************************************		
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SCHEDULE I (Form 990)

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047 Open to Public Inspection

Race Forward						I	14-2759879
Part I General Information on Grants an	d Assistance						
 Does the organization maintain records to substantiate the selection criteria used to award the grants or assista Describe in Part IV the organization's procedures for more 	ance?						X Yes No
Part II Grants and Other Assistance to D					Complete if the	organization	n answered "Yes" on Form 99
Part IV, line 21, for any recipient that	t received mor	e than \$	5,000. Part II can	be duplicated if	additional space	e is needed.	
1 (a) Name and address of organization	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of	(f) Method of valuation	(g) Description of	(h) Purpose of grant
or government		(if applicable)	grant	noncash assistance	(book, FMV, appraisal, other)	noncash assistance	or assistance
(1) Alliance for Global Justice							
225 E 26th St, Suite 1							Environmental justic
	52-2094677	501c3	80,000				
(2) Americans for the Arts							
1275 K Street NW, Suite 1200							National Cultural We
	52-1996467	501c3	500,000				
(3) Center for Empowered Politics Edu	ca						
1042 Grant Ave, 5th Floor							Racial justice & equ
San Fransisco CA 94133	84-3636499	501c3	135,000				
(4) Earth Care International							
6600 Valentine Way Bldg A							Environmental justic
Santa Fe NM 87507	33-1017279	501c3	80,000				
(5) Housing California							
1107 9th Street, Suite 560							Just housing
Sacramento CA 95814-3611	68-0133565	501c3	8,000				
(6) HousingNOLA							
4640 S Carrollton Ave., Suite 160							Just housing
New Orleans LA 70119	46-3546935	501c3	8,000				
(7) InAdvance							
900 Alice Street, Suite 400							People living Aphasi
Oakland CA 94607	26-0728941	501c3	25,000				
(8) LILAC							
6614 Morris Park Rd							Just housing
Philadelphia PA 19151	84-3032280	501c3	8,000				
(9) Neighborhood Partnership Inc							
120 NW 9th Avenue, Suite 216							Just housing
Portland OR 97209	91-1943624	501c3	8,000				
2 Enter total number of section 501(c)(3) and government	organizations liste	ed in the lin	ne 1 table	•	<u>'</u>		19
2 Enter total number of other organizations listed in the lin							

SCHEDULE I (Form 990)

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection

Employer identification number

OMB No. 1545-0047

Race Forward						94	4-2759879
Part I General Information on Grants ar	nd Assistance						
 Does the organization maintain records to substantiate the selection criteria used to award the grants or assist Describe in Part IV the organization's procedures for m 	ance?				ants or assistance,	and	Yes No
Part II Grants and Other Assistance to I					Complete if the	organization	answered "Yes" on Form 990
Part IV, line 21, for any recipient that							
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Open Buffalo Inc							
1327 Jefferson Ave Upper							Environmental justic
Buffalo NY 14208	47-5317696	501c3	80,000				
(2) Pittsburgh United							
841 California Avenue, 3rd Floor							Just housing
Pittsburgh PA 15212	20-8534071	501c3	8,000				
(3) Race Forward Action Inc.							
145 E 57th Street Floor 4							Support lobbying
New York NY 10022	92-0898880	501c4	500,000				
(4) Right To The City Alliance			-				
388 Atlantic Ave, 2nd Floor							Just housing
Brooklyn NY 11217	94-3462187	501c3	8,000				
(5) The Amani Collective			-				
804 W. 5th Street							Safety Eastern NC
Greenville NC 27834	87-4314187	501c3	20,000				
(6) The Opportunity Agenda			.,				
575 8th Avenue, Suite 701							Narrative Strategy
New York NY 10018	84-3935514	501c3	31,369				
(7) Third Sector New England Inc			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
89 South Street, Suite 700							Just housing
Boston MA 02111	04-2261109	501c3	8,000				
	n						
615 W 131st Street, Mall code 874							Formerly incarcerate
New York NY 10027	13-5598093	501c3	20,000				Incarcerage
(9) Washington Low Income Housing All		30100	20,000				1
100 West Harrison Street North To							Just housing
Seattle WA 98119	91-1599354	501.43	8,000				
2 Enter total number of section 501(c)(3) and governmen	1			l			1

3 Enter total number of other organizations listed in the line 1 table

SCHEDULE I (Form 990)

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047 Open to Public Inspection

Employer identification number

Race Forward						9	4-2759879	
Part I General Information on Grants ar	nd Assistance					•		
 Does the organization maintain records to substantiate the selection criteria used to award the grants or assist Describe in Part IV the organization's procedures for m 	ance?onitoring the use o	of grant fund	ds in the United States	 S.				☐ No
Part II Grants and Other Assistance to I Part IV, line 21, for any recipient that							answered "Yes" on	Form 990
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of gra or assistance	ant
(1) West Atlanta Watershed Alliance P.O. Box 10883							Environmental	justic
Atlanta GA 30310	20-0890449	501c3	80,000					
(2) VesperNina Place, Inc. 150 Porter Hill Road	07.4604061	F01 . 2	144 886				Retreat female	write
Newfield NY 14867	87-4694961	20TG3	144,776					
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
 Enter total number of section 501(c)(3) and governmen Enter total number of other organizations listed in the line 		ed in the lin	ne 1 table					

SCHEDULE J (Form 990)

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Race Forward

Employer identification number

94-2759879

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form			
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
	— — — — — — — — — — — — — — — — — — —			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	·	1b		
	explain	10		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the			
·	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	X Independent compensation consultant Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
2		4a		х
a L				X
D	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:			
а		5a		х
		5b		X
b	Any related organization?	30		-22
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
1		_		v
_	payments not described on lines 5 and 6? If "Yes," describe in Part III	7		<u> </u>
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
•	Regulations section 53.4958-6(c)?	9		

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

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

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

	(B) Breakdown of W-2	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation			
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)–(D)	in column (B) reported as deferred on prior Form 990	
Glenn Harris	(i) 282,791	. 0	0	14,117	20,178	317,086		
1 President	(ii) C	0	0	0	0	0		
Eric Ward	(i) 215,462	0	0	705	20,984	237,151		
2 Vice President	(ii) C	0	0	0	0	0		
Julie Nelson	(i) 198,878	0	0	9,921	24,037	232,836		
3 SVP, Programs	(ii) C	0	0	0	0	0		
Randall Oakley	(i) 166,882	0	0	8,321	23,011	198,214		
4 VP, Finance	(ii) C	0	0	0	0	0		
Cathy Albisa	(i) 153,635	0	0	4,085	37,174	194,894		
5 VP Inst & Sec Change	(ii) C	0	0	0	0	0		
Magnada Dory	(i) 154,723	0	0	3,064	36,922	194,709		
6 VP Human Resources	(ii) C	0	0	0	0	0		
Cheryl Blakemore	(i) 161,049	0	0	3,669	26,667	191,385		
7 VP, Strategic Comms	(ii) C	0	0	0	0	0		
Faron McLurkin	(i) 150,447	0	0	1,513	21,993	173,953		
8 SVP, Dev. & Part.	(ii) C	0	0	0	0	0		
Charlene Sinclair	(i) 148,777	0	0	2,373	12,715	163,865		
9 Chief of Staff	(ii) C	0	0	0	0	0		
	(i)							
10	(ii)							
	(i)							
11	(6)							
42	(ii)							
12	(i)							
13	(ii)							
	(i)							
14	(i)							
15	(ii)							
	(i)							

Schedule J (Form 990) 2023

Schedule J	(Form 990) 2023 Race Forward Supplemental Information	94-2759879	Page 3
Part III	Supplemental Information		
Provide the	he information, explanation, or descriptions require additional information.	ed for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and	for Part II. Also complete this part
• • • • • • • • • • • • • • • • • • • •			
• • • • • • • • • • • • • • • • • • • •			

SCHEDULE O (Form 990)

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Open to Public Inspection

Schedule O (Form 990) 2023

Race Forward

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

94-2759879

Employer identification number

Form 990, Part III, Line 4a - First Accomplishment
For more than 40 years, Race Forward has brought a systemic analysis and ar
innovative approach to complex race issues to help people take effective
action toward racial equity.
Our Vision and Mission:
-VISION: Race Forward imagines a just, multiracial, democratic society,
free from oppression and exploitation, in which people of color thrive with
power and purpose.
-MISSION: Race Forward catalyzes racial justice movement building. In
partnership with communities, organizations, and sectors, we build
strategies to advance racial justice in our policies, institutions, and
culture.
Theory of Change:
-Grow Power: We need connected and aligned networks of people,
organizations, and movements to build the collective power (economic,
social, political, etc.) necessary to counter structural racism and steward
transformative solutions for racial justice.
-Transform Culture: We must harness the power of narrative, arts, and
culture to assert the full humanity of communities of color, challenge
racist ideologies that fuel structural racism, and envision a more just and
equitable future.
-Transform Policy: We must position communities of color and other
historically oppressed communities as leaders and decision-makers in the

Schedule O (Form 990) 2023 Page 2

Name of the organization

Race Forward

Page Forward

Employer identification number

94-2759879

policy-making process to create racially equitable policies at all levels.

-Transform Institutions/Sectors: Institutions across multiple sectors of society (e.g. government, philanthropy, non-profit, private, etc.) must operationalize racial equity in their policies, practices, programs, and products.

2023 Programmatic Achievements

Institutional and Sectoral Change: Establishes sustainable racial equity practice in sectors by facilitating Learning Cohorts, developing tools for long-term change, and tracking shifts that demonstrate success. Our Government Alliance on Race and Equity (GARE), a network of local and regional government jurisdictions, our Federal Initiative to Govern for Racial Equity (FIRE), and our Housing, Land and Development Network (HLDN), launched in 2023, are housed in this department.

Select Highlights:

- -GARE hosted 3 convenings (+1,000 participants total) and 18 online programs for racial equity practitioners from member jurisdictions and agencies.
- -HLDN hosted monthly virtual programming.
- -GARE released Advancing Racial Equity in Housing, Land, and Development, a toolbox to help housing and planning agencies transform their organizations and develop race-informed policies.
- -With Place Based Strategies team began an engagement with the One Central Providence coalition; workshop for 30 members of Providence's housing justice community resulted in establishing 2024/2025 priorities agenda.

 -FIRE engaged +1,000 civil servants across 20 federal agencies through

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intake meetings; trainings; webinars; policy briefs; summits; and senior executive service member meetings.

- -FIRE launched an e-newsletter (ILLUMINATE) and a Senior Executive Service (SES) Racial Equity Collaborative.
- -Race Forward's President Glenn Harris spoke at the 2023 White House Convening on Equity.
- -FIRE and GARE drafted a response to proposed updates and offered public comments on SDP-15, which will inform the 2030 Census.
- -FIRE curated two features and presented subsequent panels at the
 Environmental Film Festival and conducted training at the National
 Environmental Justice Conference.
- -Race Forward and PolicyLink published the "Assessment of Federal Equity Action Plans," a review of 30 of the 90 federal agencies and departments' Equity Action Plans (EAPs).

Movement Capacity Building: Builds leadership and capacity of grassroots and other organizations within communities of color.

Select Highlights:

- -Multiple news articles and six op-eds featured HEAL Together and partners (Washington Post, Inside Philanthropy Teen Vogue, Hechinger Report, and Chalkbeat, among others).
- -Started a HEAL StoryCorner with video stories from students, parents, educators, community advocates, and school board members.
- -Released two HEAL Together videos on the impact of attacks on public education and how communities are organizing to transform public schools.
- -Released HEAL Together Organizing and Narrative Toolkit 2.0 and HEAL

Schedule O (Form 990) 2023 Page 2 Employer identification number Name of the organization Race Forward 94-2759879 Together Equity Policies Toolkit for School Boards for parents, educators, students, and school board members. -Provided training on effectively telling stories to achieve education justice. Narrative, Communications and Storytelling (NCS): Works across the organization to develop and share tools to advance and amplify enduring narratives that advance racial justice. Select Highlights: -Recorded Momentum podcast at the White House with Chiraag Bains, then-Deputy Assistant to the President and Deputy Director of the Domestic Policy Council for Racial Justice and Equity. -Joined with the American Medical Association and healthcare organizations in Rise to Health: A National Coalition for Equity in Health Care. -Partnered with PolicyLink and Community Change on the Housing Justice Narrative Initiative; contributed to PolicyLink's The Housing Justice Narrative Toolkit; launched a Visual Storytelling Fund, a sub-grant for local partners; and released the Housing is a Basic Human Need: A Messaging Guide for Housing Justice. -Produced and released 18 videos on Colorlines (a short documentary People's Action; 6 videos created with GARE and HEAL; 3 responding to Supreme Court/Affirmative Action Decision and Attacks on Public Education).

-Produced podcast episode on creating narratives power.

formerly incarcerated women.

-Hosted 3 Live Virtual Events (a weeklong teach-in and discussion about

-Produced full-length documentary "Women Transcend," in collaboration with

Schedule O (Form 990) 2023 Page 2 Employer identification number Name of the organization Race Forward 94-2759879 Juneteenth, and webinar discussions on building a multi-racial democracy and Asian Americans and anti-Blackness) Research: Conducts applied research uplifting the experiences of those directly affected by institutional and structural racism and provides race-explicit solutions in their work. Select Highlights: -Helped inform Strategic Imperative 3 working group, contributed to organizational strategic planning engagement sessions, engaged staff on the needs for research and evaluation. -Continued work on the University of Southern California: Fair Representation in Redistricting; conducted 20+ interviews with grassroots organizations, analyzed qualitative data, and wrote state reports for Alabama, Mississippi and Georgia. -With MCB, engaged with the Policy Innovation Lab and partners, providing Research Justice guidance and support. -Led the archival data collection process of over 100 grassroots organizations, and engaged in deep interviews with 30+ movement leaders for Mass Freedom. Cross-Departmental Initiatives

Place-Based Strategies: Creates localized spaces where people come together across issues and sectors to develop long-term strategies that build power and resources in communities of color.

-Seated the Sacramento Racial Equity Council (REC) to work in partnership with the Racial Equity Alliance, the City Council, and City manager to

Page 4 of 7

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Schedule O (Form 990) 2023 Page 2

Name of the organization

Race Forward

94-2759879

create and institutionalize key policy, procedural and cultural shifts for racial equity.

- -REC conducted a strategy summit to develop roles, work group structures, and to prepare for the implementation of the Truth-Telling & Trust Building phase of their collaboration with the city.
- -Created the SCORE (Sacramento Centered on Racial Equity) initative to produce community of color-driven racial equity legislation.
- -Coalition Against Racism (CAR) of Pitt County, NC was instrumental in the development of a new local environmental justice group, North of the Tar River Association (NOTRA), which, succeeded in preventing the development of a proposed data-mining center for cryptocurrency within 1500 yards of a majority Black, Latino and youth of color school.

Training Strategies

- -Delivered 70+ client trainings to approximately 800+ people.
- -Delivered 35+ public trainings to 1,100+ participants.
- -Launched Facilitating for Racial Equity, a workshop equipping participants with skills, frameworks, and practice needed to facilitate a racial equity workshop.
- -Adapted the Decision-Making for Racial Equity training to include a tailored client-focused format that can be offered in-person/on-site, or as a series of engagements.
- Form 990, Part VI, Line 11b Organization's Process to Review Form 990

 The Vice President of Finance and members of the Finance Department review the prepared draft of the Form 990. After their review and approval. the draft is reviewed by counsel. A final draft is circulated to the full

Schedule O (Form 990) 2023 Page 2 Employer identification number Name of the organization Race Forward 94-2759879 Board of Directors, and the executive staff of the organization, before filing. Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy Board Members complete conflict of interest policy disclosure statements annually. The President and Executive Committee of the board track any potential conflicts. When potential conflicts are identified, they are disclosed to the full Board of Directors and the potentially conflicted Director is excused from all related conversations. The Executive Committee of the board monitors and enforces compliance with the policy and takes such other actions as are necessary for effective oversight. Form 990, Part VI, Line 15a - Compensation Process for Top Official Independent members of the Board, without the President's participation, periodically do a compensation review as part of the President's yearly performance evaluation. They examine published data on non-profit salaries to determine comparable compensation levels. The results of the review are then discussed with the President and a final compensation recommendation is approved by the Board. Routinely, market data surveys are compiled for all positions of the organization, reviewed by management, and when necessary, salaries are updated. Form 990, Part VI, Line 15b - Compensation Process for Officers Routinely, market data surveys are compiled for all positions of the organization, reviewed by management, and when necessary, salaries are

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Page 6 of 7

updated.

Schedule O (Form 990) 2023 Page 2 Name of the organization Employer identification number Race Forward 94-2759879 Form 990, Part VI, Line 17 - Other States Where Copy of Return is Filed Ohio, Oregon, Rhode Island, Utah, Kentucky, New Hampshire, New Jersey, North Carolina Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Race Forward's Form 990 and yearly audited financial statements are available upon request. Requests for all other documents are made on a case-by-case basis. Form 990, Part IX, Line 11g - Other Fees for Services Description Tot/Prog Service Mgt & General Fundraising Professional services \$ 4,042,497 \$ 302,631 \$ 115,235 Consulting services \$ 1,554,181 \$ 0 \$ Staff development \$ 500 \$ 99,099 \$ 0 Temporary staff agencies \$ 14,300 \$ 756,307 \$ Total \$ 5,611,478 \$ 1,158,037 \$ 115,235 Page 7 of 7

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

2023

Open to Publi Inspection

Employer identification number

Race Forward 94-2759879 **Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I (b) (e) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) (1) (2) (3) (4) (5) Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had Part II one or more related tax-exempt organizations during the tax year. (g) Section 512(b)(13) controlled entity? (d) (e) Legal domicile (state Public charity status Name, address, and EIN of related organization Primary activity Direct controlling Exempt Code section (if section 501(c)(3)) or foreign country) Yes No Race Forward Action 145 E 57th St, 4th Fl 92-0898880 New York NY 10022 501c4 Advocacy NY Race Forwa Х (2) Equity Action 900 Alice Street 20-3745400 Oakland CA 501c4 CA 94607 Advocacy Race Forwa Х (3) (4)

(5)

Schedule F	R (Form 990) 2023 Race Forward				759879										Page	<u>e</u> 2
Part III	Identification of Related Organiza because it had one or more related	tions Taxab organizations	le as s trea	a Partnershoted as a part	nip. Complete in ership during	f the organ the tax yea	ization answere ar.	ed "Ye	s" o	n F	orm 99	0, Part I	IV, li	ne 3	4,	
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of tot income	(g)		Disportion allo	pro- onate oc.?	amoun of Sch	(i) e V—UBI at in box 20 nedule K-1 m 1065)	Gene man part	aging ner?	(k) Percentac ownershi	je p
(1)			country)		Sections 512-514)				Yes	No			Yes	No		_
(2)																
(3)																
(4)																
Part IV	Identification of Related Organization 34, because it had one or more	tions Taxab related orga	le as ınizati	a Corporati	on or Trust. Cas a corporation	complete if	the organization	n ansv ar.	vere	d "\	Yes" or	1 Form 9	990,	Part	IV,	
	(a) Name, address, and EIN of related organization	(b) Primary activ		(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp or trust)	(f) Share of total			(g) hare c	of	(h) Percen owners) itage	5	(i) Section 512(b)(13 controlled entity?	3) d
(1)														Y	es N	0
•		_														
(2)														+		_
(3)																_
(4)														+		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

94-2759879

No	te: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	Nο					
		nizationa lieta	d in Dorto II IV/2			163	140					
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II—IV?												
a h	a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity											
D	b Gift, grant, or capital contribution to related organization(s)											
ر	c Gift, grant, or capital contribution from related organization(s)											
a	d Loans or loan guarantees to or for related organization(s)											
e Loans or loan guarantees by related organization(s)												
	f Dividends from related organization(s)											
I 	f Dividends from related organization(s)											
9	g Sale of assets to related organization(s)											
n :	Purchase of assets from related organization(s)				1h		X					
	Exchange of assets with related organization(s)				1i		X					
J	Lease of facilities, equipment, or other assets to related organization(s)				<u>1j</u>		^					
					4.		х					
K	Lease of facilities, equipment, or other assets from related organization(s)				1k		X					
I	Performance of services or membership or fundraising solicitations for related organization(s)				11							
m	Performance of services or membership or fundraising solicitations by related organization(s)				1m		Х					
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n 1o	X						
o Sharing of paid employees with related organization(s)												
р	Reimbursement paid to related organization(s) for expenses				1p		Х					
q	Reimbursement paid by related organization(s) for expenses				1q	х						
r	Other transfer of cash or property to related organization(s)				1r		X					
	Other transfer of cash or property from related organization(s)				1s		Х					
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, incl	luding covere	d relationships and trans	action thresholds.								
		(b)	(c)	(d)								
		saction e (a-s)	Amount involved	Method of determining amo	unt invol	/ed						
		, ,										
		_										
(1)	Race Forward Action	b	500,000	Fair Market Val	ue							
(2)	Race Forward Action	0	69,799	Fair Market Val	ue							
(3)												
(4)												
(5)												
(6)												

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

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

country)	sections 512-514)		ations?		(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)		ier?	r Percentage ownership	
	300	Yes	No		Yes	No		Yes	No		

Schedule R (Form 990) 2023 Race Forward			94-2759879						
Part VII	Supplement Provide add	i tal Inf ditional i	ormation. information for	or responses t	to auestions	on Schedul	e R. See instru	ctions.	
							<u> </u>		