**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.

**Form 990 (Rev. January 2020)**

**Department of the Treasury**

**Internal Revenue Service**

**A For the 2019 calendar year, or tax year beginning and ending**

**C Name of organization**

**PROJECT FOR PRIDE IN LIVING INC.**

**Doing business as**

1035 EAST FRANKLIN AVENUE

**Room/suite**

**D Employer identification number**

23-7232208

**E Telephone number**

612-455-5100

**G Gross receipts**

26,677,335.

**H(a) Is this a group return**

- Yes

**H(b) Are all subordinates included?**

- Yes

**F Name and address of principal officer:**

**SCOTT CORDES**

**SAME AS C ABOVE**

**J Website**

WWW.PPL-INC.ORG

**K Form of organization:**

- Corporation

**L Year of formation:**

1972

**M State of legal domicile:**

MN

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**Part I Summary**

1. Briefly describe the organization’s mission or most significant activities: **PPL BUILDS THE HOPE, ASSETS, AND SELF RELIANCE OF INDIVIDUALS AND FAMILIES WHO HAVE LOWER INCOME BY**

2. Check this box if if the organization discontinued its operations or disposed of more than 25% of its net assets.

3. Number of voting members of the governing body (Part VI, line 1a).......................... 3

4. Number of independent voting members of the governing body (Part VI, line 1b)........... 4

5. Total number of volunteers... (estimate if necessary).................................................. 5

6. Total number of individuals employed in calendar year 2019 (Part V, line 2a)........... 6

7a. Total unrelated business revenue from Part VIII, column (C), line 12........................... 7a

7b. Net unrelated business taxable income, from Form 990-T, line 39............................... 7b

8. Contributions and grants (Part VIII, line 1h)............................................................... 8

9. Program service revenue (Part VIII, line 2g)................................................................. 9

10. Investment income (Part VIII, column (A), lines 3, 4, and 7d...................................... 10

11. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)................. 11

12. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12).... 12

13. Grants and similar amounts paid (Part IX, column (A), line 13)................................. 13

14. Benefits paid to or for members (Part IX, column (A), line 4).................................... 14

15. Salaries, other compensation, employee benefits (Part IX, column (A), line 5-10).... 15

16a. Professional fundraising fees (Part IX, column (A), line 11e)................................... 16a

b. Total fundraising expenses (Part IX, column (D), line 25)........................................... 11,143,529.

17. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e).................................. 17

18. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)............. 18

19. Revenue less expenses. Subtract line 18 from line 12................................................ 19

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**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here**

**Signature of officer**

SCOTT CORDES, CHIEF FINANCIAL OFFICER

**Type or print name and title**

---

**Paid/Type preparer’s name**

**Preparer’s signature**

MARC A. KOTONAS

10/13/20

---

**Preparer**

Firm’s name

MAHONEY, ULRBICH, CHRISTIANSEN & RUSS P.A.

Firm’s EIN

41-1647057

**Use Only**

Firm’s address

10 RIVER PARK PLAZA, SUITE 800

SAINT PAUL, MN 55107

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Phone no.

(651)227-6695

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

- Yes

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Form 990 (2019)
Part III | Statement of Program Service Accomplishments

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

1. Briefly describe the organization's mission:
   TO WORK WITH LOWER-INCOME INDIVIDUALS AND FAMILIES TO ACHIEVE GREATER SELF-SUFFICIENCY THROUGH HOUSING, EMPLOYMENT TRAINING, EDUCATION AND SUPPORT SERVICES.

2. Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? □ Yes □ No
   If "Yes," describe these new services on Schedule O.

3. Did the organization cease conducting, or make significant changes in how it conducts, any program services? □ Yes □ No
   If "Yes," describe these changes on Schedule O.

4. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

   4a. (Code: _____) (Expenses $11,642,806. including grants of $_____ ) (Revenue $7,884,118.)
       HOUSING STABILITY: THIS PPL PROGRAM PROVIDES MORE THAN 1,500 UNITS OF AFFORDABLE, MULTI-FAMILY RESIDENTIAL RENTAL HOUSING FOR LOW INCOME INDIVIDUALS AND FAMILIES. THE PROGRAM INCLUDES PPL PROPERTIES AND LIMITED PARTNERSHIPS IN WHICH PPL IS A GENERAL PARTNER. THE PROGRAM ALSO PROVIDES FEASIBILITY ANALYSIS, PRE-DEVELOPMENT, DEVELOPMENT, AND CONSTRUCTION MANAGEMENT OF AFFORDABLE RENTAL AND FOR-SALE HOUSING, AND ASSET MANAGEMENT AND PROPERTY MANAGEMENT OF MULTI-FAMILY RESIDENTIAL PROPERTIES. PPL ALSO MANAGES UNDER CONTRACT WITH ANOTHER NONPROFIT ORGANIZATION AN ADDITIONAL 153 UNITS OF AFFORDABLE HOUSING.

   4b. (Code: _____) (Expenses $6,228,182. including grants of $_____ ) (Revenue $933,879.)
       CAREER READINESS: THIS PPL PROGRAM ASSISTS IN THE ECONOMIC ADVANCEMENT OF INDIVIDUALS THROUGH FREE EMPLOYMENT TRAINING WORKSHOPS, CLASSES, AND CERTIFICATE PROGRAMS. OUR INTEGRATED SERVICES FOCUS ON HELPING EACH INDIVIDUAL OVERCOME THEIR BARRIERS TO EMPLOYMENT AND JOB RETENTION. IN ADDITION, PPL ASSISTS FAMILIES WORKING WITH THE MINNESOTA FAMILY INVESTMENT PROGRAM (MFIP) THROUGH THE CONNECTIONS TO WORK PROGRAM ACTIVITY. IN ADDITION, JOB SEEKERS HAVE OPPORTUNITIES TO RECEIVE PROFESSIONAL WORK ATTIRE THROUGH THE READY FOR SUCCESS PROGRAM ACTIVITY.

   4c. (Code: _____) (Expenses $981,217. including grants of $_____ ) (Revenue $27,603.)
       OTHER PROGRAMATIC WORK WHICH FALLS OUTSIDE THE SCOPE OF THE TWO MAJOR PROGRAMS

4d. Other program services (Describe on Schedule O.)
   (Expenses $_____ including grants of $_____ ) (Revenue $_____ )

4e. Total program service expenses ➤ 18,852,205.

SEE SCHEDULE O FOR CONTINUATION(S)
<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>2. Is the organization required to complete Schedule B, Schedule of Contributors?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>3. Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If &quot;Yes,&quot; complete Schedule C, Part I</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule C, Part II</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>5. Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197? If &quot;Yes,&quot; complete Schedule C, Part III</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule D, Part I</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule D, Part II</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>8. Did the organization maintain collections of works of art, historical treasures, or other similar assets? If &quot;Yes,&quot; complete Schedule D, Part III</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule D, Part IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>10. Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If &quot;Yes,&quot; complete Schedule D, Part V</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>11. If the organization's answer to any of the following questions is &quot;Yes,&quot; then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If &quot;Yes,&quot; complete Schedule D, Part VI</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b. 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 &quot;Yes,&quot; complete Schedule D, Part VII</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>c. 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 &quot;Yes,&quot; complete Schedule D, Part VIII</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>d. 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 &quot;Yes,&quot; complete Schedule D, Part IX</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>e. Did the organization report an amount for other liabilities in Part X, line 25? If &quot;Yes,&quot; complete Schedule D, Part X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule D, Part X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>12a. Did the organization obtain separate, independent audited financial statements for the tax year? If &quot;Yes,&quot; complete Schedule D, Parts XI and XII</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Was the organization included in consolidated, independent audited financial statements for the tax year?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>13. Is the organization a school described in section 170(b)(1)(A)(i) or (ii)? If &quot;Yes,&quot; complete Schedule E</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14a. Did the organization maintain an office, employees, or agents outside of the United States?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule F, Parts I and IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>15. Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? If &quot;Yes,&quot; complete Schedule F, Parts II and IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule F, Parts III and IV</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule G, Part I</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>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 &quot;Yes,&quot; complete Schedule G, Part II</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>19. Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 99? If &quot;Yes,&quot; complete Schedule G, Part III</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>20a. Did the organization operate one or more hospital facilities? If &quot;Yes,&quot; complete Schedule H</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>b. If &quot;Yes&quot; to line 20a, did the organization attach a copy of its audited financial statements to this return?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21. Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 17? If &quot;Yes,&quot; complete Schedule I, Parts I and II</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Part IV</td>
<td>Checklist of Required Schedules (continued)</td>
<td></td>
</tr>
<tr>
<td>---------</td>
<td>------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>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 &quot;Yes,&quot; complete Schedule I, Parts I and III</td>
<td>22 X</td>
</tr>
<tr>
<td>23</td>
<td>Did the organization answer &quot;Yes&quot; 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 &quot;Yes,&quot; complete Schedule J</td>
<td>23 X</td>
</tr>
<tr>
<td>24a</td>
<td>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 &quot;Yes,&quot; answer lines 24b through 24d and complete Schedule K. If &quot;No,&quot; go to line 25a</td>
<td>24a X</td>
</tr>
<tr>
<td>b</td>
<td>Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?</td>
<td>24b</td>
</tr>
<tr>
<td>c</td>
<td>Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?</td>
<td>24c</td>
</tr>
<tr>
<td>d</td>
<td>Did the organization act as an &quot;on behalf of&quot; issuer for bonds outstanding at any time during the year?</td>
<td>24d</td>
</tr>
<tr>
<td>25a</td>
<td>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 &quot;Yes,&quot; complete Schedule L, Part I</td>
<td>25a X</td>
</tr>
<tr>
<td>b</td>
<td>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 &quot;Yes,&quot; complete Schedule L, Part I</td>
<td>25b X</td>
</tr>
<tr>
<td>26</td>
<td>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 &quot;Yes,&quot; complete Schedule L, Part II</td>
<td>26 X</td>
</tr>
<tr>
<td>27</td>
<td>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 &quot;Yes,&quot; complete Schedule L, Part III</td>
<td>27 X</td>
</tr>
<tr>
<td>28</td>
<td>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):</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>A current or former officer, director, trustee, key employee, creator or founder, or substantial contributo? If &quot;Yes,&quot; complete Schedule L, Part IV</td>
<td>28a X</td>
</tr>
<tr>
<td>b</td>
<td>A family member of any individual described in line 28a? If &quot;Yes,&quot; complete Schedule L, Part IV</td>
<td>28b X</td>
</tr>
<tr>
<td>c</td>
<td>A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If &quot;Yes,&quot; complete Schedule L, Part IV</td>
<td>28c X</td>
</tr>
<tr>
<td>29</td>
<td>Did the organization receive more than $25,000 in non-cash contributions? If &quot;Yes,&quot; complete Schedule M</td>
<td>29 X</td>
</tr>
<tr>
<td>30</td>
<td>Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If &quot;Yes,&quot; complete Schedule M</td>
<td>30 X</td>
</tr>
<tr>
<td>31</td>
<td>Did the organization liquidate, terminate, or dissolve and cease operations? If &quot;Yes,&quot; complete Schedule N, Part I</td>
<td>31 X</td>
</tr>
<tr>
<td>32</td>
<td>Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If &quot;Yes,&quot; complete Schedule N, Part II</td>
<td>32 X</td>
</tr>
<tr>
<td>33</td>
<td>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 &quot;Yes,&quot; complete Schedule R, Part I</td>
<td>33 X</td>
</tr>
<tr>
<td>34</td>
<td>Was the organization related to any tax-exempt or taxable entity? If &quot;Yes,&quot; complete Schedule R, Part II, III, or IV, and Part V, line 1</td>
<td>34 X</td>
</tr>
<tr>
<td>35a</td>
<td>Did the organization have a controlled entity within the meaning of section 512(b)(13)? If &quot;Yes&quot; 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 &quot;Yes,&quot; complete Schedule R, Part V, line 2</td>
<td>35a X</td>
</tr>
<tr>
<td>b</td>
<td>If &quot;Yes&quot; 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 &quot;Yes,&quot; complete Schedule R, Part V, line 2</td>
<td>35b</td>
</tr>
<tr>
<td>36</td>
<td>Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If &quot;Yes,&quot; complete Schedule R, Part V, line 2</td>
<td>36 X</td>
</tr>
<tr>
<td>37</td>
<td>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 &quot;Yes,&quot; complete Schedule R, Part VI</td>
<td>37 X</td>
</tr>
<tr>
<td>38</td>
<td>Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?</td>
<td>38 X</td>
</tr>
</tbody>
</table>

**Note:** All Form 990 filers are required to complete Schedule O.

**Part V** Statements Regarding Other IRS Filings and Tax Compliance

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

<table>
<thead>
<tr>
<th>Line</th>
<th>Statement</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td>Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable</td>
<td>1a</td>
<td>174</td>
</tr>
<tr>
<td>fb</td>
<td>Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable</td>
<td>fb</td>
<td>0</td>
</tr>
<tr>
<td>1c</td>
<td>Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?</td>
<td>1c</td>
<td>X</td>
</tr>
</tbody>
</table>
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 290
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)
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," 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 ▶
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? .......................... 5a X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? .......................... 5b X
c 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? .......................... 6a X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? .......................... 6b
7 Organizations that may receive deductible contributions under section 170(c).
   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 X
b If "Yes," did the organization notify the donor of the value of the goods or services provided? .......................... 7b X
c 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
    e 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 X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? .......................... 7g N/A
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1099-C? .......................... 7h N/A
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.
   a Did the sponsoring organization make any taxable distributions under section 4966? .......................... N/A 9a
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? .......................... N/A 9b
10 Section 501(c)(7) organizations. Enter:
    a 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:
    a Gross income from members or shareholders .......................... N/A 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 Form 1041? .......................... 12a
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year .......................... N/A 12b
13 Section 501(c)(29) qualified nonprofit health insurance issuers.
    a 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.
    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
    c Enter the amount of reserves on hand .......................... 13c
14a Did the organization receive any payments for indoor tanning services during the tax year? .......................... 14a X
b 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 X
   If "Yes," see instructions and file Form 4720, Schedule N
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? .......................... 16 X
   If "Yes," complete Form 4720, Schedule O

Form 990 (2019)
Form 990 (2019)  PROJECT FOR PRIDE IN LIVING INC.  23-7232208 Page 6

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

Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year

28

1b Enter the number of voting members included on line 1a, above, who are independent

28

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?

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?

X

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?

X

5 Did the organization become aware during the year of a significant diversion of the organization’s assets?

X

6 Did the organization have members or stockholders?

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?

X

7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?

X

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:

8a The governing body?

X

8b Each committee with authority to act on behalf of the governing body?

X

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

X

Section B. Policies  (This Section B requests information about policies not required by the Internal Revenue Code.)

10a Did the organization have local chapters, branches, or affiliates?

X

10b If “Yes,” did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization’s exempt purposes?

X

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?

X

11b Describe in Schedule O this process, if any, used by the organization to review this Form 990.

X

12a Did the organization have a written conflict of interest policy? If “No,” go to line 13

X

12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

X

12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If “Yes,” describe in Schedule O how this was done

X

13 Did the organization have a written whistleblower policy?

X

14 Did the organization have a written document retention and destruction policy?

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?

X

15a The organization’s CEO, Executive Director, or top management official

X

15b Other officers or key employees of the organization

X

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?

X

16b 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?

X

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ MN

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) 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 interest policy, and financial statements available to the public during the tax year

20 State the name, address, and telephone number of the person who possesses the organization’s books and records ▶

THE ORGANIZATION  -  612-455-5100

1035 EAST FRANKLIN AVENUE, MINNEAPOLIS, MN  55404-2920
### 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.

See 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.

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
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<td>BOARD CHAIR</td>
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<td>(8) JAN DICK</td>
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<td>(9) EMILY E. DUKE</td>
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<td>(14) WILLIAM (BILL) H. MUNNZBERG</td>
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<td>(15) SUE PERKINS</td>
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<td>(16) NASIBU SAREVA</td>
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<td>(17) COURTNEY SCHROEDER</td>
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### Part VII
**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)**

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
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<tbody>
<tr>
<td>SHANNON SMITH JONES</td>
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<td>SARAH STUMME</td>
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<td>NICK KOZLAK</td>
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<tr>
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<tr>
<td>KRISTINE WIDMER</td>
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<td>SHAY WILEY</td>
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<tr>
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</tbody>
</table>

1b Subtotal                                                                  |                                                                 | 0.                                                              | 0.                                                              | 0.                                                                 |

c Total from continuation sheets to Part VII, Section A                      |                                                                 | 861,126.                                                        | 0.                                                              | 54,589.                                                         |
d Total (add lines 1b and 1c)                                                |                                                                 | 861,126.                                                        | 0.                                                              | 54,589.                                                         |

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization | 4 |

3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual | X |

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? If "Yes," complete Schedule J for such individual | X |

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person | X |

### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>FLANNERY CONSTRUCTION</td>
<td>CONSTRUCTION</td>
<td>321,550.</td>
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<tr>
<td>1375 ST. ANTHONY AVE, SAINT PAUL, MN 55104</td>
<td>SERVICES</td>
<td></td>
</tr>
<tr>
<td>MINNEAPOLIS COMMUNITY &amp; TECHNICAL COLLEGE</td>
<td>EDUCATIONAL SERVICES</td>
<td>236,170.</td>
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<tr>
<td>1501 HARMON AVENUE, MINNEAPOLIS, MN 55403</td>
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<tr>
<td>MYTECH PARTNERS, INC.</td>
<td>IT SERVICES</td>
<td>234,633.</td>
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<tr>
<td>300 2ND STREET NW, NEW BRIGHTON, MN 55112</td>
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<tr>
<td>ENTERTAINMENT PROTECTION GROUP</td>
<td>SECURITY SERVICES</td>
<td>187,585.</td>
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<tr>
<td>2928 N. 2ND ST., MINNEAPOLIS, MN 55411</td>
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<tr>
<td>CDW DIRECT LLC, 200 N MILWAUKEE AVENUE, VERNON HILLS, IL 60061</td>
<td>TECHNOLOGY</td>
<td>149,098.</td>
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</table>

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization | 6 |

SEE PART VII, SECTION A CONTINUATION SHEETS
<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week</th>
<th>(C) Position (check all that apply)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
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<tbody>
<tr>
<td>(27) MAI LIA XIONG</td>
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<td>(28) TOM ZIRBS</td>
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<td>(29) ELIS F. BULLOCK, JR.</td>
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<td>(31) JOHN F. RASMUSSEN</td>
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<td>(35) BARBARA MCCORMICK</td>
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<td>(36) JOANNE KOSCIOLEK</td>
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<td>(38) MICHAEL LAFAYE</td>
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Total to Part VII, Section A, line 1c: 861,126. 54,589.
### Part VIII  Statement of Revenue

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

<table>
<thead>
<tr>
<th></th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512 - 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td>Federated campaigns</td>
<td>542,940</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b</td>
<td>Membership dues</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c</td>
<td>Fundraising events</td>
<td>379,253</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d</td>
<td>Related organizations</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e</td>
<td>Government grants (contributions)</td>
<td>9,721,038</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1f</td>
<td>All other contributions, gifts, and similar amounts not included above ...</td>
<td>7,153,504</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1g</td>
<td>Noncash contributions included in lines 1a-1f</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h</td>
<td>Total, Add lines 1a-1f</td>
<td>17,796,735</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Program Service Revenue

<table>
<thead>
<tr>
<th></th>
<th>Business Code</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>PROPERTY AND ASSET MANAGEMENT FEE</td>
<td>531310</td>
</tr>
<tr>
<td>2b</td>
<td>DEVELOPER FEES</td>
<td>531310</td>
</tr>
<tr>
<td>2c</td>
<td>PROGRAM FEES</td>
<td>900099</td>
</tr>
<tr>
<td>2d</td>
<td>OTHER INCOME</td>
<td>900099</td>
</tr>
<tr>
<td>2e</td>
<td>SALES</td>
<td>448000</td>
</tr>
<tr>
<td>2f</td>
<td>All other program service revenue</td>
<td>531110</td>
</tr>
<tr>
<td>g</td>
<td>Total, Add lines 2a-2f</td>
<td>8,845,600</td>
</tr>
</tbody>
</table>

### Investment Income

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>Investment income (including dividends, interest, and other similar amounts)</td>
</tr>
</tbody>
</table>

### Income from Investment of Tax-Exempt Bond Proceeds

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>Income from investment of tax-exempt bond proceeds</td>
</tr>
</tbody>
</table>

### Royalties

<table>
<thead>
<tr>
<th></th>
<th>(i) Real</th>
<th>(ii) Personal</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>Royalties</td>
<td></td>
</tr>
</tbody>
</table>

### Gross Rents

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>6a</td>
<td>Gross rents</td>
</tr>
</tbody>
</table>
| 6b | Less: rental expenses...
| 6c | Rental income or (loss) |

### Net Rental Income or (Loss)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>6d</td>
<td>Net rental income or (loss)</td>
</tr>
</tbody>
</table>

### Gross Amount from Sales of Assets Other Than Inventory

<table>
<thead>
<tr>
<th></th>
<th>(i) Securities</th>
<th>(ii) Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>7a</td>
<td>Gross amount from sales of assets other than inventory</td>
<td></td>
</tr>
<tr>
<td>7b</td>
<td>Less: cost or other basis and sales expenses</td>
<td></td>
</tr>
<tr>
<td>7c</td>
<td>Gain or (loss)</td>
<td></td>
</tr>
</tbody>
</table>

### Net Gain or (Loss)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>7d</td>
<td>Net gain or (loss)</td>
</tr>
</tbody>
</table>

### Gross Income from Fundraising Events

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>8a</td>
<td>Gross income from fundraising events (not including $379,253 of contributions reported in line 1c). See Part IV, line 18</td>
</tr>
<tr>
<td>8b</td>
<td>Less: direct expenses</td>
</tr>
<tr>
<td>8c</td>
<td>Net income or (loss) from fundraising events</td>
</tr>
</tbody>
</table>

### Gross Income from Gaming Activities

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>9a</td>
<td>Gross income from gaming activities. See Part IV, line 19</td>
</tr>
<tr>
<td>9b</td>
<td>Less: direct expenses</td>
</tr>
<tr>
<td>9c</td>
<td>Net income or (loss) from gaming activities</td>
</tr>
</tbody>
</table>

### Gross Sales of Inventory, Less Returns and Allowances

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>10a</td>
<td>Gross sales of inventory, less returns and allowances</td>
</tr>
<tr>
<td>10b</td>
<td>Less: cost of goods sold</td>
</tr>
<tr>
<td>10c</td>
<td>Net income or (loss) from sales of inventory</td>
</tr>
</tbody>
</table>

### Miscellaneous Business Revenue

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>11a</td>
<td></td>
</tr>
<tr>
<td>11b</td>
<td></td>
</tr>
<tr>
<td>11c</td>
<td></td>
</tr>
<tr>
<td>11d</td>
<td>All other revenue</td>
</tr>
<tr>
<td>e</td>
<td>Total, Add lines 11a-11d</td>
</tr>
</tbody>
</table>

### Total Revenue

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
<td>Total revenue. See instructions</td>
</tr>
</tbody>
</table>

---

Form 990 (2019)
<table>
<thead>
<tr>
<th></th>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21</td>
<td>29,941</td>
<td>29,941</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to domestic individuals. See Part IV, line 22</td>
<td>915,715</td>
<td>394,810</td>
<td>301,551</td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16</td>
<td>9,694,236</td>
<td>8,414,913</td>
<td>861,469</td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members</td>
<td>211,345</td>
<td>179,548</td>
<td>25,686</td>
</tr>
<tr>
<td>5</td>
<td>Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td>1,413,011</td>
<td>1,151,684</td>
<td>199,688</td>
</tr>
<tr>
<td>6</td>
<td>Other salaries and wages</td>
<td>738,918</td>
<td>603,883</td>
<td>96,814</td>
</tr>
<tr>
<td>7</td>
<td>Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td>31,816</td>
<td>10,760</td>
<td>21,056</td>
</tr>
<tr>
<td>8</td>
<td>Other employee benefits</td>
<td>72,189</td>
<td>72,189</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)</td>
<td>63,784</td>
<td>15,266</td>
<td>1,000</td>
</tr>
<tr>
<td>10</td>
<td>Advertising and promotion</td>
<td>685,218</td>
<td>489,285</td>
<td>158,289</td>
</tr>
<tr>
<td>11</td>
<td>Office expenses</td>
<td>210,013</td>
<td>210,013</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Information technology</td>
<td>8,403</td>
<td>8,403</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Royalties</td>
<td>199,356</td>
<td>178,611</td>
<td>19,633</td>
</tr>
<tr>
<td>14</td>
<td>Travel</td>
<td>58,384</td>
<td>26,746</td>
<td>30,591</td>
</tr>
<tr>
<td>15</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td>212,604</td>
<td>158,781</td>
<td>51,311</td>
</tr>
<tr>
<td>16</td>
<td>Conferences, conventions, and meetings</td>
<td>251,359</td>
<td>125,093</td>
<td>126,266</td>
</tr>
<tr>
<td>17</td>
<td>Interest</td>
<td>122,572</td>
<td>7,347</td>
<td>115,225</td>
</tr>
<tr>
<td>18</td>
<td>Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Depreciation, depletion, and amortization</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Insurance</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>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.)</td>
<td>3,108,610</td>
<td>3,108,610</td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>PROGRAM COSTS - OTHER</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>INTER-ENTITY EXPENSES</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td>BUILDING EXPENSES</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>STAFF DEVELOPMENT</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26</td>
<td>All other expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27</td>
<td>Total functional expenses. Add lines 1 through 24e</td>
<td>22,661,761</td>
<td>18,852,205</td>
<td>2,666,027</td>
</tr>
<tr>
<td>Assets</td>
<td>(A) Beginning of year</td>
<td>(B) End of year</td>
<td></td>
<td></td>
</tr>
<tr>
<td>--------</td>
<td>----------------------</td>
<td>-----------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Cash - non-interest-bearing</td>
<td>1,238,269</td>
<td>1,594,205</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Savings and temporary cash investments</td>
<td>1,845,032</td>
<td>2,480,327</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Pledges and grants receivable, net</td>
<td>2,611,936</td>
<td>2,457,567</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Accounts receivable, net</td>
<td>613,809</td>
<td>115,795</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 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</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)</td>
<td>100,000</td>
<td>50,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Notes and loans receivable, net</td>
<td>76,129</td>
<td>69,729</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Inventories for sale or use</td>
<td>412,825</td>
<td>423,227</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td>2,365,636</td>
<td>1,078,624</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Less: accumulated depreciation</td>
<td>1,347,747</td>
<td>1,017,889</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Investments - publicly traded securities</td>
<td>1,412,188</td>
<td>1,518,903</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Investments - other securities. See Part IV, line 11</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Investments - program-related. See Part IV, line 11</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 Intangible assets</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15 Other assets. See Part IV, line 11</td>
<td>4,921,835</td>
<td>5,107,157</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 Total assets. Add lines 1 through 15 (must equal line 33)</td>
<td>14,310,647</td>
<td>14,834,799</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Liabilities</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>17 Accounts payable and accrued expenses</td>
<td>652,493</td>
<td>546,571</td>
</tr>
<tr>
<td>18 Grants payable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19 Deferred revenue</td>
<td>1,191,365</td>
<td>52,699</td>
</tr>
<tr>
<td>20 Tax-exempt bond liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21 Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23 Secured mortgages and notes payable to unrelated third parties</td>
<td>1,918,056</td>
<td>954,989</td>
</tr>
<tr>
<td>24 Unsecured notes and loans payable to unrelated third parties</td>
<td>2,883,674</td>
<td>4,539,162</td>
</tr>
<tr>
<td>25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D</td>
<td>1,405,059</td>
<td>2,020,110</td>
</tr>
<tr>
<td>26 Total liabilities. Add lines 17 through 25</td>
<td>8,050,647</td>
<td>8,113,531</td>
</tr>
</tbody>
</table>

| Organizations that follow FASB ASC 958, check here □ and complete lines 27, 28, 32, and 33. | | |
| 27 Net assets without donor restrictions | 2,721,424 | 4,230,181 |
| 28 Net assets with donor restrictions | 3,538,576 | 2,491,087 |
| Organizations that do not follow FASB ASC 958, check here □ and complete lines 29 through 33. | | |
| 29 Capital stock or trust principal, or current funds | | |
| 30 Paid-in or capital surplus, or land, building, or equipment fund | | |
| 31 Retained earnings, endowment, accumulated income, or other funds | | |
| 32 Total net assets or fund balances | 6,260,000 | 6,721,268 |
| 33 Total liabilities and net assets/fund balances | 14,310,647 | 14,834,799 |
### Part XI Reconciliation of Net Assets

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

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
<td>8</td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain on Schedule O)</td>
<td>9</td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))</td>
<td>10</td>
</tr>
</tbody>
</table>

### Part XII Financial Statements and Reporting

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

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accounting method used to prepare the Form 990:</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>□ Cash   [X] Accrual       □ Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>If the organization changed its method of accounting from a prior year or checked &quot;Other,&quot; explain in Schedule O.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization's financial statements compiled or reviewed by an independent accountant?</td>
<td>2a</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes,&quot; check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ Separate basis   □ Consolidated basis   □ Both consolidated and separate basis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Were the organization's financial statements audited by an independent accountant?</td>
<td>b</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes,&quot; check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ Separate basis   [X] Consolidated basis   □ Both consolidated and separate basis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>If &quot;Yes&quot; to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?</td>
<td>c</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</td>
<td>3a</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>If &quot;Yes,&quot; 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</td>
<td>b</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>
SCHEDULE A
(Form 990 or 990-EZ)

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.

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

Name of the organization: PROJECT FOR PRIDE IN LIVING INC.
Employer identification number: 23-7232208

2019
Open to Public Inspection

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

1

☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

☐ A school described in section 170(b)(1)(A)(iii). (Attach Schedule E (Form 990 or 990-EZ).)

☐ 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 name, city, and state:

☐ 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.)

☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).

☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)

☐ A community trust described in section 170(b)(1)(A)(vii). (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).

☐ 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ 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.

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.

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.

d ☐ 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.

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f ☐ Enter the number of supported organizations.

g ☐ Provide the following information about the supported organization(s).

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN</th>
<th>(iii) Type of organization (described on lines 1-10 above (see instructions))</th>
<th>(iv) Is the organization listed in your governing document?</th>
<th>(v) Amount of monetary support (see instructions)</th>
<th>(vi) Amount of other support (see instructions)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td></td>
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</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 9302021 09-25-19 Schedule A (Form 990 or 990-EZ) 2019
### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) 2019</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td>10989481</td>
<td>14049401</td>
<td>14509485</td>
<td>14005112</td>
<td>17796235</td>
<td>71349714</td>
</tr>
<tr>
<td>2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Total. Add lines 1 through 3</td>
<td>10989481</td>
<td>14049401</td>
<td>14509485</td>
<td>14005112</td>
<td>17796235</td>
<td>71349714</td>
</tr>
<tr>
<td>5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1000944</td>
</tr>
<tr>
<td>6 Public support. Subtract line 5 from line 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>70348770</td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) 2019</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 Amounts from line 4</td>
<td>10989481</td>
<td>14049401</td>
<td>14509485</td>
<td>14005112</td>
<td>17796235</td>
<td>71349714</td>
</tr>
<tr>
<td>8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td>27,415</td>
<td>31,124</td>
<td>48,503</td>
<td>18,167</td>
<td>1,475</td>
<td>126,684</td>
</tr>
<tr>
<td>9 Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Total support. Add lines 7 through 10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>71476398</td>
</tr>
<tr>
<td>12 Gross receipts from related activities, etc. (see instructions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>41,189,180</td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
<th>(e)</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>14</td>
<td>98.42%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

15 Public support percentage from 2018 Schedule A, Part II, line 14 | 97.83% |

**16a 33 1/3% support test - 2019.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.

**17a 10% -facts-and-circumstances test - 2019.** If the organization did not check a box on line 13, 16a, or "6b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

**18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.
### Section A. Public Support

<table>
<thead>
<tr>
<th>Description</th>
<th>(a) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) 2019</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Total. Add lines 1 through 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b 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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7c Add lines 7a and 7b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Public support. (See the instructions for line 9)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Description</th>
<th>(a) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) 2019</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10c Add lines 10a and 10b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other income. Do not include gains or losses from the sale of capital assets (Explain in Part VI.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Total support. (Add lines 9, 10c, 11, and 12)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th>Description</th>
<th>(a) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) 2019</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 Public support percentage from 2018 Schedule A, Part III, line 15</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section D. Computation of Investment Income Percentage

<table>
<thead>
<tr>
<th>Description</th>
<th>(a) 2015</th>
<th>(b) 2016</th>
<th>(c) 2017</th>
<th>(d) 2018</th>
<th>(e) 2019</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 Investment income percentage from 2018 Schedule A, Part III, line 17</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19a 33 1/3% support tests - 2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19b 33 1/3% support tests - 2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Private foundation

If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.
<table>
<thead>
<tr>
<th>Section A. All Supporting Organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.</td>
</tr>
<tr>
<td>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).</td>
</tr>
<tr>
<td>3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If “Yes,” answer (b) and (c) below.</td>
</tr>
<tr>
<td>b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If “Yes,” describe in Part VI when and how the organization made the determination.</td>
</tr>
<tr>
<td>c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If “Yes,” explain in Part VI what controls the organization put in place to ensure such use.</td>
</tr>
<tr>
<td>4a Was any supported organization not organized in the United States (“foreign supported organization”? If “Yes,” and if you checked 12a or 12b in Part I, answer (b) and (c) below.</td>
</tr>
<tr>
<td>b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If “Yes,” describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</td>
</tr>
<tr>
<td>c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If “Yes,” explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</td>
</tr>
<tr>
<td>5a Did the organization add, substitute, or remove any supported organizations during the tax year? If “Yes,” answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization’s organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</td>
</tr>
<tr>
<td>b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization’s organizing document?</td>
</tr>
<tr>
<td>c Substitutions only. Was the substitution the result of an event beyond the organization’s control?</td>
</tr>
<tr>
<td>6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization’s supported organizations? If “Yes,” provide detail in Part VI.</td>
</tr>
<tr>
<td>7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If “Yes,” complete Part I of Schedule L (Form 990 or 990-EZ).</td>
</tr>
<tr>
<td>8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If “Yes,” complete Part I of Schedule L (Form 990 or 990-EZ).</td>
</tr>
<tr>
<td>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.</td>
</tr>
<tr>
<td>b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If “Yes,” provide detail in Part VI.</td>
</tr>
<tr>
<td>c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If “Yes,” provide detail in Part VI.</td>
</tr>
<tr>
<td>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 II non-functionally integrated supporting organizations)? If “Yes,” answer 10b below.</td>
</tr>
<tr>
<td>b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</td>
</tr>
</tbody>
</table>
Schedule A (Form 990 or 990-EZ) 2019  PROJECT FOR PRIDE IN LIVING INC.  23-7232208  Page 5

**Part IV – Supporting Organizations (continued)**

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>11a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11c</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Section B. Type I Supporting Organizations**

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Did the directors, trustees, or membership of one or more supported</td>
<td></td>
<td></td>
</tr>
<tr>
<td>organizations have the power to regularly appoint or elect at least a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>majority of the organization's directors or trustees at all times during</td>
<td></td>
<td></td>
</tr>
<tr>
<td>the tax year? If &quot;No,&quot; describe in Part VI how the supported</td>
<td></td>
<td></td>
</tr>
<tr>
<td>organization(s) effectively operated, supervised, or controlled the</td>
<td></td>
<td></td>
</tr>
<tr>
<td>organization's activities. If the organization had more than one</td>
<td></td>
<td></td>
</tr>
<tr>
<td>supported organization, describe how the powers to appoint and/or</td>
<td></td>
<td></td>
</tr>
<tr>
<td>remove directors or trustees were allocated among the supported</td>
<td></td>
<td></td>
</tr>
<tr>
<td>organizations and what conditions or restrictions, if any, applied to</td>
<td></td>
<td></td>
</tr>
<tr>
<td>such powers during the tax year. If &quot;Yes,&quot; explain in Part VI how</td>
<td></td>
<td></td>
</tr>
<tr>
<td>providing such benefit carried out the purposes of the supported</td>
<td></td>
<td></td>
</tr>
<tr>
<td>organization(s) that operated, supervised, or controlled the</td>
<td></td>
<td></td>
</tr>
<tr>
<td>supporting organization.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Did the organization operate for the benefit of any supported</td>
<td></td>
<td></td>
</tr>
<tr>
<td>organization other than the supported organization(s) that operated,</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>supervised, or controlled the supporting organization? If &quot;Yes,&quot; explain</td>
<td></td>
<td></td>
</tr>
<tr>
<td>in Part VI how providing such benefit carried out the purposes of the</td>
<td></td>
<td></td>
</tr>
<tr>
<td>supported organization(s) that operated, supervised, or controlled the</td>
<td></td>
<td></td>
</tr>
<tr>
<td>supporting organization.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Section C. Type II Supporting Organizations**

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Were a majority of the organization's directors or trustees during</td>
<td></td>
<td></td>
</tr>
<tr>
<td>the tax year also a majority of the directors or trustees of each of</td>
<td></td>
<td></td>
</tr>
<tr>
<td>the organization's supported organization(s)? If &quot;No,&quot; describe in Part</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VI how control or management of the supporting organization was vested</td>
<td></td>
<td></td>
</tr>
<tr>
<td>in the same persons that controlled or managed the supported</td>
<td></td>
<td></td>
</tr>
<tr>
<td>organization(s).</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Section D. All Type III Supporting Organizations**

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Did the organization provide to each of its supported organizations,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>by the last day of the fifth month of the organization's tax year, (i)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a written notice describing the type and amount of support provided</td>
<td></td>
<td></td>
</tr>
<tr>
<td>during the prior tax year, (ii) a copy of the Form 990 that was</td>
<td></td>
<td></td>
</tr>
<tr>
<td>most recently filed as of the date of notification, and (iii) copies of</td>
<td></td>
<td></td>
</tr>
<tr>
<td>the organization's governing documents in effect on the date of</td>
<td></td>
<td></td>
</tr>
<tr>
<td>notification, to the extent not previously provided?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Were any of the organization's officers, directors, or trustees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>either (i) appointed or elected by the supported organization(s) or</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(ii) serving on the governing body of a supported organization? If &quot;No,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>* explain in Part VI how the organization maintained a close and</td>
<td></td>
<td></td>
</tr>
<tr>
<td>continuous working relationship with the supported organization(s)?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. By reason of the relationship described in (2), did the</td>
<td></td>
<td></td>
</tr>
<tr>
<td>organization's supported organizations have a significant voice in the</td>
<td></td>
<td></td>
</tr>
<tr>
<td>organization's investment policies and in directing the use of the</td>
<td></td>
<td></td>
</tr>
<tr>
<td>organization's income or assets at all times during the tax year? If &quot;Yes,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>describe in Part VI the role the organization's supported</td>
<td></td>
<td></td>
</tr>
<tr>
<td>organizations played in this regard.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Section E. Type III Functionally Integrated Supporting Organizations**

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Check the box next to the method that the organization used to</td>
<td></td>
<td></td>
</tr>
<tr>
<td>satisfy the Integral Part Test during the year (see instructions).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. The organization satisfied the Activities Test. Complete line 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. The organization is the parent of each of its supported</td>
<td></td>
<td></td>
</tr>
<tr>
<td>organizations. Complete line 3 below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. The organization supported a governmental entity. Describe in Part</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VI how you supported a government entity (see instructions).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Activities Test. Answer (a) and (b) below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Did substantially all of the organization's activities during the</td>
<td></td>
<td></td>
</tr>
<tr>
<td>tax year directly further the exempt purposes of the supported</td>
<td></td>
<td></td>
</tr>
<tr>
<td>organization(s) to which the organization was responsive? If &quot;Yes,&quot;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>then in Part VI identify those supported organizations and explain</td>
<td></td>
<td></td>
</tr>
<tr>
<td>how these activities directly furthered their exempt purposes, how</td>
<td></td>
<td></td>
</tr>
<tr>
<td>the organization was responsive to those supported organizations, and</td>
<td></td>
<td></td>
</tr>
<tr>
<td>how the organization determined that these activities constituted</td>
<td></td>
<td></td>
</tr>
<tr>
<td>substantially all of its activities.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Did the activities described in (a) constitute activities that,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>but for the organization's involvement, one or more of the</td>
<td></td>
<td></td>
</tr>
<tr>
<td>organization's supported organization(s) would have been engaged in?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If &quot;Yes,&quot; explain in Part VI the reasons for the organization's</td>
<td></td>
<td></td>
</tr>
<tr>
<td>position that its supported organization(s) would have engaged in these</td>
<td></td>
<td></td>
</tr>
<tr>
<td>activities but for the organization's involvement.</td>
<td>2a</td>
<td></td>
</tr>
<tr>
<td>3. Parent of Supported Organizations. Answer (a) and (b) below.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Did the organization have the power to regularly appoint or elect</td>
<td>3a</td>
<td></td>
</tr>
<tr>
<td>a majority of the officers, directors, or trustees of each of the</td>
<td></td>
<td></td>
</tr>
<tr>
<td>supported organizations? Provide details in Part VI.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Did the organization exercise a substantial degree of direction over</td>
<td></td>
<td></td>
</tr>
<tr>
<td>the policies, programs, and activities of each of its supported</td>
<td>3b</td>
<td></td>
</tr>
<tr>
<td>organizations? If &quot;Yes,&quot; describe in Part VI the role played by the</td>
<td></td>
<td></td>
</tr>
<tr>
<td>organization in this regard.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Schedule A (Form 990 or 990-EZ) 2019 PROJECT FOR PRIDE IN LIVING INC. 23-7232208 Page 6

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Net short-term capital gain</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Recoveries of prior-year distributions</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Other gross income (see instructions)</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Add lines 1 through 3.</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Depreciation and depletion</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>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)</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Other expenses (see instructions)</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)</td>
<td>8</td>
</tr>
</tbody>
</table>

Section B - Minimum Asset Amount

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Average monthly value of securities</td>
<td>1a</td>
</tr>
<tr>
<td>b</td>
<td>Average monthly cash balances</td>
<td>1b</td>
</tr>
<tr>
<td>c</td>
<td>Fair market value of other non-exempt-use assets</td>
<td>1c</td>
</tr>
<tr>
<td>d</td>
<td>Total (add lines 1a, 1b, and 1c)</td>
<td>1d</td>
</tr>
<tr>
<td>e</td>
<td>Discount claimed for blockage or other factors (explain in detail in Part VI):</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Acquisition indebtedness applicable to non-exempt-use assets</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2 from line 1d.</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Net value of non-exempt-use assets (subtract line 4 from line 3)</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Multiply line 5 by .035.</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Recoveries of prior-year distributions</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Minimum Asset Amount (add line 7 to line 6)</td>
<td>8</td>
</tr>
</tbody>
</table>

Section C - Distributable Amount

<table>
<thead>
<tr>
<th></th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Adjusted net income for prior year (from Section A, line 8, Column A)</td>
</tr>
<tr>
<td>2</td>
<td>Enter 85% of line 1.</td>
</tr>
<tr>
<td>3</td>
<td>Minimum asset amount for prior year (from Section B, line 8, Column A)</td>
</tr>
<tr>
<td>4</td>
<td>Enter greater of line 2 or line 3.</td>
</tr>
<tr>
<td>5</td>
<td>Income tax imposed in prior year</td>
</tr>
<tr>
<td>6</td>
<td>Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).</td>
</tr>
<tr>
<td>7</td>
<td>Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).</td>
</tr>
</tbody>
</table>

Schedule A (Form 990 or 990-EZ) 2019

932029 06-25-19
### Schedule A (Form 990 or 990-EZ) 2019

**PROJECT FOR PRIDE IN LIVING INC.**

**Current Year**

<table>
<thead>
<tr>
<th>Section D - Distributions</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Amounts paid to supported organizations to accomplish exempt purposes</td>
<td></td>
</tr>
<tr>
<td>2. Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity</td>
<td></td>
</tr>
<tr>
<td>3. Administrative expenses paid to accomplish exempt purposes of supported organizations</td>
<td></td>
</tr>
<tr>
<td>4. Amounts paid to acquire exempt-use assets</td>
<td></td>
</tr>
<tr>
<td>5. Qualified set-aside amounts (prior IRS approval required)</td>
<td></td>
</tr>
<tr>
<td>6. Other distributions (describe in Part VI). See instructions.</td>
<td></td>
</tr>
<tr>
<td>7. <strong>Total annual distributions.</strong> Add lines 1 through 6.</td>
<td></td>
</tr>
<tr>
<td>8. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.</td>
<td></td>
</tr>
<tr>
<td>9. Distributable amount for 2019 from Section C, line 6</td>
<td></td>
</tr>
<tr>
<td>10. Line 8 amount divided by line 9 amount</td>
<td></td>
</tr>
</tbody>
</table>

### Section E - Distribution Allocations (see instructions)

<table>
<thead>
<tr>
<th></th>
<th>(i) Excess Distributions</th>
<th>(ii) Underdistributions Pre-2019</th>
<th>(iii) Distributable Amount for 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Distributable amount for 2019 from Section C, line 6</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Underdistributions, if any, for years prior to 2019 (reasonable cause required; explain in Part VI). See instructions.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Excess distributions carryover, if any, to 2019</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. From 2014</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. From 2015</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. From 2016</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. From 2017</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. From 2018</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. <strong>Total of lines 3a through e</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. Applied to underdistributions of prior years</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h. Applied to 2019 distributable amount</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i. Carryover from 2014 not applied (see instructions)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>j. Remainder. Subtract lines 3g, 3h, and 3i from 3f.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Distributions for 2019 from Section D, line 7:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Applied to underdistributions of prior years</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Applied to 2019 distributable amount</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Remainder. Subtract lines 4a and 4b from 4.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. <strong>Excess distributions carryover to 2020.</strong> Add lines 3j and 4c.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Breakdown of line 7:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Excess from 2015</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Excess from 2016</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Excess from 2017</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Excess from 2018</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. Excess from 2019</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.

(See instructions.)
Schedule B (Form 990, 990-EZ, or 990-PF)  
Department of the Treasury  
Internal Revenue Service  

Schedule of Contributors  
Attach to Form 990, Form 990-EZ, or Form 990-PF.  
Go to www.irs.gov/Form990 for the latest information.  

Name of the organization  
PROJECT FOR PRIDE IN LIVING INC.  
Employer identification number  
23-7232208  

Organization type (check one):  

Filers of:  
Section:  

Form 990 or 990-EZ  
X  501(c)(3) (enter number) organization  
☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation  
☐ 527 political organization  

Form 990-PF  
☐ 501(c)(3) exempt private foundation  
☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation  
☐ 501(c)(3) taxable private foundation  

Check if your organization is covered by the General Rule or a Special Rule.  
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.  

General Rule  
☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor’s total contributions.  

Special Rules  
X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) $5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.  

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.  

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don’t complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling $5,000 or more during the year .................................  

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

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.  

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)  

923451 11-06-19
<table>
<thead>
<tr>
<th>No.</th>
<th>(a)</th>
<th>Name, address, and ZIP + 4</th>
<th>(b)</th>
<th>Total contributions</th>
<th>(c)</th>
<th>(d)</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>RICHARD M. SCHULTZ FAMILY FOUNDATION</td>
<td>6600 FRANCE AVE S SUITE 550</td>
<td>MINNEAPOLIS, MN 55435</td>
<td>$ 600,000.</td>
<td>Person ☑</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>UNITED WAY</td>
<td>404 S 8TH ST</td>
<td>MINNEAPOLIS, MN 55404</td>
<td>$ 542,940.</td>
<td>Person ☑</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>HENNEPIN COUNTY</td>
<td>525 PORTLAND AVE</td>
<td>MINNEAPOLIS, MN 55404</td>
<td>$ 818,553.</td>
<td>Person ☑</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td>U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT</td>
<td>4551 7TH STREET SW</td>
<td>WASHINGTON, DC 20410</td>
<td>$ 1,365,717.</td>
<td>Person ☑</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td>MINNEAPOLIS PUBLIC SCHOOLS</td>
<td>1250 WEST BROADWAY AVENUE</td>
<td>MINNEAPOLIS, MN 55411</td>
<td>$ 1,184,206.</td>
<td>Person ☑</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td>MINNESOTA DEPARTMENT OF HUMAN SERVICES</td>
<td>444 LAFAYETTE ROAD</td>
<td>SAINT PAUL, MN 55155</td>
<td>$ 2,459,121.</td>
<td>Person ☑</td>
<td></td>
</tr>
</tbody>
</table>
## PROJECT FOR PRIDE IN LIVING INC.

### Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
</table>
| 7   | MINNESOTA DEPARTMENT OF EMPLOYMENT AND ECONOMIC DEVELOPMENT  
     332 MINNESOTA STREET, SUITE E200  
     SAINT PAUL, MN 55101 | $ 491,398. | Person [X] |
|     |                           |                     | Payroll [ ]        |
|     |                           |                     | Noncash [ ]        |
|     | (Complete Part II for noncash contributions.) |                     |                     |
| 8   | TARGET FOUNDATION  
     PO BOX 1455  
     MINNEAPOLIS, MN 55440 | $ 660,000. | Person [X] |
|     |                           |                     | Payroll [ ]        |
|     |                           |                     | Noncash [ ]        |
|     | (Complete Part II for noncash contributions.) |                     |                     |
| 9   | CITY OF MINNEAPOLIS  
     250 S. 4TH ST., SUITE 300  
     MINNEAPOLIS, MN 55415 | $ 1,709,037. | Person [X] |
|     |                           |                     | Payroll [ ]        |
|     |                           |                     | Noncash [ ]        |
|     | (Complete Part II for noncash contributions.) |                     |                     |
**PROJECT FOR PRIDE IN LIVING INC.**

**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Description of noncash property given</th>
<th>(c) FMV (or estimate) (See instructions.)</th>
<th>(d) Date received</th>
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</thead>
<tbody>
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</table>
## PROJECT FOR PRIDE IN LIVING INC.

**Part III**

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this info. once.)

$________

Use duplicate copies of Part III if additional space is needed.

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
</tr>
</thead>
<tbody>
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<thead>
<tr>
<th>(e) Transfer of gift</th>
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</table>

Transferee's name, address, and ZIP + 4 | Relationship of transferor to transeree |
<table>
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</table>
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.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then
- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then
- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then
- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization

PROJECT FOR PRIDE IN LIVING INC.

Employer identification number

23-7232208

Part I-A   Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1. Provide a description of the organization's direct and indirect political campaign activities in Part IV.
2. Political campaign activity expenditures ................................................................. $ 
3. Volunteer hours for political campaign activities ..................................................

Part I-B   Complete if the organization is exempt under section 501(c)(3).

1. Enter the amount of any excise tax incurred by the organization under section 4955 ............................................... $ 
2. Enter the amount of any excise tax incurred by organization managers under section 4955 ............................................... $ 
3. If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 
   Yes ☐  No ☐
4a. If "Yes," describe in Part IV.
   Was a correction made? 
   Yes ☐  No ☐

Part I-C   Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1. Enter the amount directly expended by the filing organization for section 527 exempt function activities ............................................... $ 
2. Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ............................................... $ 
3. Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL. 
   line 17b .................................................................................................................. $ 
4. Did the filing organization file Form 1120-POL for this year? 
   Yes ☐  No ☐
5. Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization’s funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

<table>
<thead>
<tr>
<th>(a) Name</th>
<th>(b) Address</th>
<th>(c) EIN</th>
<th>(d) Amount paid from filing organization’s funds. If none, enter 0.</th>
<th>(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter 0.</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

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

Schedule C (Form 990 or 990-EZ) 2019

LHA

932041 11-26-19
**Part II-A** Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

**Limits on Lobbying Expenditures**
(The term "expenditures" means amounts paid or incurred.)

<table>
<thead>
<tr>
<th></th>
<th>(a) Filing organization's totals</th>
<th>(b) Affiliated group totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td>Total lobbying expenditures to influence public opinion (grassroots lobbying)</td>
<td>0.</td>
</tr>
<tr>
<td>1b</td>
<td>Total lobbying expenditures to influence a legislative body (direct lobbying)</td>
<td>22,661,761.</td>
</tr>
<tr>
<td>1c</td>
<td>Total lobbying expenditures (add lines 1a and 1b)</td>
<td>22,661,761.</td>
</tr>
<tr>
<td>1d</td>
<td>Other exempt purpose expenditures</td>
<td>0.</td>
</tr>
<tr>
<td>1e</td>
<td>Total exempt purpose expenditures (add lines 1c and 1d)</td>
<td>1,000,000.</td>
</tr>
<tr>
<td>1f</td>
<td>Lobbying nontaxable amount. Enter the amount from the following table in both columns.</td>
<td>250,000.</td>
</tr>
<tr>
<td>If the amount on line 1e, column (a) or (b) is:</td>
<td>The lobbying nontaxable amount is:</td>
<td></td>
</tr>
<tr>
<td>Not over $500,000</td>
<td>20% of the amount on line 1e.</td>
<td></td>
</tr>
<tr>
<td>Over $500,000 but not over $1,000,000</td>
<td>$100,000 plus 15% of the excess over $500,000.</td>
<td></td>
</tr>
<tr>
<td>Over $1,000,000 but not over $1,500,000</td>
<td>$175,000 plus 10% of the excess over $1,000,000.</td>
<td></td>
</tr>
<tr>
<td>Over $1,500,000 but not over $17,000,000</td>
<td>$225,000 plus 5% of the excess over $1,500,000.</td>
<td></td>
</tr>
<tr>
<td>Over $17,000,000</td>
<td>$1,000,000.</td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Grassroots nontaxable amount (enter 25% of line 1f)</td>
<td>0.</td>
</tr>
<tr>
<td>h</td>
<td>Subtract line 1g from line 1a. If zero or less, enter 0-</td>
<td>0.</td>
</tr>
<tr>
<td>i</td>
<td>Subtract line 1f from line 1c. If zero or less, enter 0-</td>
<td>0.</td>
</tr>
</tbody>
</table>
| j | If there is an amount other than zero on either line 1h or 1i, did the organization file Form 4720 reporting section 4911 tax for this year? | Yes [ ] No [ ]

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

**Lobbying Expenditures During 4-Year Averaging Period**

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2016</th>
<th>(b) 2017</th>
<th>(c) 2018</th>
<th>(d) 2019</th>
<th>(e) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>Lobbying nontaxable amount</td>
<td>1,000,000.</td>
<td>1,000,000.</td>
<td>1,000,000.</td>
<td>1,000,000.</td>
</tr>
<tr>
<td>b</td>
<td>Lobbying ceiling amount (150% of line 2a, column(e))</td>
<td>6,000,000.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Total lobbying expenditures</td>
<td>6,000,000.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Grassroots nontaxable amount</td>
<td>250,000.</td>
<td>250,000.</td>
<td>250,000.</td>
<td>250,000.</td>
</tr>
<tr>
<td>e</td>
<td>Grassroots ceiling amount (150% of line 2d, column (e))</td>
<td>1,500,000.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Grassroots lobbying expenditures</td>
<td>1,500,000.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5765 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i, below, provide in Part IV a detailed description of the lobbying activity.

<table>
<thead>
<tr>
<th></th>
<th>(a)</th>
<th>(b)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Volunteers?</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Media advertisements?</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Mailings to members, legislators, or the public?</td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Publications, published or broadcast statements?</td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Grants to other organizations for lobbying purposes?</td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Direct contact with legislators, their staffs, government officials, or a legislative body?</td>
<td></td>
</tr>
<tr>
<td>h</td>
<td>Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?</td>
<td></td>
</tr>
<tr>
<td>i</td>
<td>Other activities?</td>
<td></td>
</tr>
<tr>
<td>j</td>
<td>Total. Add lines 1c through 1i</td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>If &quot;Yes,&quot; enter the amount of any tax incurred under section 4912</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>If &quot;Yes,&quot; enter the amount of any tax incurred by organization managers under section 4912</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?</td>
<td></td>
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</tbody>
</table>

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Were substantially all (90% or more) dues received nondeductible by members?</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Did the organization make only in-house lobbying expenditures of $2,000 or less?</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?</td>
<td>3</td>
</tr>
</tbody>
</table>

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Dues, assessments and similar amounts from members</td>
</tr>
<tr>
<td>2</td>
<td>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</td>
</tr>
<tr>
<td>a</td>
<td>Current year</td>
</tr>
<tr>
<td>b</td>
<td>Carryover from last year</td>
</tr>
<tr>
<td>c</td>
<td>Total</td>
</tr>
<tr>
<td>3</td>
<td>Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</td>
</tr>
<tr>
<td>4</td>
<td>If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?</td>
</tr>
<tr>
<td>5</td>
<td>Taxable amount of lobbying and political expenditures (see instructions)</td>
</tr>
</tbody>
</table>

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part I-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.
**Part I**

**Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.**

<table>
<thead>
<tr>
<th></th>
<th>(a) Donor advised funds</th>
<th>(b) Funds and other accounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total number at end of year</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Aggregate value of contributions to (during year)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Aggregate value of grants from (during year)</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Aggregate value at end of year</td>
<td></td>
</tr>
</tbody>
</table>

5. 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?  
   - Yes ☐  No ☐

6. 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?  
   - Yes ☐  No ☐

**Part II**

**Conservation Easements.**

- Purpose(s) of conservation easements held by the organization (check all that apply).
  - Preservation of land for public use (for example, recreation or education)  
  - 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.

<table>
<thead>
<tr>
<th></th>
<th>Held at the End of the Tax Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>Total number of conservation easements</td>
</tr>
<tr>
<td>2b</td>
<td>Total acreage restricted by conservation easements</td>
</tr>
<tr>
<td>2c</td>
<td>Number of conservation easements on a certified historic structure included in (a)</td>
</tr>
<tr>
<td>2d</td>
<td>Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register</td>
</tr>
</tbody>
</table>

- Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year:

- 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?  
   - Yes ☐  No ☐

- 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 2(d) above satisfy the requirements of section 170(b)(4)(B)(ii) and section 170(b)(4)(B)(iii)?  
   - Yes ☐  No ☐

9. In Part III, 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.

**Part III**

**Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

- 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:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(i) Revenue included on Form 990, Part VIII, line 1</td>
<td>$ ________________________</td>
</tr>
<tr>
<td>(ii) Assets included in Form 990, Part X</td>
<td>$ ________________________</td>
</tr>
</tbody>
</table>

- 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:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>a Revenue included on Form 990, Part VIII, line 1</td>
<td>$ ________________________</td>
</tr>
<tr>
<td>b Assets included in Form 990, Part X</td>
<td>$ ________________________</td>
</tr>
</tbody>
</table>

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

**Schedule D (Form 990) 2019**
3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
   a [ ] Public exhibition  d [ ] Loan or exchange program
   b [ ] Scholarly research  e [ ] Other
   c [ ] Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? [ ] Yes [ ] No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? [ ] Yes [ ] No
   b If "Yes," explain the arrangement in Part XIII and complete the following table:

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1c</td>
</tr>
<tr>
<td>1d</td>
</tr>
<tr>
<td>1e</td>
</tr>
<tr>
<td>1f</td>
</tr>
</tbody>
</table>

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? [ ] Yes [ ] No
   b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part Xll.

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

1a Beginning of year balance
   b Contributions
   c Net investment earnings, gains, and losses
   d Grants or scholarships
   e Other expenditures for facilities and programs
   f Administrative expenses
   g End of year balance

<table>
<thead>
<tr>
<th>(a) Current year</th>
<th>(b) Prior year</th>
<th>(c) Two years back</th>
<th>(d) Three years back</th>
<th>(e) Four years back</th>
</tr>
</thead>
</table>

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
   a Board designated or quasi-endowment ▶ %
   b Permanent endowment ▶ 100.00 %
   c Term endowment ▶ %

   The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
   (i) Unrelated organizations

   If "Yes" on line 3a(i), are the related organizations listed as required on Schedule R?

3b

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Land</td>
<td></td>
<td>490.</td>
<td>490.</td>
<td></td>
</tr>
<tr>
<td>b Buildings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Leasehold improvements</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Equipment</td>
<td></td>
<td>2,365,146.</td>
<td>1,347,747.</td>
<td>1,017,399.</td>
</tr>
<tr>
<td>e Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (b), line 10c.) ▶ 1,017,889.
### Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

<table>
<thead>
<tr>
<th>(a) Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(A)</td>
<td></td>
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<tr>
<td>(B)</td>
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<td>(C)</td>
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<td>(D)</td>
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<td>(E)</td>
<td></td>
<td></td>
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<tr>
<td>(F)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(G)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(H)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)**

### Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

<table>
<thead>
<tr>
<th>(a) Description of investment</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
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<tr>
<td>(4)</td>
<td></td>
<td></td>
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<tr>
<td>(5)</td>
<td></td>
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<tr>
<td>(6)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)**

### Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>BENEFICIAL INTEREST IN MARKETABLE SECURITIES</td>
<td>97,250.</td>
</tr>
<tr>
<td>DUE FROM AFFILIATED ENTITIES</td>
<td>5,009,907.</td>
</tr>
<tr>
<td>(3)</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
</tbody>
</table>

**Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)**

5,107,157.

### Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability | (b) Book value |
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal income taxes</td>
<td></td>
</tr>
<tr>
<td>ESCROWS &amp; DEPOSITS</td>
<td>21,677.</td>
</tr>
<tr>
<td>DUE TO AFFILIATED ENTITIES</td>
<td>1,998,433.</td>
</tr>
<tr>
<td>(4)</td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
</tbody>
</table>

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

2,020,110.

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

X

Schedule D (Form 990) 2019
**Schedule D (Form 990) 2019**

**PROJECT FOR PRIDE IN LIVING INC.**  
23-7232208  
Page 4

### Part XI  Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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

<table>
<thead>
<tr>
<th></th>
<th>Total revenue, gains, and other support per audited financial statements</th>
<th>1</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part VIII, line 12:</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Net unrealized gains (losses) on investments</td>
<td>2a</td>
</tr>
<tr>
<td>b</td>
<td>Donated services and use of facilities</td>
<td>2b</td>
</tr>
<tr>
<td>c</td>
<td>Recoveries of prior year grants</td>
<td>2c</td>
</tr>
<tr>
<td>d</td>
<td>Other (Describe in Part XIII.)</td>
<td>2d</td>
</tr>
<tr>
<td>e</td>
<td>Add lines 2a through 2d</td>
<td>2e</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part VIII, line 12, but not on line 1:</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td>4a</td>
</tr>
<tr>
<td>b</td>
<td>Other (Describe in Part XIII.)</td>
<td>4b</td>
</tr>
<tr>
<td>c</td>
<td>Add lines 4a and 4b</td>
<td>4c</td>
</tr>
<tr>
<td>5</td>
<td>Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)</td>
<td>5</td>
</tr>
</tbody>
</table>

### Part XII  Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

<table>
<thead>
<tr>
<th></th>
<th>Total expenses and losses per audited financial statements</th>
<th>1</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part IX, line 25:</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Donated services and use of facilities</td>
<td>2a</td>
</tr>
<tr>
<td>b</td>
<td>Prior year adjustments</td>
<td>2b</td>
</tr>
<tr>
<td>c</td>
<td>Other losses</td>
<td>2c</td>
</tr>
<tr>
<td>d</td>
<td>Other (Describe in Part XIII.)</td>
<td>2d</td>
</tr>
<tr>
<td>e</td>
<td>Add lines 2a through 2d</td>
<td>2e</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part IX, line 25, but not on line 1:</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td>4a</td>
</tr>
<tr>
<td>b</td>
<td>Other (Describe in Part XIII.)</td>
<td>4b</td>
</tr>
<tr>
<td>c</td>
<td>Add lines 4a and 4b</td>
<td>4c</td>
</tr>
<tr>
<td>5</td>
<td>Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)</td>
<td>5</td>
</tr>
</tbody>
</table>

### Part XIII  Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

---

**PART V, LINE 4:**

**THE ENDOWMENT FUNDS ARE TO BE USED FOR OPERATING SUPPORT.**

---

**PART X, LINE 2:**

**PPL IS CLASSIFIED AS A TAX-EXEMPT ORGANIZATION UNDER MINNESOTA STATUTE 290.05 AND SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND IS EXEMPT FROM PRIVATE FOUNDATION STATUS UNDER SECTION 509(A)(1) OF THE INTERNAL REVENUE CODE AND IS SUBJECT TO INCOME TAXES ONLY ON NET UNRELATED BUSINESS INCOME. MANAGEMENT BELIEVES PPL DID NOT HAVE ANY UNRELATED BUSINESS INCOME. MANAGEMENT BELIEVES PPL DOES NOT HAVE ANY UNCERTAIN TAX POSTIONS.**
SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

Name of the organization: PROJECT FOR PRIDE IN LIVING INC.
Employer identification number: 23-7232208

Part I  Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1. Indicate whether the organization raised funds through any of the following activities. Check all that apply.
   a. [ ] Mail solicitations
   b. [ ] Internet and email solicitations
   c. [ ] Phone solicitations
   d. [ ] In-person solicitations
   e. [ ] Solicitation of non-government grants
   f. [ ] Solicitation of government grants
   g. [ ] Special fundraising events

2. a. Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  [ ] Yes  [ ] No
   b. If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

<table>
<thead>
<tr>
<th>(i) Name and address of individual or entity (fundraiser)</th>
<th>(ii) Activity</th>
<th>(iii) Did fundraiser have custody or control of contributions?</th>
<th>(iv) Gross receipts from activity</th>
<th>(v) Amount paid to (or retained by) fundraiser listed in col. (i)</th>
<th>(vi) Amount paid to (or retained by) organization</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
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</tr>
</tbody>
</table>

Total

3. List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

- 
- 
- 
- 
- 
- 
- 
- 
- 
- 

LHA  For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
**Part II**  
**Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

<table>
<thead>
<tr>
<th>Event</th>
<th>Event Title</th>
<th>Event Type</th>
<th>Event Type</th>
<th>Event Type</th>
<th>Event Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gross receipts</td>
<td>278,561</td>
<td>99,202</td>
<td>35,015</td>
<td>412,778</td>
<td></td>
</tr>
<tr>
<td>Less: Contributions</td>
<td>278,561</td>
<td>73,692</td>
<td>27,000</td>
<td>379,253</td>
<td></td>
</tr>
<tr>
<td>Gross income (line 1 minus line 2)</td>
<td>25,510</td>
<td>8,015</td>
<td>33,525</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Part III**  
**Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

<table>
<thead>
<tr>
<th>Event</th>
<th>Event Type</th>
<th>Event Type</th>
<th>Event Type</th>
<th>Event Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gross revenue</td>
<td>8,862</td>
<td>1,342</td>
<td>10</td>
<td>10,214</td>
</tr>
<tr>
<td>Direct expense summary. Add lines 4 through 9 in column (d)</td>
<td>85,707</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net income summary. Subtract line 10 from line 3, column (d)</td>
<td>-52,182</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

9 Enter the state(s) in which the organization conducts gaming activities:
   a. Is the organization licensed to conduct gaming activities in each of these states? [ ] Yes [ ] No

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? [ ] Yes [ ] No

10b If "Yes," explain:
Schedule G (Form 990 or 990-EZ) 2019 PROJECT FOR PRIDE IN LIVING INC. 23-7232208 Page 3

11 Does the organization conduct gaming activities with nonmembers? □ Yes □ No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? □ Yes □ No

13 Indicate the percentage of gaming activity conducted in:
   a The organization's facility .................................................. 13a %
   b An outside facility ................................................................ 13b %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

   Name ▶
   Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? □ Yes □ No

   b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ ____________ and the amount of gaming revenue retained by the third party ▶ $ ____________

   c If "Yes," enter name and address of the third party:

      Name ▶
      Address ▶

16 Gaming manager information:

      Name ▶

      Gaming manager compensation ▶ $ ____________

      Description of services provided ▶

      □ Director/officer □ Employee □ Independent contractor

17 Mandatory distributions:

   a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? □ Yes □ No

   b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (ii) and (v); and Part III, lines 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization

PROJECT FOR PRIDE IN LIVING INC.

Employer identification number

23-7232208

<table>
<thead>
<tr>
<th>Part I</th>
<th>General Information on Grants and Assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?</td>
</tr>
</tbody>
</table>

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1 (a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section (if applicable)</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of noncash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part III: Grants and Other Assistance to Domestic Individuals

Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Number of recipients</th>
<th>(c) Amount of cash grant</th>
<th>(d) Amount of non-cash assistance</th>
<th>(e) Method of valuation (book, FMV, appraisal, other)</th>
<th>(f) Description of noncash assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>EXTRA HELP</td>
<td>45</td>
<td>20,197.</td>
<td>0.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ADAMS GRANTS</td>
<td>2</td>
<td>526.</td>
<td>0.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>KOPP GRANT</td>
<td>24</td>
<td>9,238.</td>
<td>0.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Part IV: Supplemental Information

Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

**PART I, LINE 2:**

PPL'S PROGRAM DIRECTOR RECEIVES GRANT APPLICATIONS AND REVIEWS THEM TO DETERMINE IF INDIVIDUALS MEET THE GRANT REQUIREMENTS. GRANTS ARE THEN PAID DIRECTLY TO SERVICE PROVIDERS FOR THE GRANT RECIPIENTS.
## 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.

#### Name of the organization

**PROJECT FOR PRIDE IN LIVING INC.**

**Employer identification number**

23-7232208

---

### Part I Questions Regarding Compensation

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>First-class or charter travel</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tax indemnification and gross-up payments</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Housing allowance or residence for personal use</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tax for companions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health or social club dues or initiation fees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discretionary spending account</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Payments for business use of personal residence</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal services (such as maid, chauffeur, chef)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>b</th>
<th>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 &quot;No,&quot; complete Part III to explain.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1b</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2</th>
<th>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?</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3</th>
<th>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.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Compensation committee</td>
<td></td>
</tr>
<tr>
<td>Independent compensation consultant</td>
<td></td>
</tr>
<tr>
<td>Written employment contract</td>
<td></td>
</tr>
<tr>
<td>Compensation survey or study</td>
<td></td>
</tr>
<tr>
<td>Form 990 of other organizations</td>
<td></td>
</tr>
<tr>
<td>Approval by the board or compensation committee</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4</th>
<th>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:</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>Receive a severance payment or change-of-control payment?</td>
</tr>
<tr>
<td>4a</td>
<td>X</td>
</tr>
<tr>
<td>b</td>
<td>Participate in, or receive payment from, a supplemental nonqualified retirement plan?</td>
</tr>
<tr>
<td>4b</td>
<td>X</td>
</tr>
<tr>
<td>c</td>
<td>Participate in, or receive payment from, an equity-based compensation arrangement?</td>
</tr>
<tr>
<td>4c</td>
<td>X</td>
</tr>
</tbody>
</table>

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.

<table>
<thead>
<tr>
<th>5</th>
<th>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:</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>The organization?</td>
</tr>
<tr>
<td>5a</td>
<td>X</td>
</tr>
<tr>
<td>b</td>
<td>Any related organization?</td>
</tr>
<tr>
<td>5b</td>
<td>X</td>
</tr>
</tbody>
</table>

If "Yes" on line 5a or 5b, describe in Part III.

<table>
<thead>
<tr>
<th>6</th>
<th>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:</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>The organization?</td>
</tr>
<tr>
<td>6a</td>
<td>X</td>
</tr>
<tr>
<td>b</td>
<td>Any related organization?</td>
</tr>
<tr>
<td>6b</td>
<td>X</td>
</tr>
</tbody>
</table>

If "Yes" on line 6a or 6b, describe in Part III.

<table>
<thead>
<tr>
<th>7</th>
<th>For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If &quot;Yes,&quot; describe in Part III.</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>8</th>
<th>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 &quot;Yes,&quot; describe in Part III.</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>9</th>
<th>If &quot;Yes&quot; on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td></td>
</tr>
</tbody>
</table>

---

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

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Breakdown of W-2 and/or 1099-MISC compensation</th>
<th>(C) Retirement and other deferred compensation</th>
<th>(D) Nontaxable benefits</th>
<th>(E) Total of columns (B)(i)-(D)</th>
<th>(F) Compensation in column (B) reported as deferred on prior Form 990</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) PAUL WILLIAMS</td>
<td>(i) 240,009. (ii) 15,000. (iii) 0.</td>
<td>(i) 0. (ii) 9,231. (iii) 0.</td>
<td>(i) 16,925. (ii) 26,156.</td>
<td>(i) 255,009. (ii) 0.</td>
<td></td>
</tr>
<tr>
<td>CEO-EXECUTIVE DIRECTOR</td>
<td>(i) 0. (ii) 0. (iii) 0.</td>
<td>(i) 0. (ii) 8,289. (iii) 0.</td>
<td>(i) 11,330. (ii) 0.</td>
<td>(i) 146,578. (ii) 0.</td>
<td></td>
</tr>
<tr>
<td>(2) JOANNE KOSCOLEK</td>
<td>(i) 144,078. (ii) 2,500. (iii) 0.</td>
<td>(i) 0. (ii) 3,041. (iii) 0.</td>
<td>(i) 8,289. (ii) 0.</td>
<td>(i) 187,622. (ii) 0.</td>
<td></td>
</tr>
<tr>
<td>VICE PRESIDENT</td>
<td>(i) 0. (ii) 0. (iii) 0.</td>
<td>(i) 0. (ii) 3,342. (iii) 0.</td>
<td>(i) 1,161. (ii) 0.</td>
<td>(i) 149,050. (ii) 0.</td>
<td></td>
</tr>
<tr>
<td>(3) SCOTT CORDES</td>
<td>(i) 177,622. (ii) 10,000. (iii) 0.</td>
<td>(i) 0. (ii) 3,342. (iii) 0.</td>
<td>(i) 1,161. (ii) 0.</td>
<td>(i) 4,503. (ii) 0.</td>
<td></td>
</tr>
<tr>
<td>CHIEF FINANCIAL OFFICER</td>
<td>(i) 0. (ii) 0. (iii) 0.</td>
<td>(i) 0. (ii) 3,342. (iii) 0.</td>
<td>(i) 1,161. (ii) 0.</td>
<td>(i) 149,050. (ii) 0.</td>
<td></td>
</tr>
<tr>
<td>(4) MAY XIONG</td>
<td>(i) 149,050. (ii) 0. (iii) 0.</td>
<td>(i) 0. (ii) 5,962. (iii) 0.</td>
<td>(i) 1,161. (ii) 0.</td>
<td>(i) 7,123. (ii) 0.</td>
<td></td>
</tr>
<tr>
<td>VICE PRESIDENT</td>
<td>(i) 0. (ii) 0. (iii) 0.</td>
<td>(i) 0. (ii) 5,962. (iii) 0.</td>
<td>(i) 1,161. (ii) 0.</td>
<td>(i) 7,123. (ii) 0.</td>
<td></td>
</tr>
</tbody>
</table>
PART I, LINE 7:


THE NON-FIXED BONUS PAYMENT WAS DETERMINED BY THE HR COMMITTEE OF THE BOARD OF DIRECTORS WITHIN THE PARAMETERS OF THE EMPLOYMENT AGREEMENT BETWEEN PAUL AND THE ORGANIZATION.

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

PROVIDING TRANSFORMATIVE AFFORDABLE HOUSING AND EMPLOYMENT READINESS SERVICES.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

INTEGRATED LIVING. THE SERVICES PROVIDED TAKE A HOLISTIC AND COMPREHENSIVE APPROACH TO ASSISTING FAMILIES WHILE PROVIDING A RANGE OF SUPPORT SERVICES AND LINKS TO COMMUNITY RESOURCES. PPL ALSO PROVIDES HOUSING AND COMPREHENSIVE SUPPORT SERVICES TO DISABLED HOMELESS ADULTS OFTEN WITH MENTAL ILLNESS AND CHEMICAL DEPENDENCY.

IN 2019: A) COMPLETED MINO OSKI DAH YUNG IN PARTNERSHIP WITH AIIN DAH YUNG IN SAINT PAUL; 42 UNITS FOR NATIVE AMERICAN YOUTH EXPERIENCING HOMELESSNESS. B) STARTED CONSTRUCTION OF MAYA COMMONS LIMITED PARTNERSHIP; 50 UNITS OF AFFORDABLE HOUSING.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

COMMUNITY. THIS INCLUDES TWO ALTERNATIVE HIGH SCHOOLS WHICH ARE UNDER CONTRACT WITH THE MINNEAPOLIS PUBLIC SCHOOLS DISTRICT. IN ADDITION TO THE TWO ALTERNATIVE SCHOOLS, PPL ALSO CONNECTS YOUTH TO EDUCATION AND TRAINING PROGRAMS THROUGH LEARN AND EARN TO ACHIEVE POTENTIAL (LEAP), A COLLECTIVE IMPACT MODEL CONSISTING OF SIX ALTERNATIVE SCHOOLS (EL COLEGIO CHARTER SCHOOL, BROOKLYN CENTER EARLY COLLEGE ACADEMY, BLOOMINGTON CAREER & COLLEGE ACADEMY, NORTH AND SOUTH EDUCATION CENTERS), HENNEPIN COUNTY, AND MINNEAPOLIS PUBLIC SCHOOLS; AND STEP UP YOUTH EMPLOYMENT PROGRAM, A COLLABORATION BETWEEN THE CITY OF
MINNEAPOLIS, ACHIEVEMENTS, MINNESOTA DEPARTMENT OF ECONOMIC DEVELOPMENT, AND PPL.

IN 2019: A) 84% OF GRADUATES HIRED RETAINED BY THEIR EMPLOYMENT FOR 12+ MONTHS. B) 4X INCOME GROWTH FOR GRADUATES HIRED, ON AVERAGE.

FORM 990, PART VI, SECTION B, LINE 11B:
THE BOARD WAS PROVIDED THE FORM 990 BEFORE IT WAS SIGNED AND FILED.

FORM 990, PART VI, SECTION B, LINE 12C:
THE ORGANIZATION DISCUSSES AND discloses conflicts of interest as they arise. Any new board members are required to disclose conflicts when joining and annually thereafter.

FORM 990, PART VI, SECTION B, LINE 15A:
THE EXECUTIVE COMMITTEE REVIEWS COMPENSATION AND COMPARES TO OTHER ORGANIZATIONS WITH SIMILAR OPERATIONS.

FORM 990, PART VI, SECTION C, LINE 19:
ALL DOCUMENTS ARE MADE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:
TRANSFER TO PPL INVESTMENT CORPORATION -3,200,000.
COMPREHENSIVE CAMPAIGN FRANKLIN THEATER -400,000.
TOTAL TO FORM 990, PART XI, LINE 9 -3,600,000.

FORM 990, PART XI, LINE 2C
THE PROCESS TO REVIEW THE AUDIT HAS NOT CHANGED FROM THE PRIOR YEAR.
**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.
- Go to www.irs.gov/Form990 for instructions and the latest information.

### Part I
**Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN (if applicable) of disregarded entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Total income</th>
<th>(e) End-of-year assets</th>
<th>(f) Direct controlling entity</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
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<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Exempt Code section</th>
<th>(e) Public charity status (if section 501(c)(3))</th>
<th>(f) Direct controlling entity</th>
<th>(g) Section 512(b)(13) controlled entity?</th>
</tr>
</thead>
<tbody>
<tr>
<td>PPL PROPERTIES - 27-4235225</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td>1035 FRANKLIN AVENUE</td>
<td>AFFORDABLE RENTAL HOUSING</td>
<td>MINNESOTA</td>
<td>501(c)(3)</td>
<td>7</td>
<td>PROJECT FOR PRIDE IN LIVING, INC.</td>
<td>X</td>
</tr>
<tr>
<td>MINNEAPOLIS, MN 55404</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PPL INVESTMENT CORPORATION - 82-1879983</td>
<td>SUPPORTING ORGANIZATION TO</td>
<td>MINNESOTA</td>
<td>501(c)(3)</td>
<td>12</td>
<td>PROJECT FOR PRIDE IN LIVING, INC.</td>
<td>X</td>
</tr>
<tr>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part III Identification of Related Organizations Taxable as a Partnership

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<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations? Yes No</th>
<th>(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner? Yes No</th>
<th>(k) Percentage of ownership</th>
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<th>(e) Type of entity (C corp, S corp, or trust)</th>
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SEE PART VII FOR CONTINUATIONS
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Schedule R (Form 990)  PROJECT FOR PRIDE IN LIVING INC.  23-7232208

Part III  Continuation of Identification of Related Organizations Taxable as a Partnership

93223
04-03-19
### Schedule R (Form 990)

**PROJECT FOR PRIDE IN LIVING INC.**

#### Part III: Continuation of Identification of Related Organizations Taxable as a Partnership

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<td>OXFORD VILLAGE LIMITED</td>
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<tr>
<td>PARTNERSHIP - 37-1824931,</td>
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<tr>
<td>1035 EAST FRANKLIN AVENUE, MN 55404-2920</td>
<td>AFFORDABLE RENTAL HOUSING</td>
<td>MN</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
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<tr>
<td>PFLUC LLC - 90-0333201</td>
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<tr>
<td>1035 EAST FRANKLIN AVENUE, MN 55404-2920</td>
<td>AFFORDABLE RENTAL HOUSING</td>
<td>MN</td>
<td>N/A</td>
<td>RELATED</td>
<td>-11.2 199,955.</td>
<td>X</td>
<td>N/A</td>
<td>X</td>
<td>50.00%</td>
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<tr>
<td>FROXTOWN DEVELOPMENT LLC -</td>
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<td>27-3137908, 1035 EAST</td>
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<tr>
<td>FRANKLIN AVENUE, MINNEAPOLIS, MN 55404-2920</td>
<td>AFFORDABLE RENTAL HOUSING</td>
<td>MN</td>
<td>N/A</td>
<td>RELATED</td>
<td>-86,582  1,967,864.</td>
<td>X</td>
<td>N/A</td>
<td>X</td>
<td>50.00%</td>
<td></td>
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</tbody>
</table>

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932223
04-01-19
<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
</tr>
</thead>
<tbody>
<tr>
<td>PPL YOUTHLINK COMMUNITY LP -</td>
<td></td>
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<td>36-4841190, 1035 EAST</td>
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<tr>
<td>FRANKLIN AVENUE, MINNEAPOLIS, MN 55404-2920</td>
<td>AFFORDABLE RENTAL HOUSING</td>
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<td>N/A</td>
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<td>N/A</td>
<td>N/A</td>
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<tr>
<td>ADYC SUPPORTIVE HOUSING LP -</td>
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<td>30-1030432, 1035 EAST</td>
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<td>FRANKLIN AVENUE, MINNEAPOLIS, MN 55404-2920</td>
<td>AFFORDABLE RENTAL HOUSING</td>
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<td>N/A</td>
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<td>PPL BUNGE LP - 61-1868044</td>
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<td>1035 EAST FRANKLIN AVENUE, MINNEAPOLIS, MN 55404-2920</td>
<td>AFFORDABLE RENTAL HOUSING</td>
<td>MN</td>
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04-01-19
<table>
<thead>
<tr>
<th>(a) Name of related organization</th>
<th>(b) Transaction type (aa)</th>
<th>(c) Amount involved</th>
<th>(d) Method of determining amount involved</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) VARIOUS LIMITED PARTNERSHIPS AND LLCS</td>
<td>E</td>
<td>5,099,907.00</td>
<td>COST</td>
</tr>
<tr>
<td>(2) VARIOUS LIMITED PARTNERSHIPS AND LLCS</td>
<td>L</td>
<td>6,716,459.00</td>
<td>COST</td>
</tr>
<tr>
<td>(3) VARIOUS LIMITED PARTNERSHIPS AND LLCS</td>
<td>M</td>
<td>2,665,292.00</td>
<td>COST</td>
</tr>
<tr>
<td>(4) PPL INVESTMENT CORPORATIO</td>
<td>B</td>
<td>3,200,000.00</td>
<td>COST</td>
</tr>
<tr>
<td>(5) PPL ADMIN LLC</td>
<td>K</td>
<td>400,000.00</td>
<td>COST</td>
</tr>
</tbody>
</table>

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
   a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
   b Gift, grant, or capital contribution to related organization(s)
   c Gift, grant, or capital contribution from related organization(s)
   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)
   g Sale of assets to related organization(s)
   h Purchase of assets from related organization(s)
   i Exchange of assets with related organization(s)
   j Lease of facilities, equipment, or other assets to related organization(s)
   k Lease of facilities, equipment, or other assets from related organization(s)
   l Performance of services or membership or fundraising solicitations for related organization(s)
   m Performance of services or membership or fundraising solicitations by related organization(s)
   n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
   o Sharing of paid employees with related organization(s)
   p Reimbursement paid to related organization(s) for expenses
   q Reimbursement paid by related organization(s) for expenses
   r Other transfer of cash or property to related organization(s)
   s Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.
### Part VI: Unrelated Organizations Taxable as a Partnership

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.

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(e) Are all partners unrelated?</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
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</tbody>
</table>
PART III, IDENTIFICATION OF RELATED ORGANIZATIONS TAXABLE AS PARTNERSHIP:

NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

BOONE AVENUE APARTMENTS LIMITED PARTNERSHIP

EIN: 20-1804927

1035 EAST FRANKLIN AVENUE

MINNEAPOLIS, MN  55404-2920

NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

CAMDEN APARTMENTS MINNEAPOLIS LIMITED PARTNERSHIP

EIN: 20-3716368

1035 EAST FRANKLIN AVENUE

MINNEAPOLIS, MN  55404-2920

NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

JOSEPH SELVAGGIO INITIATIVE LIMITED PARTNERSHIP

EIN: 41-1931835

1035 EAST FRANKLIN AVENUE

MINNEAPOLIS, MN  55404-2920

NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

NEW AMERICAN HOMELAND HOUSING INITIATIVE PARTNERSHIP, LLP

EIN: 41-1874213

1035 EAST FRANKLIN AVENUE

MINNEAPOLIS, MN  55404-2920

NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

PPL WEST SEVENTH HOUSING LIMITED PARTNERSHIP
EIN: 45-3865547

1035 EAST FRANKLIN AVENUE
MINNEAPOLIS, MN  55404-2920

NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

VAN CLEVE APARTMENTS EAST LIMITED PARTNERSHIP
EIN: 26-0217283
1035 EAST FRANKLIN AVENUE
MINNEAPOLIS, MN  55404-2920

NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

VAN CLEVE APARTMENTS WEST LIMITED PARTNERSHIP
EIN: 26-1539922
1035 EAST FRANKLIN AVENUE
MINNEAPOLIS, MN  55404-2920

NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

HAMLINE STATION FAMILY HOUSING LIMITED PARTNERSHIP
EIN: 37-1751032
1035 EAST FRANKLIN AVENUE
MINNEAPOLIS, MN  55404-2920

NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

ANISHINABE BII GII WIIN HOUSING LIMITED PARTNERSHIP
EIN: 47-5425925
1035 EAST FRANKLIN AVENUE
MINNEAPOLIS, MN  55404-2920
Mail To: Minnesota Attorney General's Office
Charities Division
445 Minnesota Street, Suite 1200
St. Paul, MN 55101-2130

Website Address: www.ag.state.mn.us/charity

STATE OF MINNESOTA
CHARITABLE ORGANIZATION
ANNUAL REPORT FORM
(Pursuant to Minn. Stat. ch. 309)

SECTION A: Organization Information

Legal Name of Organization: PROJECT FOR PRIDE IN LIVING INC.

Federal EIN: 23-7232208 Fiscal Year-End: 12312019

mm/dd/yyyy

Did the organization's fiscal yearend change? ☐ Yes ☒ No

Mailing Address: SCOTT CORDES
Contact Person
1035 EAST FRANKLIN AVENUE
Street Address
MINNEAPOLIS, MN 55404-2920
City, State, and ZIP Code
612-455-5100
Phone Number
SCOTT.CORDES@PPL-INC.ORG
Email Address

Physical Address: SCOTT CORDES
Contact Person
1035 EAST FRANKLIN AVENUE
Street Address
MINNEAPOLIS, MN 55404-2920
City, State, and ZIP Code
612-455-5100
Phone Number
SCOTT.CORDES@PPL-INC.ORG
Email Address

1. Organization's website: WWW.PPL-INC.ORG

2. List all of the organization's alternate and former names (attach list if more space is needed).

   Alternate ☐ Former ☒

   Alternate ☐ Former ☒

3. List all names under which the organization solicits contributions (attach list if more space is needed).

   PROJECT FOR PRIDE IN LIVING, INC

   PPL

4. Is the organization incorporated pursuant to Minn. Stat. ch. 317A? ☒ Yes ☐ No

5. Total amount of contributions the organization received from Minnesota donors: $ 6,624,974.

6. Has the organization's tax-exempt status with the IRS changed?
   ☐ Yes ☒ No If yes, attach explanation.

7. Has the organization significantly changed its purpose(s) or program(s)?
   ☐ Yes ☒ No If yes, attach explanation.
8. Has the organization been denied the right to solicit contributions by any court or government agency?
   ☐ Yes  ☒ No  If yes, attach explanation.

9. Does the organization use the services of a professional fundraiser (outside solicitor or consultant) to solicit contributions in Minnesota?  ☐ Yes  ☒ No
   If yes, provide the following information for each (attach list if more space is needed):

   Name of Professional Fundraiser  Compensation

   Street Address  City, State, and ZIP Code

10. Is the organization a food shelf?  ☐ Yes  ☒ No
    If yes, is the organization required to file an audit?  ☐ Yes, audit attached  ☐ No
    Note: An organization that has total revenue of more than $750,000 is required to file an audit prepared in accordance with generally accepted accounting principles by an independent CPA or LPA. The value of donated food to a nonprofit food shelf may be excluded from the total revenue if the food is donated for subsequent distribution at no charge and is not resold.

11. Do any directors, officers, or employees of the organization or its related organization(s) receive total compensation* of more than $100,000?  ☒ Yes  ☐ No
    If yes, provide the following information for the five highest paid individuals:

<table>
<thead>
<tr>
<th>Name and title</th>
<th>Compensation*</th>
<th>Other compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>PAUL WILLIAMS</td>
<td>255,009</td>
<td>26,156</td>
</tr>
<tr>
<td>CEO-EXECUTIVE DIRECTOR</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SCOTT CORDES</td>
<td>187,622</td>
<td>4,503</td>
</tr>
<tr>
<td>CHIEF FINANCIAL OFFICER</td>
<td></td>
<td></td>
</tr>
<tr>
<td>JOANNE KOSCIOLEK</td>
<td>146,578</td>
<td>11,330</td>
</tr>
<tr>
<td>VICE PRESIDENT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MAY XIONG</td>
<td>149,050</td>
<td>7,123</td>
</tr>
<tr>
<td>VICE PRESIDENT</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Compensation is defined as the total amount reported on Form W-2 (Box 5) or Form 1099-MISC (Box 7) issued by the organization and its related organizations to the individual. See Minn. Stat. § 309.53, subd. 3(i) and Minn. Stat. § 317A.011 for definitions.
## SECTIONS B: Financial Information

This section must be completed by organizations that file an IRS Form 990-EZ, 990-PF, or 990-N. Organizations that file an IRS Form 990 may skip Section B and go directly to Section C.

### INCOME

1. Contributions Received $ 1
2. Government Grants $ 2
3. Program Service Revenue $ 3
4. Other Revenue $ 4
5. TOTAL INCOME $ 5

### EXPENSES

6. Program Expenses $ 6
7. Management & General Expenses $ 7
8. Fund-raising Expenses $ 8
9. TOTAL EXPENSES $ 9
10. EXCESS or DEFICIT $ 10
   (Line 5 minus Line 9)

### ASSETS

11. Cash $ 11
12. Land, Buildings & Equipment $ 12
13. Other Assets $ 13
14. TOTAL ASSETS $ 14

### LIABILITIES

15. Accounts Payable $ 15
16. Grants Payable $ 16
17. Other Liabilities $ 17
18. TOTAL LIABILITIES $ 18

### FUND BALANCE/NET WORTH

(Line 14 minus Line 18) $
### Section B (continued): Statement of Functional Expenses

This expense statement must be prepared in accordance with generally accepted accounting principles. Each column must be completed, and Columns B, C, and D must equal Column A. The amount on Line 25, Column A must match Line 17 of IRS Form 990-EZ or Line 26 of IRS Form 990-PF.

<table>
<thead>
<tr>
<th></th>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Grants and other assistance to governments and organizations in the U.S.</td>
<td></td>
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<tr>
<td>2.</td>
<td>Grants and other assistance to individuals in the U.S.</td>
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<tr>
<td>3.</td>
<td>Grants and other assistance to governments, organizations, and individuals outside the U.S.</td>
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<tr>
<td>4.</td>
<td>Benefits paid to or for members</td>
<td></td>
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<tr>
<td>5.</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
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<tr>
<td>6.</td>
<td>Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)</td>
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<tr>
<td>7.</td>
<td>Other salaries and wages</td>
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<tr>
<td>8.</td>
<td>Pension plan contributions (include section 401(k) and section 433(b) employer contributions)</td>
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<tr>
<td>9.</td>
<td>Other employee benefits</td>
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<tr>
<td>10.</td>
<td>Payroll taxes</td>
<td></td>
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<tr>
<td>11.</td>
<td>Fees for services (non-employees):</td>
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<tr>
<td>a.</td>
<td>Management</td>
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<tr>
<td>b.</td>
<td>Legal</td>
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<tr>
<td>c.</td>
<td>Accounting</td>
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<tr>
<td>d.</td>
<td>Lobbying</td>
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<tr>
<td>e.</td>
<td>Professional fundraising services</td>
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<tr>
<td>f.</td>
<td>Investment management fees</td>
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<td>g.</td>
<td>Other</td>
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<td>12.</td>
<td>Advertising and promotion</td>
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<td>13.</td>
<td>Office expenses</td>
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<tr>
<td>14.</td>
<td>Information technology</td>
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<tr>
<td>15.</td>
<td>Royalties</td>
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<td>16.</td>
<td>Occupancy</td>
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<td>17.</td>
<td>Travel</td>
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<tr>
<td>18.</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
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<tr>
<td>19.</td>
<td>Conferences, conventions, and meetings</td>
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<tr>
<td>20.</td>
<td>Interest</td>
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<tr>
<td>21.</td>
<td>Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22.</td>
<td>Depreciation, depletion, and amortization</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23.</td>
<td>Insurance</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24.</td>
<td>Other expenses. Itemize expenses not covered above. Expenses labeled miscellaneous may not exceed 5% of total expenses (Line 25).</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>d.</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>25.</td>
<td>Total functional expenses. Add lines 1 through 24d</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

26. **Joint costs.** Check here [ ] if following SOP 98-2. Complete this line only if the organization reported in Column B joint costs from a combined educational campaign and fundraising solicitation.
Section C: Board of Directors Signatures and Acknowledgment

The form must be executed pursuant to a resolution of the board of directors, trustees, or managing group and must be signed by two officers of the organization. See Minn. Stat. § 309.52, subd. 3.

We, the undersigned, state and acknowledge that we are duly constituted officers of this organization, being the

__________________________ (Title) and ____________________________ (Title) respectively, and

that we execute this document on behalf of the organization pursuant to the resolution of the

__________________________ (Board of Directors, Trustees, or Managing Group) adopted on the ______________ day of __________________, 20___, approving the contents of the document, and do hereby certify that the

__________________________ (Board of Directors, Trustees, or Managing Group) has assumed, and will continue to assume, responsibility for determining matters of policy, and have supervised, and will continue to supervise, the operations and finances of the organization. We further state that the information supplied is true, correct and complete to the best of our knowledge.

SCOTT CORDES

Name (Print)

Signature

CHIEF FINANCIAL OFFICER

Title

Date

__________________________

Name (Print)

Signature

__________________________

Title

Date