** PUBLIC DISCLOSURE COPY **

Form **990**

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Open to Public

Inspection

AI	רטו נוונ	e 2020 calendar year, or tax year beginning and end	iiig		
В	Check if applicabl	C Name of organization		D Employer identifi	cation number
X	Addre				
	Name chang	Doing business as		27-05974	30
	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Roo	m/suite	E Telephone numbe	r
	Final return	463 LINCOLN PLACE 24	1	(888)414	
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	9,838,069.
Г	Amen			H(a) Is this a group re	
F	Applic			for subordinates	
	pendi	SAME AS C ABOVE		H(b) Are all subordinates i	
_	T-11 -11		527	1	
		empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or L te: ► WWW • ACCESSNOW • ORG	327	1	list. See instructions
				H(c) Group exemption	
			L Year	of formation: 2009	M State of legal domicile: CA
Pi	art I	Summary	3707.7	, DEEDLIDG 111	D HUMBUDA
é	1	Briefly describe the organization's mission or most significant activities: ACCESS	NOW	DEFENDS AN	D EXTENDS
au		THE DIGITAL RIGHTS OF USERS AT RISK AROUND	THE	WORLD.	
ern	2	Check this box if the organization discontinued its operations or disposed	of more	than 25% of its net a	
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	8
9	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	7
es	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)		5	31
į	1	Total number of volunteers (estimate if necessary)			7
Activities & Governance	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
⋖		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
		······································		Prior Year	Current Year
4	8	Contributions and grants (Part VIII, line 1h)		5,170,787.	9,773,868.
Jue	1			1,146,734.	0.
Revenue		Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		3,579.	13,375.
Re				-157,698.	50,826.
	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		6,163,402.	9,838,069.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		788,078.	1,638,906.
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	1,030,900.
	1	Benefits paid to or for members (Part IX, column (A), line 4)			
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		3,088,050.	4,215,238.
ens	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
χ̈	b			2 020 515	0 541 500
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,232,717.	
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		7,108,845.	8,395,724.
	19	Revenue less expenses. Subtract line 18 from line 12		-945,443.	1,442,345.
s or			Ве	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		3,767,390.	5,893,965.
t As	21	Total liabilities (Part X, line 26)		1,439,541.	2,123,771.
Net Assets or Fund Balances	22	Net assets or fund balances. Subtract line 21 from line 20		2,327,849.	3,770,194.
Pa	art II	Signature Block			
Und	ler pena	lties of perjury, I declare that I have examined this return, including accompanying schedules and	d statem	ents, and to the best of m	y knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which	preparer	has any knowledge.	
		In ouran		11/12/2021	
Sig	n	Signature of officer		Date	
Hei		▶ BRETT SOLOMON, EXECUTIVE DIRECTOR			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Pai	d	RICHARD J. LOCASTRO, CPA		11/12/21 if self-employ	P00288314
	- parer	Firm's name GELMAN, ROSENBERG & FREEDMAN		oon omploy	52-1392008
	Only	Firm's address 4550 MONTGOMERY AVE SUITE 800N		THIIISLIN	
550	- Jy	BETHESDA, MD 20814-2930		Dhone no / 3	01) 951-9090
N 4 = 1	, +b = ''			FIIOIIE IIO. (3	
ivia	y ine H	RS discuss this return with the preparer shown above? See instructions			🔼 Yes 📖 No

2020.05000 ACCESS NOW

including grants of \$

6,658,431.

Other program services (Describe on Schedule O.)

Total program service expenses

Form 990 (2020) ACCESS NOW Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	_	х	
_	If "Yes," complete Schedule A	2	X	-
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	21	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
7	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	<u> </u>		
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			X
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		- 25
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	- '-		
Ū	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	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	11c		х
Ч	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	110		
•	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
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	Х	ļ
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	37	Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
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	441.	Х	
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b	21	
13	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
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	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		Х	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Λ	

032003 12-23-20

Form 990 (2020)

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Partiv	Checklist of Required Schedules	continuea)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	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		
25 a	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		Х
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		Х
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		Х
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		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
	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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		77	
	If "Yes," complete Schedule R, Part V, line 2	36	Х	
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 in Schedule O for Part VI, lines 11b and 19?		37	
Da:	Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	38	Х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			<u> </u>
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	терительный при			
	Effect the Hamber of Forms W 2d included in line 1a. Effect of thot applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	4.	X	
	(gambling) winnings to prize winners?	1c	Λ	

032004 12-23-20

Form 990 (2020) ACCESS NOW

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

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 31			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X	
b	If "Yes," enter the name of the foreign country ► COSTA RICA, TUNISIA			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			37
_	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
oa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		x
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- Oa		
b	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7с		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
•	sponsoring organization have excess business holdings at any time during the year? N/A	8		
9	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a		
a b	Did the sponsoring organization make any taxable distributions under section 4966? N/A Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9a 9b		
10	Section 501(c)(7) organizations. Enter:	30		
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
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? N/A	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
a	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
_				
с 14а		14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		 -
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	· · · ·		
•	excess parachute payment(s) during the year?	15		Х
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
		Farm	AQQ.	(2020)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			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 1	3		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b	7		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
	officer, director, trustee, or key employee?	2		Х
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?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a				
	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	1		
_	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	1.5		
	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
•	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	1.55	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100		
_	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b				
12a	and the second s	12a	Х	
b		12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
·	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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	
	Other officers or key employees of the organization	15b	X	
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	10.0		
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		Х
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	100		
<u> 17</u>	List the states with which a copy of this Form 990 is required to be filed ►CA , NY			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only	/) avail	able
	for public inspection. Indicate how you made these available. Check all that apply.	-,- 5111	,, 4,411	
	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 interest policy, a	nd fina	ncial	
	statements available to the public during the tax year.	iiia	o.ai	
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	BRETT SOLOMON - (888) 414-0100			
	463 LINCOLN PLACE NO 241 BROOKLYN NV 11238			

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

See instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per	box,	not c unle	ss pe	ition more rson	than is bot	h an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) BRETT SOLOMON EXECUTIVE DIRECTOR/SECRETARY	1.00	х		х				152,833.	0.	14,690.
(2) JOSEPH STEELE CHIEF OPERATING OFFICER	40.00			х				135,000.	0.	15,059.
(3) ERIC NULL	40.00			21						
U.S. POLICY MANAGER (4) PETER MICEK	40.00					Х		125,000.	0.	12,979.
GENERAL COUNSEL & UN POLICY MANAGER (5) NERIDA BROWNLEE	0.00					Х		122,400.	0.	14,351.
DIRECTOR OF FINANCE AND H.R.	0.00					х		124,005.	0.	6,762.
(6) BILLIE GOODMAN GRANTS PROGRAM DIRECTOR	40.00					х		109,032.	0.	14,946.
(7) BRYAN ROGERS PEOPLE EXPERIENCE DIRECTOR	40.00					x		102,549.	0.	17,913.
(8) ANDREW MCLAUGHLIN PRESIDENT	4.00	v		х				0.	0.	0.
(9) ANDREW COHEN	4.00									
TREASURER (10) ARZU GEYBULLA	1.00			Х				0.	0.	0.
DIRECTOR (11) BRUCE SCHNEIER	0.00 4.00	Х						0.	0.	0.
DIRECTOR	0.00	Х						0.	0.	0.
(12) MARIEJTE SCHAAKE DIRECTOR	0.00	х						0.	0.	0.
(13) DONNA MCKAY DIRECTOR	4.00 0.00	х						0.	0.	0.
(14) EMNA MIZOUNI DIRECTOR	4.00	х						0.	0.	0.
032007 12-23-20	-									Form 990 (2020)

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,	, and	d Hi	ghe	st C	Compensated Employe	es (continued)				
(A)	(B)			((C)			(D)	(E)			(F)	
Name and title	Average	(do			itior more	than o	one	Reportable	Reportable		Esti	mate	: d
	hours per	box	, unles	ss pe	rson	is botl or/trus	n an	compensation	compensation			ount (of
	week (list any	-				,,, uo	.00,	from the	from related organizations		comp	ther	tion
	hours for	direct				p		organization	(W-2/1099-MIS	C)		m the	
	related	tee or	ustee			ensate		(W-2/1099-MISC)	,	´		nizati	
	organizations	al trus	onal tr		loyee	comp						relate	
	below line)	ndividual trustee or director	nstitutional trustee	Officer	key employee	Highest compensated employee	Former				orgar	nizatio	ons
		드	드	Of	- S	Hi en	요						
										Ì			
								070 010			0.0	7	
1b Subtotal								870,819.		0.	96	, /	00.
c Total from continuation sheets to Part VI							>	870,819.		0.	9.6	7	$\frac{0.}{00.}$
d Total (add lines 1b and 1c)							<u> </u>		000 of reportable	• •		, ,	•••
compensation from the organization	ot inflitted to th	1030	11310	u ai	DOV.	<i>5)</i> WI	10 1	cocived more than \$100	,000 or reportable				9
											1	Yes	No
3 Did the organization list any former officer,	director, trust	ee, ł	кеу е	emp	loye	e, or	hiç	ghest compensated emp	oloyee on				
line 1a? If "Yes," complete Schedule J for s	uch individual									[3		X
4 For any individual listed on line 1a, is the su	•							•	•			_	
and related organizations greater than \$150											4	Х	
5 Did any person listed on line 1a receive or a					•		elat	ted organization or indivi	dual for services		_		X
rendered to the organization? If "Yes," com Section B. Independent Contractors	piete Scriedui	e J T	or st	icn _i	pers	son .					5		
Complete this table for your five highest co	mnensated inc	dene	ende	nt c	onti	racto	rs 1	that received more than	\$100,000 of com	nens:	ation fr	nm .	
the organization. Report compensation for	•	•								,01100	2001111	5111	
(A)								(B)			(C)		
Name and business								Description of s	ervices	C	ompen		n
GUSTAF BJORK, C/O 463 LII	NCOLN PI	JA(CE,	, ‡	12	41,							
BROOKLYN, NY 11238								CHIEF TECHNO			112	, 2	<u>23.</u>
FABIO BARDELLO, C/O 463 I	TUCOLN	PΙ	JAC	ĽΕ	,		- 1	SENIOR SYSTE			100	_	4.0
#241, BROOKLYN, NY 11238	TOOT NE DE	- 7.	יתי	- 4	! 	11		ADMINISTRATO	R		108	, 2	<u>48.</u>
MELODY PATRY, C/O 463 LII BROOKLYN, NY 11238	исопи ы	JA(-C,	, †	T 4	±⊥,		ADVOCACY DIR	ECTOR		101	Q.	4 3
DROOKLIN, NI 11230							\dashv	TO A OCUCI DIV	10101		T 0 T	, 0	<u> </u>
							\neg						
2 Total number of independent contractors (i	ncluding but n	ot li	mita	4 +0	tho	مم اند	+00	d shous) who received m	ore then				

Form **990** (2020)

\$100,000 of compensation from the organization

Form 990 (2020) ACCESS I ACCESS NOW

			Check if Schedule O contains a response	or note to any lin	ne in this Part VIII			
			·	<u> </u>	(A)	(B)	(C)	_ (D)
					Total revenue	Related or exempt	Unrelated	Revenue excluded
						function revenue	business revenue	from tax under sections 512 - 514
SS	_							000110110 0 12 0 1 1
ant			Federated campaigns 1a					
윤일			Membership dues 1b					
ξţ			Fundraising events 1c					
ia gi		d	Related organizations 1d	004 500				
Contributions, Gifts, Grants and Other Similar Amounts		е	Government grants (contributions) 1e 5	,991,730.				
흔		f	All other contributions, gifts, grants, and					
ള			similar amounts not included above 1f 3	,782,138.				
d C		g	Noncash contributions included in lines 1a-1f 1g \$					
a C		h	Total. Add lines 1a-1f		9,773,868.			
				Business Code				
ø	2	а						
ا کج		b						
Ser		c						
E Š		d						_
Pg		~						
Program Service Revenue		_	All other program contine revenue					
			All other program service revenue					
	3	y	Total. Add lines 2a-2f					
	3				13,375.			13,375.
			other similar amounts) Income from investment of tax-exempt bond		13,373.			13,373.
	4		•	•				
	5		Royalties	(ii) Personal				
	_			(II) Personal				
			Gross rents 6a					
			Less: rental expenses 6b					
			Rental income or (loss) 6c					
			Net rental income or (loss)					
	7	а	Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a					
o l		b	Less: cost or other basis					
Revenue			and sales expenses					
eve		С	Gain or (loss) 7c					
ت R			Net gain or (loss)	<u></u>				
ther	8	а	Gross income from fundraising events (not					
0			including \$ of					
			contributions reported on line 1c). See					
			Part IV, line 18					
			Less: direct expenses 8)				
			Net income or (loss) from fundraising events	_				
	9	а	Gross income from gaming activities. See					
			Part IV, line 19					
			Less: direct expenses 9	<u> </u>				
			· · · · · ·	<u></u>				
	10	а	Gross sales of inventory, less returns					
			and allowances10					
		b	Less: cost of goods sold10	b				
		С	Net income or (loss) from sales of inventory					
જ્				Business Code	F0 006			F0 006
Miscellaneous Revenue	11	а	CURRENCY GAIN	900099	50,826.			50,826.
lan		b						
Se Se		С						
Mis			All other revenue		F0 006			
		е	Total. Add lines 11a-11d		50,826.			64 001
	12		Total revenue. See instructions		9,838,069.	0.	0.	64,201.

032009 12-23-20

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Da	Check if Schedule O contains a respon not include amounts reported on lines 6b,	(A)	this Part IX	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations	F4 F06	F4 F06		
	and domestic governments. See Part IV, line 21	54,506.	54,506.		
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	1,584,400.	1,584,400.		
	individuals. See Part IV, lines 15 and 16	1,304,400.	1,304,400.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	317,582.	212,333.	76,304.	28,945
	trustees, and key employees	317,302.	212,333.	70,304.	20,945
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B)	3,154,841.	2,109,304.	757,998.	287,539
7	Other salaries and wages Pension plan accruals and contributions (include	3,131,041.	2,102,304.	131,330•	201,333
8	section 401(k) and 403(b) employer contributions)	93,418.	61,964.	22,791.	8,663
0		347,614.	230,351.	100,852.	16,411
9 10	Other employee benefits	301,783.	200,331.	73,479.	27,921
	Payroll taxes	301,703.	200,303.	73,4736	21,521
11	Fees for services (nonemployees):				
	Management	10,049.	10,049.		
b	Legal	89,606.	89,606.		
c C	Accounting	03,000.	03,000.		
	Lobbying				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch 0.)	1,477,475.	1,391,586.	85,889.	
12	Advertising and promotion			00,000	
13	Office expenses	89,766.	26,869.	62,663.	234
14	Information technology	168,260.	146,408.	21,775.	77
15	Royalties				
16	Occupancy	179,422.	129,104.	36,327.	13,991
17	Travel	74,333.	45,011.	22,381.	6,941
18	Payments of travel or entertainment expenses	,	,	,	- , -
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	315,685.	315,114.	436.	135
20	Interest	, , , , , ,	,		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	18,190.	12,162.	4,370.	1,658
23	Insurance	13,094.	22.	13,072.	,
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 0.)				
а	EQUIPMENT	58,706.	22,010.	26,065.	10,631
b	STAFF DEVELOPMENT	37,386.	15,883.	21,503.	
c	PAYROLL FEES	6,632.	943.	5,689.	
d	VAT	1,451.	206.	1,245.	
	All other expenses	1,525.	217.	1,308.	
25	Total functional expenses. Add lines 1 through 24e	8,395,724.	6,658,431.	1,334,147.	403,146
26	Joint costs. Complete this line only if the organization	-	-	-	<u> </u>
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

27-0597430 Page **11** Form 990 (2020)
Part X Balance Sheet ACCESS NOW

Pa	πх	Balance Sheet					
		Check if Schedule O contains a response or	note to ar	ny line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			789,963.	1	1,792,965
	2	Savings and temporary cash investments			1,977,770.	2	1,706,763
	3	Pledges and grants receivable, net	780,550.	3	2,173,264		
	4	Accounts receivable, net		4			
	5	Loans and other receivables from any curren					
		trustee, key employee, creator or founder, su					
		controlled entity or family member of any of t		5			
	6	Loans and other receivables from other disqu	ualified pe	rsons (as defined			
		under section 4958(f)(1)), and persons descri	bed in se	ction 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net		[7	
Assets	8	Inventories for sale or use				8	
Ë	9	Prepaid expenses and deferred charges			36,172.	9	43,485
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	163,934.			
	b			120,362.	0.	10c	43,572
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, lir	ne 11			12	
	13	Investments - program-related. See Part IV, li			13		
	14	Intangible assets		61,762.	14	0	
	15	Other assets. See Part IV, line 11			121,173.	15	133,916
	16	Total assets. Add lines 1 through 15 (must e			3,767,390.	16	5,893,965
	17	Accounts payable and accrued expenses	298,501.	17	355,689		
	18	Grants payable		55,480.	18	283,728	
	19	Deferred revenue			1,085,560.	19	1,058,509
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple	te Part IV	of Schedule D		21	
es	22	Loans and other payables to any current or f	ormer offi	cer, director,			
Ě		trustee, key employee, creator or founder, su	bstantial	contributor, or 35%			
Liabilities		controlled entity or family member of any of t	ons		22		
_	23	Secured mortgages and notes payable to un	related th	ird parties		23	
	24	Unsecured notes and loans payable to unrela	ated third	parties		24	425,845
	25	Other liabilities (including federal income tax,	payables	to related third			
		parties, and other liabilities not included on li	nes 17-24). Complete Part X			
		of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			1,439,541.	26	2,123,771
s		Organizations that follow FASB ASC 958, or	check her	e ▶ X			
ဥ		and complete lines 27, 28, 32, and 33.					
alar	27		<u> </u>	1,039,353.	27	2,350,342	
ñ	28	Net assets with donor restrictions	1,288,496.	28	1,419,852		
Ĕ		Organizations that do not follow FASB AS6	C 958, ch	eck here 🕨 📖			
ř		and complete lines 29 through 33.					
ţ	29	Capital stock or trust principal, or current fun				29	
sse	30	Paid-in or capital surplus, or land, building, or				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated				31	
Š	32	Total net assets or fund balances			2,327,849.	32	3,770,194
	33	Total liabilities and net assets/fund balances			3,767,390.	33	5,893,965