Form 990

	<u></u>	990	1						-			j	OMB No.	. 1545-0047	ė.
20 VE	rviii	ne Treasury					ation Exem of the Internal Re						20)16	
Depa	rtment of the	e Treasury e Service		•	Do not en	er social securi	y numbers on this and its instruction	form as it may	/ be mad	ie public.	-	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		to Public pection	
A	For the		:	ear, or tax ye				, 2016, and		9			,		
В	Check If ap	plicable	C	Name of organizati	on All	iance fo	r Gun Resp	onsibil	ity		D Emplo	yer ident	ification nu	ımber	
	Addre	ss change		Doing business as								2512			
	Name	change	1	Number and street	(or PO box	if mail is not delive	ered to street address)		Room/s	ulte	E Teleph	one numb	per		
	Initial	return 1		Box 2171							(20	<u>6) 6</u>	<u>82–73.</u>	28	
	Pinel re	iumiemineted	(City or town, state	or province,	country, and ZIP or	foreign postal code								
	Amen	L		attle				WA 98	1111		G Gross				
	Applic			Name and address						H(a) Is thus a				_	X No
			_	ee Hopkins			Seattle	WA 98	111	H(b) Are all: if 'No,'	subordinates attach a list (inciuaea see Instri	? uctions)	Yes	∐ No
<u> </u>		mpt status			501(c) (4		ert no.) 4947	7(a)(1) or	527						
<u>1</u>	Websi			unrespon						H(c) Group					
K				Corporation	Trust	Association	Other	L. Year o	f formatio	n: 2014	4 M:	State of le	gal domicil	e. WA	
Pa	rt,[.<]	Summary	<u>_</u>		 										
1	1 Bri	ietly describe	e the	e organization	's mission	or most signi	icant activities:	To_ady	rocate	for sol	utions t	hat r	educe gr	un viol	ence.
8	_														
훒	_														
E	_ =			~ 	<i>-</i> -			_ ,- ,-							
Activities & Governance		eck this box	-				its operations or								
8							VI, line 1a) g body (Part VI, I					3 4			;
8			•	_		•	016 (Part V, lîne	•				5			5
劉												6			10
힑				,			(C), line 12					7a			0
							, line 34					7b		···	0.
_											rior Year		Cur	rent Yea	
-	8 Cc	ntributions a	and (grants (Part V	'ili. line 1h				l I		,022,6	58.		,365,2	
2	9 Pr	ogram servic	ж ге	evenue (Part V	/11. line 2	á)	RECEIV	EU		-	137,2			70057.	0
anuskau						lines 3, 4, and			1	 					
- [11 Ot	her revenue	(Pa	rt VIII. column	(A), lines	5. 6d. 8c29d.	10c. and 1.1e)	18	1	ļ	22,4	62.			0.
1	12 To	tai revenue -	a	dd lines 8 thro	ugh 11 (n	rust equal 🤾 ar	t VIIÁ Gunna (A)	Hine 12)	4	1	,182,3		4	,365,2	
7	13 Gr	ants and sim	ilar	amounts paid	(Part IX	column (A)	nes 1-3)			\					0.
	14 Be	nefits paid to	o or	for members	(Part IX, c	olumn (A), line	MGDEN	. 1111	л. Д.						0.
Į	15 Sa	laries. other	con	npensation, er	nolovee b	enefits (Parts	Kacolumn (A), Im	es 5-10)	۲)		322,8	121 -		971,1	
g		-		•			1e)	-		 	24,0			202,2	
				-						73. T. M. M.			3.344		323
Expense			-	•		nn (D), line 25)		432,0		1. 1. 1. E.			· 1000		7 5 4
-		•	•				·24e)			<u></u>	526,7			,371,9	
		•					lumn (A), line 25)				873,5			,545,3	
_	19 Re	venue less e	expe	enses. Subtrac	ct line 181	from line 12 .	· · · · · · · · ·	<u></u>	· · · ·	1	308,7			-180,0	
Balances										Beginnir	ng of Curre		End	d of Year	
를		•					• • • • • • •				437,5			223,7	<u> 719</u> .
밁	21 To	tal liabilities ((Pai	rt X, line 26).			• • • • • • • •				33,7	89.			
Ę					btract line	21 from line 2	0			<u> </u>	403,7	60.		223,	719.
Ŗа	rt II:	Signature	e Bi	lock		· <u> </u>									
Jnde	penalities o	ol perjury, i decla	re th	at I have examined	d this return.	including accompa	nying schedules and s preparer has any kno	tatements, and t	o the best	of my knowl	edge and be	iei, il ıs tr	ue, correct,	and	
omp	ete. Declar	ation of preparer	(Othe	er than officer) is b	ased on all t	nformation of which	preparer has any kno	wiedge							
2	-	15 <u>~</u>	1	nee	X DI	Mini	2				8/08/1	7			
Ţ Şig	n	StgNature	AST (I	fficer		100				Da	te				
Hei	e	Rene	e	Hopkins	/					CEO					
≰		Type or p	rint n	ame and title											
TA CA		Print/Type pre	pare	r's name		Preparer's signal	ите	Deab	е		Check	1	PTIN		
ai	d	1						08	/08/	17	self-employe	<u>-</u>			
	parer	Firm's name	- 1	HP Poli	tical	Complian	ce								
	Only	Firm's address		29 Bria							Firm's EiN ¹	47.	-12071	167	
	•			Ringgol		<u> </u>	GA	30736			Phone no.	(206		7328	
Vlav	the IRS	discuss this	refu			own above? /s	see instructions)								No
			_			he separate i						<u> </u>		rm 990 (2	
		THE BILLIPSE	·uul	MUII MUL NUL	.~, 300 [ovparate !!	Intidation		166	A0101 11/16	Jr 10		r-U		_U 10)

orm 990 (2016)	Alliance for Gun Responsibility	47-251	2998	Page
	ement of Program Service Accomplishments		-	
	k if Schedule O contains a response or note to any line in this Part III	<u> </u>	<u> </u>	<u> </u>
	be the organization's mission			
<u>To advo</u>	cate for solutions that reduce qun violence.	 		
0 D d th a success				
-	nization undertake any significant program services during the year which were not l 990-EZ?	•	V Vaa	☐ Na
	ribe these new services on Schedule O		X Yes	∐ No
•	nization cease conducting, or make significant changes in how it conducts, any prog	ram senuces?	☐ Yes	X No
	ribe these changes on Schedule O	Tam services		
•	organization's program service accomplishments for each of its three largest progra	am services, as measured	by expense	ıs
Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and all , if any, for each program service reported.	ocations to others, the tot	al expenses	1
4 a (Code) (Expenses \$ 274,382. including grants of \$	0.)(Revenue \$		0.
	iance for Gun Responsibility advocated and informe			 _
	on the importance of gun violence prevention laws.	This included		- -
<u>a_full</u> _	legislative program and accountability program.	-		- <i>-</i>
		-		
				- <i>-</i>
		-		
4 b (Code) (Expenses \$ 4,063,012. including grants of \$	0.)(Revenue \$		0.
·	nance for Gun Responsibility worked to pass ballot			
	llows family members, law_enforcement and others			
	rearms out the hands of a person deemed to a risk		~~	
	rs for the social welfare of the community.			-
21 200				
		·		
		-		-
1 c (Code) (Expenses \$ including grants of \$) (Revenue \$		
· · · ·		 ^`		
-				
		-		
			<u>-</u>	
4 d Other progra	am services (Describe in Schedule O)			
(Expenses		Revenue \$)
	m service expenses 4 . 337 . 394	7		

TEEA0102 11/16/16

Form **990** (2016)

BAA

	1990 (2016) Alliance for Gun Responsibility 47-2512998	3		age :
Pai	tive Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3	Х	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	_6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
;	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a		X
l	Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		Х
•	Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		X
(Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
1	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11f	_	Х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		Х
1	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13_		Х
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		X
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 'Yes,' complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II		Х	

19

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.

Form 990 (2016)

7	The state of the dame and allow (solutions)		Yes	No
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23	!	x
24 8	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		X
ı	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
•	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
•	Did the organization act as an 'on behalf of issuer for bonds outstanding at any time during the year?	24d		
25	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
I	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
;	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
ı	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
•	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1 · · · · · · · · · · · · · · · · · ·	34	Х	
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
38	Note. All Form 990 filers are required to complete Schedule O	38	Х	
BA	A.	Form	990 (2016)

Form 990 (2016) Alliance for Gun Responsibility 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

Check in Contention of the Contains a response of note to any line in this Part V	· · · ·	• •	\perp
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	The State of the Control of the Cont	Yes	No
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	20022327825331731		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-	(4)		
ments, filed for the calendar year ending with or within the year covered by this return 2a 56 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	2000
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	11		21 (A) (A)
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
b If 'Yes,' has it filed a Form 990-T for this year?	3 b		
4 a 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)?	4 a		Х
b If 'Yes,' enter the name of the foreign country ▶	2 3 4	100	
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a	5 E N // (10 P)	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
c if 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a 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?	6 a	х	
b If Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b	Х	
7 Organizations that may receive deductible contributions under section 170(c).	77.78		
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?	7 a		1
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			
Form 8282?	7 c		5000000
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e	1996U	3236
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899	 		
as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7 h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring		1012/10	
organization have excess business holdings at any time during the year?	8	SCHOOLSE.	Water Wood
9 Sponsoring organizations maintaining donor advised funds.	400 ASS 22		
a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		<u> </u>
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b	CONTRACTOR	Addition to
10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12			
1 O			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			* - 4
a Gross income from members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b	202		News.
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?	13 a		
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		ji.	
c Enter the amount of reserves on hand		***	
14 a Did the organization receive any payments for indoor tanning services during the tax year?	14 a		X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b	100 (5	2045:
BAA TEEA0105 11/16/16	Form 9	90 (2	zu16)

Pai	† VI Governance, Management, and Disclosure For each 'Yes' response to a 'No' response to line 8a, 8b, or 10b below, describe the circumstances,	o lines 2 through 7b be , processes, or change	low, an s in	d for						
	Schedule O. See instructions.				[v]					
-	Check if Schedule O contains a response or note to any line in this Part VI	· · · · · · · · · · · · · · · · · · ·	<u> </u>	· · ·	· [X]					
Sec	tion A. Governing Body and Management			-	т					
1 a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O	1a	7	Yes	No					
k	Enter the number of voting members included in line 1a, above, who are independent	1 1 6	7							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relation officer, director, trustee, or key employee?	iship with any other	2		X					
3	Did the organization delegate control over management duties customarily performed by or under of officers, directors, or trustees, or key employees to a management company or other person?	the direct supervision	. 3		х					
4 Did the organization make any significant changes to its governing documents										
	since the prior Form 990 was filed?									
5	Did the organization become aware during the year of a significant diversion of the organization's	assets?	5		X					
6	Did the organization have members or stockholders?		6		Х					
7 8	Did the organization have members, stockholders, or other persons who had the power to elect or	• •								
	members of the governing body?		7 a		X					
ŀ	Are any governance decisions of the organization reserved to (or subject to approval by) member	rs,								
	stockholders, or persons other than the governing body?		7 b	_	X					
8	Did the organization contemporaneously document the meetings held or written actions undertake the following									
	The governing body?			X	<u> </u>					
ı	Each committee with authority to act on behalf of the governing body?		8 Ь	X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O		. 9		х					
Sec	tion B. Policies (This Section B requests information about policies not require	red by the Internal Rev	enue C	ode.)					
				Yes	No					
	Did the organization have local chapters, branches, or affiliates?		10 a		X					
١	olf 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and operations are consistent with the organization's exempt purposes?		10 ь							
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the f	form?								
ı	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		1							
12:	Did the organization have a written conflict of interest policy? If 'No,' go to line 13 · · · · · · · ·		12a	Χ_						
	Were officers, directors, or trustees, and key employees required to disclose annually interests the to conflicts?		12b	Х						
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If Schedule O how this was done				ļ					
13	Did the organization have a written whistleblower policy?			Х	↓					
14	Did the organization have a written document retention and destruction policy?		14	X	**************************************					
15	Did the process for determining compensation of the following persons include a review and appripersons, comparability data, and contemporaneous substantiation of the deliberation and decision	n?								
	The organization's CEO, Executive Director, or top management official				<u> </u>					
ı	Other officers or key employees of the organization		. 15 b	and the control of	X					
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).									
	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arran taxable entity during the year?		16a		X					
1	of Yes, did the organization follow a written policy or procedure requiring the organization to evaluation in joint venture arrangements under applicable federal tax law, and take steps to safe organization's exempt status with respect to such arrangements?	eguard the	. 16b							
Sec	tion C. Disclosure									
17										
18	for public inspection. Indicate how you made these available. Check all that apply				. – – –					
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest pothe public during the tax year	olicy, and financial statements avai	lable to							
20	State the name, address, and telephone number of the person who possesses the organization's	books and records.								
		WA 98111	(206)							
DA/					(2040)					

Form 990 (2016) Alliance for Gun Respo									47-25129	
Part VIII Compensation of Officers, Director Independent Contractors	ors, Tru	ste	es, I	Key	y E	mplo	ЭУ€	ees, Highest C	ompensated Er	nployees, and
Check if Schedule O contains a response or	note to an	y line	e ın t	hıs F	Part	VII .				
Section A. Officers, Directors, Trustees, Ko										<u>-</u>
1 a Complete this table for all persons required to be listed organization's tax year	d Report of	comp	ensa	ation	for	the c	aler	ndar year ending w	ith or within the	
• List all of the organization's current officers, directo compensation Enter -0- in columns (D), (E), and (F) if no	rs, trustee compensa	s (w	hethe was	er in paid	divid	duals	or o	organizations), reg	ardless of amount of	
 List all of the organization's current key employees 	, if any. Se	e in	struc	tion	s for	defin	iitio	n of 'key employee	,	
 List the organization's five current highest compens who received reportable compensation (Box 5 of Form Worganization and any related organizations 										
• List all of the organization's former officers, key em of reportable compensation from the organization and any	ployees, a	and h	ighe izatio	st co	omp	ensat	ed ·	employees who re	ceived more than \$1	00,000
 List all of the organization's former directors or truorganization, more than \$10,000 of reportable compensation. 										
List persons in the following order individual trustees or demployees, and former such persons	lirectors, ir	nstitu	tiona	al tru	ıstee	es, off	ice	rs, key employees,	highest compensate	ed
Check this box if neither the organization nor any rela	ted organı	zatio	n co	mpe	ensa	ted a	пус	current officer, direc	ctor, or trustee	
(A) Name and Title	(B) Average hours	thar	n one Ì s both	box, u an of	ot che	ck more s person and a ee)		(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	lor director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Zach Silk President	4.00	Х		Х				0.	0.	0.
(2) Leesa Manion	3.00	 		.,						
Secretary (2) Sally Clark	1 00	X	H	Х				0.	0.	0.
_(3)_Sally_ClarkDirector	_1.00	Х						0.	0.	0.
(4) Jaime Smith	1.00	x								
Director (5) Scott Wang	1.00	^			-			0.	0.	0.
Director	_ =	X						0.	0.	0.
(6) Renee Hopkins	40.00									
CEO	1 00	1	Ш	Х	Х			63,923.	0.	0.
_(7)_Steven_KesselDirector	1.00	x						0.	0.	0.
(8)								J		
(9)		\vdash	$ \cdot $							
(10)			H						-	-

(14)

(11)

(12)

(13)

Part VII Section A. Officers, Directors, Tr	<u>ustees,</u>	<u>Key</u>	En	npl	oye	es,	and	d Highest Con	pensated E	mploye	<u>es</u>
	(B)				C)						
(A)	Average hours			heck		than o		(D)	(E)		(F)
Name and title	per week	offi	cer a	nd a	person is both an a director/trustee)		ee)	Reportable compensation from	Reportable compensation from	n an	Estimated nount of other
	(list any	or a	lstr	Officer	Ş	emp	읔	the organization (W-2/1099-MISC)	related organization (W-2/1099-MISC)	ompensation from the organization
	for related	ndividual or director	υto	G.	3	yoye Test	ner				and related organizations
	organiza - tions	or director	nal t		Key employee	le ä					
	below dotted line)	stee	nstitutional trustee		l°.	Highest compensated employee	•]			
	1		<u>۳</u>			हिं					
(15)	 	1-			\vdash					-	
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(16)]										
					<u> </u>						
(17)											
(18)	 	┼	_		-	ļ				+	
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(19)		T			-		_				
(20)											
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(22)	+	-			┼─		\vdash			- -	 _
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(23)]										
		<u> </u>			<u> </u>		L				
<u>(24)</u>											
(25)	+	╁┈		\vdash	├	 	├	 -		-	
	-					ŀ					
1 b Sub-total			٠.	٠	٠.	• •	>	63,923.		0.	0.
c Total from continuation sheets to Part VII, Secti	ion A						>				
d Total (add lines 1b and 1c)							<u> </u>	63,923.		0.	0.
2 Total number of individuals (including but not limite from the organization ► 1	d to those	listed	labo	ove)	who	rece	eive	d more than \$100,0	000 of reportable	e compens	sation
from the organization 1							_			-	Yes No
3 Did the organization list any former officer, director	r or truste	e kev	/ em	nlov	/ee	or hic	shes	st compensated em	nlovee	*/**	
on line 1a? If 'Yes,' complete Schedule J for such it										3	X
4 For any individual listed on line 1a, is the sum of re	portable c	ompe	nsat	tion	and	othe	r coi	mpensation from			
the organization and related organizations greater such individual	than \$150	,0007	<i>If</i> 'Y	es,	con	rpiete	Sc · ·	chedule J for		4	X X
5 Did any person listed on line 1a receive or accrue	compensat	tion fr	om a	any	unre	elated	org	ganization or individ	, dual	***	
for services rendered to the organization? If 'Yes,'	complete S	Sched	lule .	J for	r suc	h pei	rson	7	<u></u>	<u> 5</u>	<u> </u>
Section B. Independent Contractors 1 Complete this table for your five highest compensa	ted indepe	enden	t co	ntra	ctors	that	rec	eived more than \$1	100.000 of		_
compensation from the organization Report compe	ensation fo	r the	cale	nda	r ye	ar en	ding	with or within the	organization's ta	x year	
(A) Name and business addi	229							(B) Description of		Com	(C) pensation
				N4.7		010	1 6		·		<u> </u>
Mothership Strategies 800 Cummings Center Ste 357-W Johnson Arlege Strategies PO Box 815	Olympi		_	M.F W.F		9850		Consulting and Consulting			227,052. 113,400.
NWP Consulting 105 S Main St #332		_		WA		9810		General Strate		1	230,703.
							_				·
										4.81.00	
2 Total number of independent contractors (including	but not lir	nited	to th	nose	liste	ed ab	ove	e) who received mo	re than	1	
\$100,000 of compensation from the organization	3	TEEA	7100	11/4	16/10			·			m 990 (2016)
			. 100	1 47 1	3, 10					1 01	11. 330 (2010)

Part	VI	Statement of Rev	enue					
		Check if Schedule O c	ontains a respo	nse or note to any lir	e in this Part VIII .	<u></u>		<u></u>
			and the second		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Revenue Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribution All other contributions, gifts, gr similar amounts not included a Noncash contributions included Total. Add lines 1a-1f NA	1 b 1 c 1 d 2 d in lines 1a-1f \$	762,570. 3,602,728. 52,401 Business Code	4,365,298.	0.	0.	0.
Program Service Revenue	c d e f	All other program service Total. Add lines 2a-2f	revenue					
Ь	3 4 5	Investment income (incluother similar amounts). Income from investment Royalties	ding dividends, of tax-exempt b	interest and ▶ ond proceeds ▶	0.			
	b d	Gross rents Less rental expenses Rental income or (loss) Net rental income or (loss)	S) (ı) Securities					
	b	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses						
Other Revenue	8 a	Gross income from fundr (not including. \$	aising events 0. on line 1c).	a 0.				
ਬੁੱ	9 a	Net income or (loss) from Gross income from gami See Part IV, line 19 Less direct expenses . Net income or (loss) from	n fundraising ev ng activities 	ents · · · · · · · · · · · · · · · · · · ·	0.		0.	0.
	10 a	Gross sales of inventory, and allowances Less cost of goods sold . Net income or (loss) fron	less returns	a b				
		I All other revenue						
	I	Total. Add lines 11a-11d					***************************************	

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

Sect	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX									
Do i	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	0.	0.							
2	Grants and other assistance to domestic individuals See Part IV, line 22	0.	0.							
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0.	0.							
4	Benefits paid to or for members	0.	0.							
5	Compensation of current officers, directors, trustees, and key employees	63,923.	25,569.	25,569.	12,785.					
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.					
7	Other salaries and wages	775,170.	601,149.	146,550.	27,471.					
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0.		0.						
9	Other employee benefits	61,693.	0.	61,693.	0.					
10	Payroll taxes	70,360.	49,335.	17,649.						
11	Fees for services (non-employees).		49,333.	17,049.						
• •	Management	43,768.	32,626.	11,142.	0.					
	Legal	48,551.	46,763.	1,788.	0.					
c	: Accounting	58,298.	50,624.	7,674.						
c	 Lobbying	104,220.	104,220.	0.	0.					
•	Professional fundraising services See Part IV, line 17 .	202,225.	A GO HOLE		202,225.					
	Investment management fees	0.	0.	0.	0.					
•	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)									
	Advertising and promotion	1,240,505.	1,194,579.	0.	<u>45,926.</u>					
13	Office expenses	40,921.	16,241.	24,680.	0.					
14	Information technology	33,425.	23,182.	10,243.	0.					
15	Royalties	0.	0.	0.						
16	Occupancy	51,264.	24,887.	26,377.						
17	Travel	<u>67,978.</u>	30,411.	37,567.	0.					
18	expenses for any federal, state, or local public officials	0.	0.	0.	0.					
	Conferences, conventions, and meetings	124,908.	16,816.	0.	108,092.					
20	Interest	0.	0.	0.	0.					
21	Payments to affiliates	0.	0.	0.	0.					
22	Depreciation, depletion, and amortization		1.7.							
23 24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	2,088.	127.	1,961.	0.					
í	Bank and Transaction Fees	32,187.	0.	0.	32,187.					
١	Political Contribution	30,200.	30,200.	0.	0.					
	Opinion Research	125,745.	125,745.	0.	<u> </u>					
	Signature Gathering	1,367,910.	1,367,910.	0-1	0.					
25	·	4,545,339.	3,740,384.	372,893.	432,062.					
26										
BAA	\ 	TEEA0110 11			Form 990 (2016)					

Cash = non-interest-bearing End of year End of year			Check if Schedule O contains a response or note to any line in this Part X			
2 Savings and temporary cash investments				(A) Beginning of year		(B) End of year
3 Pledges and grants receivable, net		1	Cash — non-interest-bearing	419,464.	1	219,559.
A Accounts receivable, net		2	Savings and temporary cash investments		2	
Solution Comparison Compa	l	3	Pledges and grants receivable, net	18,085.	3	4,160.
trustess, key employees, and highest compensated employees. Complete Part II of Schedule J. 6 Loans and other receivables from other disqualified persons (as defined under section 4958((1)) spream described in section 4958((1)) and contributing employers and sponsoning organizations of sections 50 (Ic)(8) voluntary employees beneficiary organizations (see instructions) Complete Part II of Schedule L. 7 Notes and loans receivable, net . 7 Notes and loans receivable, net . 8 Inventiones for sale or use . 8 Preparid expenses and deferred charges . 9 Preparid expenses and deferred charges . 9 Preparid expenses and deferred charges . 10a Land, buildings, and equipment cost or other basis Complete Part IV of Schedule D . 11 Investments – publicy traded securities . 12 Investments – program-related See Part IV, line 11 . 13 Intangible assets . 14 Intangible assets . 15 Other assets. See Part IV, line 11 . 15 Total assets. Add lines 1 through 15 (must equal line 34) . 16 Total assets. Add lines 1 through 15 (must equal line 34) . 17 Accounts payable and accrued expenses . 18 Grants payable . 19 Deferred revenue . 19 Deferred revenue . 20 Tax-exempt bond liabilities . 21 Escrow or custodial account liability. Complete Part IV of Schedule D . 22 Loans and other payable sto current and former officers, directors, trustees, key employees highest compensated employees, and disqualified persons. Complete Part II of Schedule D . 22 Loans and other payable to unrelated third parties . 23 Longanizations that follow SFAS 117 (ASC 958), check here \times and complete lines 27 through 29, and lines 33 and 34. 24 Unsecured notes and loans payable to unrelated third parties . 25 Other liabilities, and lines 13 through 25 . 26 Total liabilities. Add lines 17 through 25 . 27 Unrestricted net assets . 28 Permorantly restricted and eassets . 29 Particular deamings, endowment, accumulated income, or other funds . 30 Capatistics for trust date assets . 31 Pad-in or capital surplus, or land, building, or equipment fund . 31 Relation or		4	Accounts receivable, net		4	
Section 3450(H) Depression described in section 4550(3)(3) and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instructions) Complete Part II of Schedule L		5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis Complete Part V of Schedule D 10b 10c		6	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees'			
10 a Land, buildings, and equipment cost or other basis	2	7	Notes and loans receivable, net		7	
10 a Land, buildings, and equipment cost or other basis	se	8	Inventories for sale or use		8	_
Complete Part VI of Schedule D 10b 10c 11 1 11 1	As	9	Prepaid expenses and deferred charges		9	
11 Investments — publicly traded securities 11 12 Investments — other securities See Part IV, line 11 12 13 Investments — other securities See Part IV, line 11 13 Investments — program-related See Part IV, line 11 13 14 Intangible assets 14 15 15 15 15 15 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 437, 549 16 223, 719 17 Accounts payable and accrued expenses 33, 789 17 18 Grants payable and accrued expenses 18 19 18 19 18 19 18 19 19		10 a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			
12 Investments — other securities See Part IV, line 11 12 13 Investments — program-related See Part IV, line 11 13 14 Intangible assets 14 15 15 16 Total assets. See Part IV, line 11 15 15 16 Total assets. See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 437,549 16 223,719 17 Accounts payable and accrued expenses 33,789 17 18 Grants payable and accrued expenses 18 19 Deferred revenue 19 19 19 19 19 19 19 1	l	b	Less accumulated depreciation 10 b		10 c	
13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 437, 549 16 223,719 17 Accounts payable and accrued expenses 33,789 17 18 Grants payable and accrued expenses 33,789 17 18 Grants payable 19 Deferred revenue 19 Deferred revenue 19 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 20 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 23 24 25 Other liabilities (including federal income tax, payables to related third parties 24 25 Other liabilities including federal income tax, payables to related third parties 25 26 Total liabilities. Add lines 17 through 25 25 33, 789 26 0 0 0 0 0 0 0 0 0		11	Investments – publicly traded securities		11	
14 Intangible assets 14 15 15 15 15 15 15 15		12	Investments – other securities See Part IV, line 11		12	
15 Other assets. See Part IV, line 11 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 437, 549 16 223,719 18 Grants payable and accrued expenses 33,789 17 18 Grants payable 18 18 19 Deferred revenue 19 19 19 19 19 19 19 1		13	Investments – program-related See Part IV, line 11		13	
16		14	Intangible assets		14	
17 Accounts payable and accrued expenses. 33,789, 17 18 Grants payable. 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities. 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 24 24 25 25 26 26 27 27 27 28 27 28 28 29 28 29 29 29 29		15	Other assets. See Part IV, line 11		15	
17 Accounts payable and accrued expenses. 33,789, 17 18 Grants payable. 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities. 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 24 24 25 25 26 26 27 27 27 28 27 28 28 29 28 29 29 29 29		16	Total assets. Add lines 1 through 15 (must equal line 34)	437.549.	16	223.719.
18 Grants payable		17	Accounts payable and accrued expenses		17	22377131
20 Tax-exempt bond liabilities		18	· ·		18	
Secured mortgages and notes payable to unrelated third parties 22 23 24 25 25 26 27 27 27 27 27 27 27		19	Deferred revenue		19	
23 Secured mortgages and notes payable to unrelated third parties 24		20	Tax-exempt bond liabilities		20	
23 Secured mortgages and notes payable to unrelated third parties 24	es	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
23 Secured mortgages and notes payable to unrelated third parties 24	abilit	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
Unsecured notes and loans payable to unrelated third parties 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. 26 Total liabilities. Add lines 17 through 25. Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets. 28 Temporarily restricted net assets. 29 Permanently restricted net assets. Organizations that do not follow SFAS 117 (ASC 958), check here Danied and complete lines 30 through 34. Capital stock or trust principal, or current funds. 30 Capital stock or trust principal, or current funds. 31 Paid-in or capital surplus, or land, building, or equipment fund. 32 Retained earnings, endowment, accumulated income, or other funds. 33 Total net assets or fund balances. 403,760, 33 223,719.	7	23				
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. 26 Total liabilities. Add lines 17 through 25. Organizations that follow SFAS 117 (ASC 958), check here Xand complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets. 28 Temporarily restricted net assets. 29 Permanently restricted net assets. Organizations that do not follow SFAS 117 (ASC 958), check here And complete lines 30 through 34. 30 Capital stock or trust principal, or current funds. 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds. 33 Total net assets or fund balances. 403,760. 34 37 223,719.			· · · · · · · · · · · · · · · · · · ·			
Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets		25				
Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets		26	Total liabilities. Add lines 17 through 25	33,789.	26	0.
Temporarily restricted net assets	8		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.		**	
Total net assets or fund balances	直			403,760.		223,719.
Total net assets or fund balances	Ba				28	
Total net assets or fund balances	힏	29		A ANGERTA MARKATAN MARKATAN ANGELES AN	29	Section of the sectio
Total net assets or fund balances	or Fu					
	ţ	30			30	
	ŝ	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	Ä	32	· · · · · · · · · · · · · · · · · · ·		32	
	Ş	33		403,760.	33	223,719.
DAA			Total liabilities and net assets/fund balances	437,549.	34	223,719.

Forn	n 990 (2016) Alliance for Gun Responsibility 4	7-2512998		Page 12
På	ft XI ∰ Reconciliation of Net Assets		_	
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>	· · · · ·	
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1	4,365	,298.
2	Total expenses (must equal Part IX, column (A), line 25)	. 2	4,545	,339.
3	Revenue less expenses. Subtract line 2 from line 1	. 3	-180	,041.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4	403	,760.
5	Net unrealized gains (losses) on investments	. 5		
6	Donated services and use of facilities			
7	Investment expenses	. 7		
8	Prior period adjustments	. 8		
9	Other changes in net assets or fund balances (explain in Schedule O)	. 9		
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,			
1900	column (B)).	. 10	223	3 <u>,719.</u>
Fa	rt XII Financial Statements and Reporting			_
	Check if Schedule O contains a response or note to any line in this Part XII	· · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
			Ye	es No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed or		- XX (4)	8.63
	separate basis, consolidated basis, or both:	л а		
	Separate basis Consolidated basis Both consolidated and separate basis			2000
	b Were the organization's financial statements audited by an independent accountant?		2 b	Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate		1/20 23	* * *
	basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis		229	
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	audīt,	2 c	х
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin Audit Act and OMB Circular A-133?	gle	3 a	х
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the require	ed audit		ŀ
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3 b	
BA	A		Form 99	90 (2016)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2016

Open:to Public

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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) orga	••			
	of organization	anizations Complete Fart III.		Employer identifica	ation number
A 11	iance for Gun Resp	onsibility		47-251299	
Par	t I-A Complete if the or	rganization is exempt under sect	ion 501(c) or is a		
12.1. N. 1.1.1.	Provide a description of the or	ganization's direct and indirect political cam of 'political campaign activities')		•	
2	Political campaign activity exp	enditures (see instructions)		> \$	30 200
3	Volunteer hours for political ca	impaign activities (see instructions)			0
Par	t'I-B Complete if the or	rganization is exempt under sect	ion 501(c)(3).		<u>~</u>
1	Enter the amount of any excise	e tax incurred by the organization under sec	tion 4955	> \$	
2		e tax incurred by organization managers un			
3		ection 4955 tax, did it file Form 4720 for this			
4 a					
	If 'Yes,' describe in Part IV				les []ito
Par	t I-C Complete if the or	rganization is exempt under sect	ion 501(c) . excer	t section 501(c)(3).	
1	Enter the amount directly expe	ended by the filing organization for section 5	27 exempt function act	ivities	0.
2	Enter the amount of the filing of	organization's funds contributed to other org	anizations for section 5	27 avemnt	
3	Total exempt function expendine 17b	tures Add lines 1 and 2. Enter here and on	Form 1120-POL,	· · · · · · · · · · • \$	
4		Form 1120-POL for this year?			
5	organization made payments. amount of political contribution	nd employer identification number (EIN) of a For each organization listed, enter the amoi is received that were promptly and directly of action committee (PAC) If additional space	unt paid from the filing of lelivered to a separate	organization's funds Also political organization, suc	enter the
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization s funds If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
(1)	lliance for Gun Responsibilty Action Fund	119 1st Ave S Ste 320 Seattle WA 98104	47-1304996	30,200.	0.
(2)			-		
(3)			-		
(4)			-		
(5)					
(6)			_		

Schedule C (Form 990 or 990-EZ) 2	⁰¹⁶ Alliance fo	<u>r Gun Responsibi</u>	lity	47-251	2998 Page 2
Part II-A Complete if section 501	f the organization	n is exempt under s	ection 501(c)(3) and	d filed Form 5768 (e	election under
	· ,,	gs to an affiliated group (ar	nd list in Part IV each affili	isted aroun member's na	
		share of excess lobbying e		lated group members har	ne,
. —		ed box A and 'limited contr	·		
2 Shock 2 In the lim	ng organization check		————————		
(The term	Limits on Lobbyi n 'expenditures' mea	ng Expenditures ns amounts paid or incu	rred.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditi	ures to influence public	opinion (grass roots lobby	yıng)		
b Total lobbying expendition	ures to influence a legi	slative body (direct lobbyir	ng)		
c Total lobbying expenditi	ures (add lines 1a and	1b)			
d Other exempt purpose of	expenditures				
ւ e Total exempt purpose e	xpenditures (add lines	1c and 1d)			
f Lobbying nontaxable an both columns	mount. Enter the amou	nt from the following table	ın 		
If the amount on line 1e, co		The lobbying nontaxable			
Not over \$500,000	,, ,,	20% of the amount on line 1e		4	
Over \$500,000 but not over \$	1,000,000	\$100,000 plus 15% of the exces	ss over \$500,000		
Over \$1,000,000 but not over		\$175,000 plus 10% of the exces		464	
Over \$1,500,000 but not over		\$225,000 plus 5% of the excess			
Over \$17,000,000		\$1,000,000			
g Grassroots nontaxable a	amount (enter 25% of	line 1f)			
h Subtract line 1g from lin	e 1a If zero or less, er	nter -0			
		ter -0			
section 4911 tax for this	s year?	line 1h or line 1i, did the o	rganization file Form 472	o reporting	Yes No
(Sor	ne organizations that	⊢Year Averaging Period t t made a section 501(h) e ow. See the separate ins	lection do not have to d	complete all of the five rough 2f.)	
	Lobb	ying Expenditures During	g 4-Year Averaging Peri	od	
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
year beginning in			1		
2 a Lobbying nontaxable amount					
b Lobbying ceiling					
amount (150% of line 2a, column (e))					
c Total lobbying expenditures	- commence - commence - commence recommendation of the	The second secon	A CONTRACTOR OF THE PROPERTY AND THE PROPERTY OF THE PROPERTY	The second management of the second of the s	
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures				The state of the s	
BAA				Schedule C (For	m 990 or 990-E7) 2010

Schedule C (Form 990 or 990-EZ) 2016Alliance for Gun Responsibility 47-2512998

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

For each Voc' response on line of a through 4, below and an De 4 We detected the second	(a)	-	b)	
For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	Yes	No	Am	ount	
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:					
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c Media advertisements?			- Anna Carra Maria	144.602/194.601.40	
d Mailings to members, legislators, or the public?			-		
e Publications, or published or broadcast statements?					_
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?				-	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		-			
i Other activities?		_		-	
j Total Add lines 1c through 1		1000			
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	20000000	. WZBBBDOR.	331743	4.44.7	
b If 'Yes,' enter the amount of any tax incurred under section 4912	-		<u> </u>	(16) 4 <u>1</u> 655233	CONSTRUCTION OF STREET
c If Yes, enter the amount of any tax incurred by organization managers under section 4912		1			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		9//40//1985		20	
Partill A Complete if the organization is exempt under section 501(c)(4), section		or	77-201/00078/18/K 1/1/178/14/H	SKN778GERMEGDY)	1974/N978
section 501(c)(6).	001(0)(0	,, 0.			
				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			1	Х	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		Х
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the pri					X
Part III-B Complete if the organization is exempt under section 501(c)(4), section				01(c)	
(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR answered 'Yes.'	(b) Part	ill-A,	line 3, is	;	
1 Dues, assessments and similar amounts from members		1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
a Current year		2 a			
b Carryover from last year		2 b			
c Total		2 c			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
· · · · · · · · · · · · · · · · · · ·					
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and politic expenditure next year?	:al 	4			
5 Taxable amount of lobbying and political expenditures (see instructions)		5			
Part V Supplemental Information					
Provide the descriptions required for Part LA line 1, Part LR, line 4, Part LC, line 5, Part III A (officiated group line)	st\ Doct II A	lings	1 and		

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

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

Department of the Treasury Internal Revenue Service Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Name of the organization

Employer identification number

OMB No 1545-0047

2016

Open to Public Inspection

Alliance for Gun Responsibility 47-2512998 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. Indicate whether the organization raised funds through any of the following activities. Check all that apply X Mail solicitations Solicitation of non-government grants e Х b Internet and email solicitations Solicitation of government grants Х Phone solicitations X Special fundraising events c X In-person solicitations 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? **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 (v) Amount paid to (iii) Did fundraiser (vi) Amount paid to (i) Name and address of individual (iv) Gross receipts (ii) Activity (or retained by) fundraiser listed in have custody or control of contributions? (or retained by) or entity (fundraiser) from activity organization column (i) Newman Partners Yes No 1 Х 2,669,632 Fundraising 71,346 2,598,286. Mothership Strategies 2 Х <u>Fundrais</u>ıng 952,473 130,879 821,594. 3 5 6 7 8 9 10 3,622,105 3,419,880. 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 <u>Washington</u>

Schedule G (Form 990 or 990-EZ) 2016 Alliance for Gun Responsibility 47-2512998 Pa

Partil 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.

R			(a) Event #1 Luncheon (event type)	(b) Event #2 Shirley House Party (event type)	(c) Other events 10 (total number)	(d) Total events (add column (a) through column (c))
ポート コート	1	Gross receipts	662,434.	65,600.	113,478.	841,512.
Ē	2	Less Contributions	60,000.	6,600.	19,110.	85,710.
	3	Gross income (line 1 minus line 2)	602,434.	59,000.	94,368.	755,802.
	4	Cash prizes				
_	5	Noncash prizes				
DIRECT	6	Rent/facility costs	13,332.			13,332.
	7	Food and beverages	71,111.	6,695.	20,200.	98,006.
EXPERSES	8	Entertainment				
N S	9	Other direct expenses				
ร	10	Direct expense summary. Add lines 4 throu				111,338.
	11	Net income summary. Subtract line 10 from				644,464.
Par	till	Gaming. Complete if the organizat \$15,000 on Form 990-EZ, line 6a.	ion answered 'Yes'	on Form 990, Part I	V, line 19, or reporte	ed more than
R E V E N U E			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
Ü	1	Gross revenue				
Е	2	Cash prizes				
D X I P R E	3	Noncash prizes				
D I R E C T S	4	Rent/facility costs				
	5	Other direct expenses				_
	6	Volunteer labor	Yes %	Yes %	Yes %	
	7	Direct expense summary. Add lines 2 throu	ıgh 5 ın column (d)			
	8	Net gaming income summary Subtract line	7 from line 1, column (c	1)	<u> </u>	
	alst	er the state(s) in which the organization condine organization licensed to conduct gaming a lo,' explain.	lucts gaming activities ictivities in each of these			· Yes No
		re any of the organization's gaming licenses	revoked, suspended or t		year?	Yes No

Sche	edule G (Form 990 or 990-EZ) 2016 Alliance for Gun Responsibility 47-2512998	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?	No
13	Indicate the percentage of gaming activity conducted in	
	a The organization's facility	용
b	An outside facility	9
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records	
	Name •	
	Address •	
b	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	No
	Name •	 - ₁
	Address •	i
16	Gaming manager information	
	Name •	
	Gaming manager compensation \$	
	Description of services provided	
	Director/officer Employee Independent contractor	
17	Mandatory distributions	
а	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	_
6.95	organization's own exempt activities during the tax year \$	-
<u> </u> Kar	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2016

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Alliance for Gun	Responsibility	47-2512998
	The organization was formed in late 2014 to make towards reducing gun violence. This is being a supporting legislation as well as growing a citi	accomplished through zens movement to support
Pt VI, Line la	policies that reduce gun violence. See also the filed in late 2015.	e iks form 2014 that was
ic vi, bine id	The Form 990 is reviewed by the Executive Direct	ctor and distributed
Pt VI, Line 11b	electronically to each board member for comment Board members are asked to update their conflict	
Pt VI, Line 15b	annually.	
	Compensation for the Executive Director is set committee of the board and is based on job duti	-
Pt VI, Line 15a	salaries of other organizations.	
Pt VI, Line 19	Documents are available from the organization to	ipon request.

SCHEDULE R (Form 990)

Alliance for Gun Responsibility

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Department of the Treasury Internal Revenue Service Name of the organization

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.

► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

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2	
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OMB No 1545-0047

Open to Public Employer identification number

47-2512998

(f) Direct controlling entity (e) End-of-year assets িইনীঞ্জী Identification of Disregarded Entities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 33. (d) Total income (c)
Legal domicile (state or foreign country) (b) Primary activity (a) Name, address, and EIN (if applicable) of disregarded entity

Partill 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.

							1
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Sec 512(b)(13) controlled entity?	ري م
						Yes	8
(1) Alliance for Gun Responsibility Foundation PO Box 21712	a <u>tion</u> ————— Research and education to reduce gun violence ———————————————————————————————————	YA WA	501c3		N/A		I
(2)							
						-	
							1
			ļ				

Schedule R (Form 990) 2016

TEEA5001 09/09/16

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

47-2512998

Parilia Identification of Related Organizations Taxable as a Partnership Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	Pred (relal excl	ļ	Share of total sincome er	(g) Share of end-of-year assets	(h) Disproportionate allocations?	Code V-UBI amount in box 20 of Schedule K-1 (Form	General or managing partner?	Percentage ownership
		country)		512-514)				Yes No	1065)	Yes No	
						.,		_			
1 1 1 1 1 1 1 1 1 1 1											
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1											
(2)						:					
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					<u>-</u> -						
(3)											
								<u>. </u>			
Partive Identification o	Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.	izations re related	Taxable as I organizatio	a Corporations treated as	on or Trust (a corporatio	Complete if the n or trust durir	organizations of the tax ye	n answere ar.	ed 'Yes' on For	m 990, Paı	1 I √.
(a) Name, address, and EIN of related organization	of related organization		(b) Primary activity (Legal domicile (state or foreign	(d) Direct controlling	Type of entity (C corp, S corp,	y Share of total income		(g) Share of end-of- year assets	(h) Percentage ownership	(i) Sec 512(b)(13) controlled entity?
				country)	eriniy	or itust)					Yes No
(1)											
		<u> </u>									
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Page 3

Schedule R (Form 990) 2016 Alliance for Gun Responsibility	9667
Reactive Transactions With Related Organizations. Complete if the organization answered 'Yes' on Form 990, Part IV, line 34, 35b, or 36.	
II, III, or IV of this schedule	
	4

			N - 22
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule	<u> </u>		20
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 or	listed in Parts II-IV		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			ж
b Gift, grant, or capital contribution to related organization(s)			1b X
c Gift grant, or capital contribution from related organization(s)			. 1c ×
-			>
d Loans or loan guarantees to of for related organization(s)			
e Loans or loan guarantees by related organization(s)			. 1e ×
f Dividends from related organization(s)			1f X
a Sale of assets to related organization(s)			. 1g
Durchage of accete from related organization(s)			
i Exchange of assets with related organization(s)			- X
j Lease of facilities, equipment, or other assets to related organization(s)			. 1j X
k Lease of facilities, equipment, or other assets from related organization(s)			. 1k
Performance of services or membership or fundraising solicitations for related organization(s)			=
			- T
The control of the co			>
			\ ;
o Sharing of paid employees with related organization(s)			X 01 .
p Reimbursement paid to related organization(s) for expenses			. 1p ×
g Reimbursement paid by related organization(s) for expenses			. 1q ×
r Other transfer of cash or property to related organization(s)			. 1r
Other transfer of each or properly from related organization(c)			× ×
۱ ۵		1 - 1 - 1 - 1 - 1	
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 trresholds.	ered relationships and tra	saction thresholds.	
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) Alliance for Gun Responsibility Foundation	Staff payroll/payroll taxes	179,333.	MV based on staff hour tracking
(2) blliance for Gun Responsibility Foundation	Staff Medical Insurance	7,639.	PW based on percentage of payroll
		1	
(3) Alliance for Gun Responsibility Foundation	Office Space Rent	12,073.	FMV
(4) Alliance for Gun Responsibility Foundation	 Dffice Supply/Equipment	21,102.	FMV
(5)			
(9)			
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47-2512998

Schedule R (Form 990) 2016 Alliance for Gun Responsibility

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

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

revenue) that was not a related organization, see instructions regaining exclusion to certain investment partitionally	zation see instruc	noris regalanığ excia	SIOTI TOT CELLANT ITIN	אמסייוניי ד		3						
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unre-	(e) Are all partners section 501(c)(3)	ners ((f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	Code V-UBI amount in box 20 of Schedule	(j) General or managing partner?		(k) Percentage ownership
		,		organizatio	Suc.				K-1 (Form 1065)			
			sections 512-514)	Yes	Š			Yes No		Yes	N _o	
(1)										_		
				_		_						
								_				
(2)												
					 -					_		
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(3)										_		
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Part VII Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

The Alliance for Gun Responsibility acted as the payroll provider for both the Alliance for Gun Responsibility and the the Alliance for Gun

both the Alliance for Gun Responsibility and the the Alliance for Gun Responsibility Foundation. The remainder of of the payroll costs as shown on the Alliance for Gun Responsibility w3 will be recorded on the Alliance for Gun Responsibility Foundation 990.