EXTENDED TO NOVEMBER 15, 2018

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

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Δ	01 111	and e	nung					
В	Check if applicab	C Name of organization		D Employer identifi	cation number			
	Addre							
	Name chang	e Doing business as		27-3	069592			
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	r			
	Final return	1625 K CUDEEN NW //	00		761-4385			
	termir	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	7,402,840.			
	Amen return			H(a) Is this a group re				
F	Application			for subordinates? Yes X No				
	pendi	SAME AS C ABOVE		H(b) Are all subordinates in	·····= =			
T -	Гах-ех	empt status: $X = 501(c)(3) = 501(c)(3)$ (insert no.) 4947(a)(1) or	527	1	list. (see instructions)			
		te: WWW.50CAN.ORG		H(c) Group exemption				
		organization: X Corporation Trust Association Other	L Year		A State of legal domicile; CT			
	art I	Summary	1 =		otato or togal dominoro,			
	1	Briefly describe the organization's mission or most significant activities: SEE S	CHEDU	LE O				
Se	'	phony decorbe the organization of modern distinction decimation.						
nar	2	Check this box if the organization discontinued its operations or dispose	d of more	than 25% of its net ass	sets.			
Ver	3			3	8			
င္ပ	4	Number of independent voting members of the governing body (Part VI, line 1b)			7			
م س	5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)			73			
iţi	6	Total number of volunteers (estimate if necessary)			7			
Activities & Governance	1	Total unrelated business revenue from Part VIII, column (C), line 12			0.			
Ă		Net unrelated business taxable income from Form 990-T, line 34			0.			
				Prior Year	Current Year			
	8	Contributions and grants (Part VIII, line 1h)		10,121,237.	7,298,903.			
Jue	9	Program service revenue (Part VIII, line 2g)		2,375.	103,113.			
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		16.	11.			
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		4,168.	813.			
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		10,127,796.	7,402,840.			
_	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		146,610.	318,811.			
	14	D 51 111 5 1 (D 1 N 1 (A) 1 A)		0.	0.			
	45	Salaries, other compensation, employee benefits (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		5,622,507.	5,680,259.			
ses	162	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.			
Expenses	h	Total fundraising expenses (Part IX, column (D), line 25) 752,76	5.	<u> </u>	, and the second			
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,471,897.	3,047,667.			
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		8,241,014.	9,046,737.			
	19	Revenue less expenses. Subtract line 18 from line 12		1,886,782.	-1,643,897.			
	15	Trevenue 1633 expenses. Subtract line 16 from line 12		ginning of Current Year	End of Year			
Net Assets or	20	Total assets (Part X, line 16)	50	4,629,629.	3,089,112.			
ASS	21	Total liabilities (Part X, line 16)		187,466.	311,787.			
let /	22	Net assets or fund balances. Subtract line 21 from line 20		4,442,163.	2,777,325.			
Pa	art II	Signature Block		1/112/1001	2/11/1/525			
		lities of perjury, I declare that I have examined this return, including accompanying schedules a	and stateme	ents, and to the best of my	knowledge and helief it is			
		et, and complete. Declaration of preparer (other than officer) is based on all information of which			into widago ana bonon, it io			
truo	, 00110	s, and complete. Boolaration of proparor (other than officer) to bacca on an information of white	στι ρτορατοι	nas any knowledge.				
Sig	n	Signature of officer		Date				
Her		MARC MAGEE, CEO & BOARD MEMBER						
1101	C	Type or print name and title						
		Print/Type preparer's name Preparer's signature		Date Check C	PTIN			
Paid	i	GARRETT M. HIGGINS GARRETT M. HIGGI		7/13/18 if self-employ				
	arer	Firm's name PKF O'CONNOR DAVIES, LLP	-12 0	Firm's EIN	27-1728945			
	Only	• • • • • • • • • • • • • • • • • • • •	AST	I IIIII 2 EIIV	<u> </u>			
J36	Omy	STAMFORD, CT 06905	-D 1	Phone no 20	3-323-2400			
Max	the "	RS discuss this return with the preparer shown above? (see instructions)		FIIOHE 110. 2 0	X Yes No			
ivid	v uite li	10 GIOCUSS LINS TELUTI WILL LIE DIEDATEL SHOWIT ADOVE! (SEE HISLIUCIOIS)			44 155 NO			

7.001.034.

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Total program service expenses

50CAN INC 27-3069592 Page 3 Part IV | Checklist of Required Schedules Yes No 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? Х If "Yes," complete Schedule A 2 Х Is the organization required to complete Schedule B, Schedule of Contributors? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for X 3 public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect Х during the tax year? If "Yes," complete Schedule C, Part II 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or X 5 similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to Х provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete X 8 Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? X If "Yes." complete Schedule D. Part IV 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent Х endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Х 11a Part VI b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c 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 Х 11d Part X, line 16? If "Yes," complete Schedule D, Part IX Х 11e e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses Х the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes." complete Schedule D. Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete Х 12a Schedule D. Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? X 12b If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13

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14a

14b

15

16

17

18

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14a Did the organization maintain an office, employees, or agents outside of the United States?

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

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

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

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

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

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

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I

1c and 8a? If "Yes," complete Schedule G, Part II

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines

complete Schedule G. Part III

X

X

X

Х

X

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Form 990 (2017) 50 CAN, INC. Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a				
	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
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5, 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		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а		28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
·	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	23		
30		30		x
31	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations?	30		
31		31		x
20	If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		1
32	,	32		x
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33		33		x
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	34	Х	
25.0	Part V, line 1	35a	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Λ	
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	051	Х	
20	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Λ	<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		v	
~~	If "Yes," complete Schedule R, Part V, line 2	36	X	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			_ v
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	00	Х	
	Note. All Form 990 filers are required to complete Schedule O	38		(2017)

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Form 990 (2017)

50CAN, INC.

Part V	St	atements Regard	ling Other	r IRS Filings and	Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			Ш
	1 1		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
_	(gambling) winnings to prize winners?	1c		
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 73			
	, , , , , , , , , , , , , , , , , , , ,	Ol	Х	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Λ	
20	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	3a		Х
	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		<u> </u>
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	30		
-14	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:	16		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	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).			
а	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
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		\vdash
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		v
	to file Form 8282?	7c		X
d	, , , , , , , , , , , , , , , , , , , ,	7e		Х
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
9 h	If the organization received a contribution of qualified intellectual property, and the organization file a Form 1098-C?	79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7.11		
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
40-	amounts due or received from them.)	40-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13 a	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	Note. See the instructions for additional information the organization must report on Schedule O.	ıJa		
h	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b		
		Form	990	(2017)

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

_	Check if Schedule O contains a response or note to any line in this Part VI					X					
Sec	tion A. Governing Body and Management										
		ı	1	_	Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		켈							
	If there are material differences in voting rights among members of the governing body, or if the governing										
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			_							
b	Enter the number of voting members included in line 1a, above, who are independent	1 b		4							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	any other								
	officer, director, trustee, or key employee?			2		X					
3	Did the organization delegate control over management duties customarily performed by or under the										
	of officers, directors, or trustees, or key employees to a management company or other person?			3		<u> X</u>					
4	Did the organization make any significant changes to its governing documents since the prior Form 9			4		X					
5											
6	Did the organization have members or stockholders?			6		X					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point (one or								
	more members of the governing body?			7a		X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	ockho	lders, or								
	persons other than the governing body?			7b		X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	r by the	e following:								
а	The governing body?			8a	X						
b	Each committee with authority to act on behalf of the governing body?			8b		X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ched a	t the								
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)								
			,		Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?			10a	X						
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters	, affiliates,								
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	X	<u> </u>					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	befor	e filing the form?	11a	X						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.										
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	X						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," de	escribe								
	in Schedule O how this was done			12c	Х						
13	Did the organization have a written whistleblower policy?			13	X						
14	Did the organization have a written document retention and destruction policy?			14	X						
15	Did the process for determining compensation of the following persons include a review and approva	l by ind	dependent								
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?										
а	The organization's CEO, Executive Director, or top management official			15a	Х						
	Other officers or key employees of the organization			15b	X						
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	nent w	ith a								
	taxable entity during the year?			16a		X					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat	e its p	articipation								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	ization	i's								
	exempt status with respect to such arrangements?			16b							
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed ▶SEE SCHEDULE	0									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T		on 501(c)(3)s only)	availabl	е						
	for public inspection. Indicate how you made these available. Check all that apply.										
	Own website X Another's website X Upon request Other (explain	in Sch	nedule O)								
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, con		•	d financ	ial						
	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 boo	ks and	d records:								
	CHRIS TESSONE - 301-761-4385										
	1625 K STREET NW NO. 400 WASHINGTON DC 20006										

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

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

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

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

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

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

(A)	(B)	(C) Position (do not check more than one						(D)	(E)	(F)
Name and Title	Average hours per week	box	not cl	heck i ss per	more son is		an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MISC)	
(1) SANDY VARGAS	2.00								_	
BOARD CHAIR	45.00	Х		X		_		0.	0.	0.
(2) MARC MAGEE	45.00							0.4.6 0.1.4	•	15 250
CEO & BOARD MEMBER	5.00	Х		X		_		246,914.	0.	15,370.
(3) ANN BOROWIEC	1.00	.,							•	0
BOARD MEMBER	1.00	Х				_		0.	0.	0.
(4) ROLAND MARTIN BOARD MEMBER	1.00	.						0.	0.	0.
(5) MICHAEL PHILLIPS	1.00	Х						0.	0.	U •
BOARD MEMBER	1.00	Х						0.	0.	0.
(6) JONATHAN SACKLER	1.00	<u> </u>							0.	<u></u>
BOARD MEMBER	1.00	х						0.	0.	0.
(7) DACIA TOLL	1.00	23						•	•	•
BOARD MEMBER		х						0.	0.	0.
(8) DAVID WICK	1.00									
BOARD MEMBER		Х						0.	0.	0.
(9) VALLAY-LATH VARRO	45.00									
PRESIDENT	5.00			Х				209,141.	0.	23,795.
(10) DERRELL BRADFORD	50.00									
EXECUTIVE VICE PRESIDENT				Х				163,550.	0.	7,709.
(11) CHRIS TESSONE	45.00									
CFO AND SECRETARY	5.00			Х				146,806.	0.	30,797.
(12) MICHELLE JOHNSON	50.00									
CHIEF ADVISOR						X		180,000.	0.	12,031.
(13) BRADFORD SWANN	50.00									
ED SOUTHCAROLINACAN						X		153,874.	0.	21,258.
(14) REBECCA GREENBERG-ELLIS	50.00	1								
SVP OF GROWTH						X		151,281.	0.	20,588.
(15) JONATHAN CETEL	50.00					l		150 000		4= 400
ED PENNCAN	F0 00					X		150,089.	0.	15,108.
(16) BRENT EASLEY	50.00	$\frac{1}{2}$,,		120 070		00 050
ED TENNESSECAN						Х		139,072.	0.	22,958.
		$\frac{1}{2}$								
	1	1								<u> </u>

50CAN, Page 8 27-3069592 INC.

I alt VI	Section A. Officers, Directors, Trus	tees, Key Emp	юу	ees,	anc	HI	gnes	τC	ompensated Employee	s (continued)			
	(A)	(B)			(0	C)			(D)	(E)		(F)	
	Name and title	Average	(do		Pos		1 ∶than d	ne.	Reportable	Reportable		Estima	ted
		hours per	box	, unles	ss per	rson i	is both	an	compensation	compensation		amoun	t of
		week	_	cer an	d a di	irecto	or/trus	ee)	from	from related		othe	
		(list any	recto						the	organizations	_	compens	
		hours for related	or di	ee			sated		organization	(W-2/1099-MISC	"	from t	
		organizations	ustee	trust		e e	ubeus		(W-2/1099-MISC)			organiza and rela	
		below	dual tr	tional		yoldı	st con	_				organiza	
		line)	ndividual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				o.gaa	
			_	_		_	- <u>-</u>				一		
											一		
							_				\dashv		
						_	_				\dashv		
						_	_				\dashv		
								_	1 540 727		0.	169,6	511
	b-total								1,540,727.		0.	109,0	0.
	tal from continuation sheets to Part VII								1,540,727.		0.	169,6	
	tal (add lines 1b and 1c) al number of individuals (including but no							<u> </u>			<u> </u>	109,0	714.
	npensation from the organization	of illflifted to the	ose	IISLE	u au	ove	<i>t)</i> WII	o re	ceived more than \$100,	ooo or reportable			16
	inpensation from the organization											Yes	
3 Did	I the organization list any former officer,	director or tru	istee	ke	v en	nnlo	WEE	or l	nighest compensated en	nnlovee on			
	e 1a? If "Yes," complete Schedule J for st	•			•	•	•		•		ľ	3	Х
	rany individual listed on line 1a, is the su												
	d related organizations greater than \$150	•		•					•	•	ľ	4 X	
	I any person listed on line 1a receive or a	,		,							···		
ren	dered to the organization? If "Yes." com	nlete Schedule	e J fo	or su	ıch r	oers	on .				[5	Х
	B. Independent Contractors												
1 Co	mplete this table for your five highest cor	mpensated ind	ере	nder	nt cc	ontra	actor	s th	nat received more than \$	100,000 of compe	nsat	ion from	
the	organization. Report compensation for t	he calendar ye	ar e	ndin	ıg w	ith c	or wi	hin	the organization's tax y	ear.			
	(A)								(B)			(C)	
	Name and business								Description of s	ervices	C	ompensati	on
	E9DESIGN, 4-4525 RUE	ST., MO	NT.	RE.	AL	,							
QUEBE					(GRAPHIC DESIG	GN		360,4	<u> 102.</u>			
	ON, DUNN & CRUTCHER,												
	2.0. BOX 840723, LOS ANGELES, CA 90084								LEGAL SERVIC	∃S		256,4	119.
	N SMITH, 5302 WESTMIN	STER PL	AC	Ľ,				- 1	NEW CHARTER			142	- 4 ^
LTT.I.S	BBURGH, PA 15232							_	CONSULTING			143,6	049.
								\dashv					

Form **990** (2017)

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

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		Chack if Schodula O contain	ne a roenoneo	or note to any li	no in this Dart VIII			
		Check if Schedule O contai	ns a response	or note to any m	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributio All other contributions, gifts, grants similar amounts not included above Noncash contributions included in lines 1a Total. Add lines 1a-1f	1b 1c 1d ns) 1e , and 1f 6 ,	354,463. 944,440. 134,466. Business Code	7,298,903.			
Program Service Revenue	2 a b c d			900099	103,113.	103,113.		
_		All other program service revenue			103,113.			
	3	Investment income (including diother similar amounts)	ividends, intere	est, and	11.			11.
	b	Gross rents Less: rental expenses Rental income or (loss)	(i) Real	(ii) Personal				
	7 a	Net rental income or (loss) Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses	(i) Securities	(ii) Other	_			
		Gain or (loss)		•				
Other Revenue	8 a	Net gain or (loss) Gross income from fundraising including \$ contributions reported on line 1 Part IV, line 18	events (not of c). See					
Oth	с 9 а	Less: direct expenses	aising events vities. Seea	>				
	С	Less: direct expenses Net income or (loss) from gamin Gross sales of inventory, less re and allowances	ng activities eturns					
		Less: cost of goods sold Net income or (loss) from sales	of inventory	_				
}		Miscellaneous Revenue		Business Code				813.
	11 a b c			900099	813.			013.
		All other revenue						
		Total. Add lines 11a-11d		>	813.			
	12	Total revenue. See instructions.		>	7,402,840.	103,113.	0.	824.

Form 990 (2017) 50 CAN, INC. Part IX Statement of Functional Expenses

<u>Secti</u>	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									
	·	(A)		(C)	(D)					
7b,	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	(C) Management and general expenses	Fundraising expenses					
1	Grants and other assistance to domestic organizations									
	and domestic governments. See Part IV, line 21	30,156.	30,156.							
2	Grants and other assistance to domestic									
	individuals. See Part IV, line 22	288,655.	288,655.							
3	Grants and other assistance to foreign									
	organizations, foreign governments, and foreign									
	individuals. See Part IV, lines 15 and 16									
4	Benefits paid to or for members									
5	Compensation of current officers, directors,									
	trustees, and key employees	844,080.	653,337.	92,344.	98,399.					
6	Compensation not included above, to disqualified									
	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)									
7	Other salaries and wages	3,914,289.	3,029,747.	428,230.	456,312.					
8	Pension plan accruals and contributions (include									
	section 401(k) and 403(b) employer contributions)	118,991. 414,360.	92,102.	13,018.	13,871. 48,305.					
9	Other employee benefits	414,360.	92,102. 320,723.	45,332.	48,305.					
10	Payroll taxes	388,539.	300,738.	42,507.	45,294.					
11	Fees for services (non-employees):				<u> </u>					
а	Management									
b	Legal	426,721.	362,810.	63,911.						
С	Accounting	30,805.	9,685.	21,120.						
d	Lobbying	157,518.	157,518.							
е	Professional fundraising services. See Part IV, line 17									
f	Investment management fees									
g	Other. (If line 11g amount exceeds 10% of line 25,									
-	column (A) amount, list line 11g expenses on Sch O.)	798,212.	711,733.	33,480.	52,999.					
12	Advertising and promotion	151,533.	151,158.	375.						
13	Office expenses	138,160.	72,850.	63,519.	1,791.					
14	Information technology	355,237.	211,714.	143,523.						
15	Royalties									
16	Occupancy	287,041.	33,800.	253,241.						
17	Travel	496,126.	434,184.	27,448.	34,494.					
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings	144,121.	135,407.	7,414.	1,300.					
20	Interest									
21	Payments to affiliates									
22	Depreciation, depletion, and amortization	31,732.		31,732.						
23	Insurance	30,461.	4,717.	25,744.						
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 0.)									
а										
b										
С										
d										
е	All other expenses									
25	Total functional expenses. Add lines 1 through 24e	9,046,737.	7,001,034.	1,292,938.	752,765.					
26	Joint costs . Complete this line only if the organization									
	reported in column (B) joint costs from a combined									
	educational campaign and fundraising solicitation.									
	Check here if following SOP 98-2 (ASC 958-720)				5 000 (0047)					

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Form 990 (2017)

Part X | Balance Shee 50CAN, INC.

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or not	e to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,508,325.	1	1,389,398.
	2	Savings and temporary cash investments			51,155.	2	184,681.
	3	Pledges and grants receivable, net			2,882,525.	3	1,333,970.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and fo					
		trustees, key employees, and highest compensa		· · · · · · · · · · · · · · · · · · ·			
		Part II of Schedule L		5			
	6	Loans and other receivables from other disqualit					
		section 4958(f)(1)), persons described in section	•	,			
			employers and sponsoring organizations of section 501(c)(9) voluntary				
(0		employees' beneficiary organizations (see instr).				6	
Assets	7	Notes and loans receivable, net				7	
As	8	Inventories for sale or use		8	20,916.		
	9	5	72,499.	9	20,916. 45,545.		
		Land, buildings, and equipment: cost or other			•		,
		basis. Complete Part VI of Schedule D	10a	205,406.			
	b	Less: accumulated depreciation		205,406. 114,188.	90,051.	10c	91,218.
	11	Investments - publicly traded securities		1,990.	11	•	
	12	Investments - other securities. See Part IV, line 1		•	12		
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets		I		14	
	15	Other assets. See Part IV, line 11	23,084.	15	23,384.		
	16	Total assets. Add lines 1 through 15 (must equ			4,629,629.	16	3,089,112.
	17	Accounts payable and accrued expenses			177,466.	17	288,493.
	18	Grants payable	10,000.	18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete I				21	
က္ဆ	22	Loans and other payables to current and former	officers	, directors, trustees,			
ij		key employees, highest compensated employee	s, and c	lisqualified persons.			
Liabilities		Complete Part II of Schedule L				22	
=	23	Secured mortgages and notes payable to unrela		I		23	23,294.
	24	Unsecured notes and loans payable to unrelated	d third p	arties		24	
	25	Other liabilities (including federal income tax, pa	yables t	o related third			
		parties, and other liabilities not included on lines	17-24).	Complete Part X of			
		Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			187,466.	26	311,787.
		Organizations that follow SFAS 117 (ASC 958), check	here LX and			
es		complete lines 27 through 29, and lines 33 an	d 34.				1 005 000
JE C	27	Unrestricted net assets			2,262,059.	27	1,295,298.
3ak	28	Temporarily restricted net assets		2,180,104.	28	1,482,027.	
둳	29					29	
표		Organizations that do not follow SFAS 117 (A	SC 958)	, check here			
٥	1.	and complete lines 30 through 34.		<u> </u>			
ets	30	Capital stock or trust principal, or current funds				30	
Ass	31	Paid-in or capital surplus, or land, building, or ed				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	come, o	r other funds	4 440 160	32	0 777 205
Z	33				4,442,163.	33	2,777,325.
	34	Total liabilities and net assets/fund balances			4,629,629.	34	3,089,112.

Form	990 (2017) 50CAN, INC.	27	-3069592	Pa	ge 12				
Pa	rt XI Reconciliation of Net Assets								
	Check if Schedule O contains a response or note to any line in this Part XI				X				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	7,402	2,8	<u>40.</u>				
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,046	7	37.				
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,643	8,8	97.				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))								
5	Net unrealized gains (losses) on investments	5							
6	Donated services and use of facilities	6							
7	Investment expenses	7							
8	Prior period adjustments	8							
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-20	, 9	<u>41.</u>				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,								
	column (B))	10	2,777	, 3	<u> 25.</u>				
Pa	rt XII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII				X				
				Yes	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	Ο.							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X				
	If "Yes," 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:								
	Separate basis Consolidated basis Both consolidated and separate basis								
b	Were the organization's financial statements audited by an independent accountant?		2b	X					
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,							
	consolidated basis, or both:								
	X Separate basis Consolidated basis Both consolidated and separate basis								
С	If "Yes" 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?		2c		X				
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche								
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Au	dit						
	Act and OMB Circular A-133?		3a		X				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed aud	dit						
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b						

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.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2017

Open to Public Inspection

Employer identification number Name of the organization 50CAN INC 27-3069592 Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 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.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 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. the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other n your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions)) **Total**

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Gifts, grants, contributions, and			• •			
	membership fees received. (Do not						
	include any "unusual grants.")	5563288.	5379020.	6668457.	10121237.	7298903.	35030905.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	5563288.	5379020.	6668457.	10121237.	7298903.	35030905.
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)						13260415.
	Public support. Subtract line 5 from line 4.						21770490.
	ction B. Total Support					Γ	
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total 35030905.
	Amounts from line 4	5563288.	5379020.	6668457.	10121237.	7298903.	35030905.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	226	0.63	419.	1.6	11	1 645
	and income from similar sources	336.	863.	419.	16.	11.	1,645.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital				4,168.	813.	1 001
	assets (Explain in Part VI.)				4,100.		4,981. 35037531.
11	Total support. Add lines 7 through 10	-1- / !11					166,191.
12	Gross receipts from related activities,	•	,			12	100,191.
13	First five years. If the Form 990 is for organization, check this box and stop				•		ightharpoonup
Sec	ction C. Computation of Public						
	Public support percentage for 2017 (li		<u>-</u>	olumn (f))		14	62.13 %
15	Public support percentage from 2016					15	55.95 %
	33 1/3% support test - 2017. If the co						
	stop here. The organization qualifies						
b	33 1/3% support test - 2016. If the c						
	and stop here. The organization quali						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fact						
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances test						
	more, and if the organization meets th	ne "facts-and-circui	mstances" test, ch	eck this box and	stop here. Explain	n in Part VI how the	•
	organization meets the "facts-and-circ						>
18	Private foundation. If the organization						· >

Schedule A (Form 990 or 990-EZ) 2017

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support	<u>, </u>					
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 5					1	
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
ľ	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						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
		() 2242	420044	/) 0045	(1) 0040	() 0047	(n =
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 6 Gross income from interest,						
IUa	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
(Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
13	assets (Explain in Part VI.)		İ			1	
	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth to	ax year as a sectio	n 501(c)(3) organiz	ation,
		· ·			•		
Se	ction C. Computation of Publi						
15	Public support percentage for 2017 (li	ne 8, column (f) di	ivided by line 13, c	olumn (f))		15	%
16	Public support percentage from 2016	Schedule A, Part	III, line 15			16	%
	ction D. Computation of Inves						
	Investment income percentage for 20					17	%
18	Investment income percentage from 2	2016 Schedule A,	Part III, line 17			18	%
198	33 1/3% support tests - 2017. If the						7 is not
	more than 33 1/3%, check this box ar						
k	33 1/3% support tests - 2016. If the						
	line 18 is not more than 33 1/3%, che						
20	Drivate foundation If the organization	n did not chack a	nov on line $1/1$ 10	a or lun check ti	nie hav and een ind	etructione	

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **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.
- 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.
- **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.*
- **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.
- 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.
- 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).
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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).
- 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.
- **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.**
- 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.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **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.)

	Yes	No
1		
2		
20		
3a		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9с		
10a		
10b		

Pai	TIV Supporting Organizations _(continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		1
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
0	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	_		
Sec	the supported organization(s). tion D. All Type III Supporting Organizations	1		
000	tion 5.7th Type in Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		163	140
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	-		
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instr	uctions)		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	O.L.		
2	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
	of its supported organizations? If IVos II describe in Part VI the relevant but the experiencies in this report	3h		

Pai	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on N	lov. 20, 1970 (explain in F	Part VI.) See instructions. Al
	other Type III non-functionally integrated supporting organizations must c	omplete Sec	tions A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ally integrated	d Type III supporting orga	anization (see
	instructions).	-		

Schedule A (Form 990 or 990-EZ) 2017

Par	TIV Type III Non-Functionally integrated 50	9(a)(3) Supporting Orga	nizations (continued)	
Secti	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish ex	kempt purposes		
2	Amounts paid to perform activity that directly furthers exen			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpo			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2017 from Section C, line 6			
	Line 8 amount divided by line 9 amount			
		(i)	(ii)	(iii)
Secti	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2017	Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017			
а				
b	From 2013			
С	From 2014			
d	From 2015			
е	From 2016			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			
i	Carryover from 2012 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	France from 0047			

Schedule A (Form 990 or 990-EZ) 2017

	line Sed	1; Part	t IV, Sect	ion D, Iir	nes 2 and 3	3; Part I	V, Section E, lines 1c, 2	a, 2b, 3a	i, and 3b; Pa	Section B, lines 1 and 2; Part IV, Section C, art V, line 1; Part V, Section B, line 1e; Part V, art for any additional information.
CHEL	ULE	Α,	PART	II,	LINE	10,	EXPLANATION	FOR	OTHER	INCOME:
usc.	RE	VENU	ΙE							
016	AMO	UNT:	\$	4,1	58.					
017	AMO	UNT:	\$	813	•					

50CAN, INC. 27-3069592

Schedule A

Identification of Excess Contributions Included on Part II, Line 5

2017

** Do Not File **

*** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions
WALTON FAMILY FOUNDATION	13,112,962.	12,412,211.
BILL AND MELINDA GATES FOUNDATION	899,706.	198,955.
BOUNCER FOUNDATION	1,350,000.	649,249.
Total Excess Contributions to Schedule A, Part II, Line 5		13,260,415.

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

Open to Public

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

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.

Tax) (see separate instructions), then	, , ,	y Tax) (See Separate		LZ, Fait V, iiie 350 (Floxy
 Section 501(c)(4), (5), or (6) organizat Name of organization 50CAN, 	INC.			oloyer identification number 27 – 3069592
Part I-A Complete if the org	anization is exempt unde	er section 501(c)	or is a section 527 or	ganization.
 Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai 	ures			\$
Part I-B Complete if the org	anization is exempt unde	er section 501(c)	(3).	
1 Enter the amount of any excise tax 2 Enter the amount of any excise tax 3 If the organization incurred a section 4a Was a correction made? b If "Yes," describe in Part IV. Part I-C Complete if the org 1 Enter the amount directly expended 2 Enter the amount of the filing organ exempt function activities 3 Total exempt function expenditures	incurred by organization manage in 4955 tax, did it file Form 4720 manization is exempt under by the filing organization for sec ization's funds contributed to oth	ers under section 4955 for this year? er section 501(c), ction 527 exempt func- ner organizations for s	ection 527	Yes No No No S)(3).
 line 17b Did the filing organization file Form Enter the names, addresses and en made payments. For each organizar contributions received that were propolitical action committee (PAC). If a contribution or the committee or the contribution /li>	1120-POL for this year? pployer identification number (EINtion listed, enter the amount paid omptly and directly delivered to a	N) of all section 527 po I from the filing organi a separate political org	olitical organizations to whic zation's funds. Also enter th anization, such as a separa	Yes No th the filing organization are amount of political
(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

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

Schedule C (Form 990 or 990-EZ) 2017

LHA

732041 11-09-17

Schedule C (Form 990 or 990-EZ) 2017 50 CAN	, INC.	27-3	069592 Page 2				
Part II-A Complete if the organization	on is exempt under section 501(c)(3) and file						
section 501(h)).							
A Check ▶ ☐ if the filing organization belon	gs to an affiliated group (and list in Part IV each affiliated	group member's name	e, address, EIN,				
expenses, and share of excess	ss lobbying expenditures).						
B Check ▶ if the filing organization check	ked box A and "limited control" provisions apply.	1					
	bying Expenditures neans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals				
1a Total lobbying expenditures to influence pub	lic opinion (grass roots lobbying)	6,150.					
b Total lobbying expenditures to influence a le	gislative body (direct lobbying)	195,380.					
c Total lobbying expenditures (add lines 1a an	d 1b)	201,530.					
d Other exempt purpose expenditures		8,092,442.					
e Total exempt purpose expenditures (add line	es 1c and 1d)	8,293,972.					
f Lobbying nontaxable amount. Enter the amo	ount from the following table in both columns.	564,699.					
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:						
Not over \$500,000	20% of the amount on line 1e.						
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.						
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.						
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.						
Over \$17,000,000	\$1,000,000.						
g Grassroots nontaxable amount (enter 25% o	f line 1f)	141,175.					
h Subtract line 1g from line 1a. If zero or less,	enter -0-	0.					
i Subtract line 1f from line 1c. If zero or less, e	enter -0-	0.					
j If there is an amount other than zero on eithe							
			Yes No				
4-Year Averaging Period Under section 501(h) (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.)							
Lob	bying Expenditures During 4-Year Averaging Period						

Lobbying Expenditures During 4-Year Averaging Period									
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total				
2a Lobbying nontaxable amount	403,239.	476,145.	524,399.	564,699.	1,968,482.				
b Lobbying ceiling amount (150% of line 2a, column(e))					2,952,723.				
c Total lobbying expenditures	263,571.	334,712.	206,382.	201,530.	1,006,195.				
d Grassroots nontaxable amount	100,810.	119,036.	131,100.	141,175.	492,121.				
e Grassroots ceiling amount (150% of line 2d, column (e))					738,182.				
f Grassroots lobbying expenditures	26,042.	41,177.	6,361.	6,150.	79,730.				

Schedule C (Form 990 or 990-EZ) 2017

Schedule C (Form 990 or 990-EZ) 2017 50 CAN , INC . 27-30695 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)).

	Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)	
f the lobb	No	Amo	ount		
1 Durir	ng 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 re	ferendum, through the use of:				
a Volui	nteers?				
b Paid	staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	ia advertisements? ings to members, legislators, or the public?				
	ncations, or published or broadcast statements? Its to other organizations for lobbying purposes?				
	ct contact with legislators, their staffs, government officials, or a legislative body?				
_	es, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	er activities?				
	I. Add lines 1c through 1i				
	the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	es," enter the amount of any tax incurred under section 4912				
	es," enter the amount of any tax incurred by organization managers under section 4912				
	e filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
		า 501(c)(5)), or se	ction	
art III-					
art III- <i>i</i>	501(c)(6).				
art III- <i>i</i>	501(c)(6).			Yes	N
	501(c)(6). e substantially all (90% or more) dues received nondeductible by members?			Yes	N
I Were				Yes	N
2 Did t	e substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	e prior year? 1 501(c)(5)	2 3), or se	ction	e 3, is
1 Were 2 Did t 3 Did t	the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	e prior year? n 501(c)(5) No," OR (2 3), or se (b) Part	ction	
1 Were 2 Did t 3 Did t art III-I	e substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	e prior year? n 501(c)(5) No," OR (2 3), or se (b) Part	ction	
1 Were 2 Did t 3 Did t art III- 1 Dues 2 Sect	e substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." s, assessments and similar amounts from members	e prior year? n 501(c)(5) No," OR (2 3), or se (b) Part	ction	
Were Did t Did t Dues Sect expe	e substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." s, assessments and similar amounts from members tion 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	e prior year? n 501(c)(5) No," OR (2 3), or se (b) Part	ction	
Were Did t Did t Dues Sect expe a Curre	e substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." s, assessments and similar amounts from members tion 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). entyear	e prior year? n 501(c)(5) No," OR (2 3), or se (b) Part	ction	
Were Did t Did t Dues Sect expe a Curre	e substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." s, assessments and similar amounts from members cion 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures for which the section 527(f) tax was paid). ent year yover from last year	e prior year? n 501(c)(5 No," OR (2 3), or se (b) Part	ction	
1 Were 2 Did t 3 Did t art III- 1 Dues 2 Sect expe a Curre b Carry c Total 3 Aggr	e substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." s, assessments and similar amounts from members tion 162(e) nondeductible lobbying and political expenditures (do not include amounts of political enses for which the section 527(f) tax was paid). tent year yover from last year I regate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	prior year? n 501(c)(5 No," OR (2 3), or se (b) Part	ction	
Were Did t Dues Section Expenses Carry Carry Hand	e substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." s, assessments and similar amounts from members tion 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). tent year yover from last year I regate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues tices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exception is the section of the exception in the section is a substitute of the section in the section of the exception is a substitute of the section in the section of the exception is a substitute of the section in the section of the exception is a substitute of the section in the section of the exception is a substitute of the section in the section in the section is a substitute of the section in the section in the section is a substitute of the section in the section in the section is a substitute of the section in the section in the section is a substitute of the section in the section in the section is a substitute of the section in the section in the section is a substitute of the section in the section in the section is a substitute of the section in the section in the section is a substitute of the section in the section in the section is a substitute of the section in the section in the section is a substitute of the section in the section in the section is a substitute of the section in the section in the section is a substitute of the section in the section in the section in the section is a substitute of the section in the section in the section in the section in the sectio	e prior year? n 501(c)(5) No," OR (2 3), or se (b) Part	ction	
1 Were 2 Did t 3 Did t 2 T III- 1 Dues 2 Sect expe a Curre b Carry c Total 3 Aggr 4 If not	e substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." s, assessments and similar amounts from members tion 162(e) nondeductible lobbying and political expenditures (do not include amounts of political enses for which the section 527(f) tax was paid). tent year yover from last year I regate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	e prior year? n 501(c)(5) No," OR (2 3), or se (b) Part	ction	
1 Were 2 Did t 3 Did t 3 Did t 4 art III-I 1 Dues 2 Sect expe a Curre b Carry c Total 3 Aggr 1 If not does expe	e substantially all (90% or more) dues received nondeductible by members? the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from the B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." s, assessments and similar amounts from members tion 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). tent year yover from last year I regate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues tices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exception is the section of the exception in the section is a substitute of the section in the section of the exception is a substitute of the section in the section of the exception is a substitute of the section in the section of the exception is a substitute of the section in the section of the exception is a substitute of the section in the section in the section is a substitute of the section in the section in the section is a substitute of the section in the section in the section is a substitute of the section in the section in the section is a substitute of the section in the section in the section is a substitute of the section in the section in the section is a substitute of the section in the section in the section is a substitute of the section in the section in the section is a substitute of the section in the section in the section is a substitute of the section in the section in the section is a substitute of the section in the section in the section is a substitute of the section in the section in the section is a substitute of the section in the section in the section in the section is a substitute of the section in the section in the section in the section in the sectio	e prior year? n 501(c)(5) No," OR (2 3), or se (b) Part	ction	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number 27-3069592

	50CAN, INC.			27-3069592
Par	t I Organizations Maintaining Donor Advised	d Funds or Other Similar Funds	or Accoun	ts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6.		
	, ,	(a) Donor advised funds	(b) Fun	ds and other accounts
1	Total number at end of year	• •		
2	Aggregate value of contributions to (during year)			
_				
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year		l &l -	
5	Did the organization inform all donors and donor advisors in v	_		□ v _a a □ v _a
_	are the organization's property, subject to the organization's e			Yes No
6	Did the organization inform all grantees, donors, and donor ac	· ·	-	
	for charitable purposes and not for the benefit of the donor or		•	□ v _a a □ v _a
Par		repiration annuared "Vee" on Form 000 I		Yes No
			Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization			
	Preservation of land for public use (e.g., recreation or ed			
	Protection of natural habitat	Preservation of a cert	ified historic s	structure
_	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifi	led conservation contribution in the form	of a conservat	
	day of the tax year.		-	Held at the End of the Tax Year
а				
b	-			
	Number of conservation easements on a certified historic stru			
d	Number of conservation easements included in (c) acquired a			
	listed in the National Register		2d	
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	organization of	during the tax
	year ▶			
4	Number of states where property subject to conservation eas	ement is located		
5	Does the organization have a written policy regarding the peri	odic monitoring, inspection, handling of		
	violations, and enforcement of the conservation easements it			
6	Staff and volunteer hours devoted to monitoring, inspecting, I	handling of violations, and enforcing cons	ervation ease	ments during the year
	>			
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservat	tion easement	s during the year
	> \$			
8	Does each conservation easement reported on line 2(d) above			
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation	•		
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes t	he organization	on's accounting for
Dav	conservation easements.	Ant Historical Transcript an Ot	la a Oi-aail a	
Par			ner Similai	Assets.
	Complete if the organization answered "Yes" on Form			
1a	If the organization elected, as permitted under SFAS 116 (AS			
	historical treasures, or other similar assets held for public exh	ibition, education, or research in furtherar	nce of public s	service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ	oes these items.		
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement	and balance	sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	lucation, or research in furtherance of pub	olic service, pr	ovide the following amounts
	relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
				\$
2	If the organization received or held works of art, historical treatments	asures, or other similar assets for financial	gain, provide	
	the following amounts required to be reported under SFAS 11	16 (ASC 958) relating to these items:		
а	Revenue included on Form 990, Part VIII, line 1		> :	\$
			> :	\$
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.		Schedule D (Form 990) 2017

Sche	dule [D (Form 990) 2017 50CAN,	INC.					2	27-30	69592	Pa	ae 2
	t III		ollections of Ar	t, Hist	orical Tre	easures, o	r Other					.,
3	Usin	g the organization's acquisition, accession								•		
		ck all that apply):					_					
а		Public exhibition		b	Loan or exc	change progra	ams					
b] Scholarly research	•									
С		Preservation for future generations										
4	Prov	ide a description of the organization's co	ollections and explain	n how th	ey further th	he organizatio	on's exem	pt purpos	se in Part	XIII.		
5		ng the year, did the organization solicit o										
	to be	e sold to raise funds rather than to be ma	aintained as part of t	he organ	nization's co	ollection?				Yes		No
Pai	t IV	Escrow and Custodial Arrang	gements. Compl	ete if the	organizatio	on answered	"Yes" on F	orm 990	, Part IV, I	ine 9, or		
		reported an amount on Form 990, Par										
1a	Is th	e organization an agent, trustee, custodi	an or other intermed	diary for	contribution	s or other ass	sets not in	cluded				
	on F	orm 990, Part X?								Yes		No
b		es," explain the arrangement in Part XIII										
										Amount		
С	Begi	nning balance						1c				
		tions during the year						1d				
		ibutions during the year										
		ng balance						1f				
		the organization include an amount on Fo						y?		Yes		No
b	If "Y	es," explain the arrangement in Part XIII.	Check here if the ex	kplanatio	n has been	provided on	Part XIII					
Pai	τV	Endowment Funds. Complete i	f the organization ar	nswered	"Yes" on Fo	orm 990, Part	IV, line 10).				
			(a) Current year	(b) F	rior year	(c) Two yea	rs back (d) Three y	ears back	(e) Four y	ears t	oack
1a	Begi	nning of year balance										
b	Conf	tributions										
		nvestment earnings, gains, and losses										
d	Gran	nts or scholarships										
е	Othe	er expenditures for facilities										
	and	programs										
f	Adm	inistrative expenses										
		of year balance										
2	Prov	ide the estimated percentage of the curr	ent year end balanc	e (line 1	g, column (a)) held as:						
а		rd designated or quasi-endowment		%								
b	Pern	nanent endowment	%									
С	Tem	porarily restricted endowment 🕨	%									
	The	percentages on lines 2a, 2b, and 2c sho	uld equal 100%.									
За	Are t	there endowment funds not in the posse	ssion of the organiza	ation tha	t are held a	nd administer	ed for the	organiza	tion			
	by:									\	'es	No
	(i) t	unrelated organizations								3a(i)		
		related organizations								3a(ii)		
b		es" on line 3a(ii), are the related organiza								3b		
4	Desc	cribe in Part XIII the intended uses of the	organization's endo	wment f	unds.							
Pai	t VI	Land, Buildings, and Equipm	ent.									
		Complete if the organization answere	d "Yes" on Form 990	0, Part I\	/, line 11a. S	See Form 990	, Part X, li	ne 10.				
		Description of property	(a) Cost or o	other	(b) Cos	t or other	(c) Ac	cumulate	d	(d) Book	value	
			basis (investi	ment)	basis	(other)	dep	reciation				
1a	Lanc	1										
		dings										
		sehold improvements										

Schedule D (Form 990) 2017

23,959.

91,218.

114,188

e Other

d Equipment

181,447.

23,959.

Schedule D (Form 990) 2017 SUCAN, INC.			<u> </u>	-3069394 Page
Part VII Investments - Other Securities.				
Complete if the organization answered "Yes" of				d of year market value
(a) Description of security or category (including name of security)	(b) Book value	(c) Metriod of V	/aluation. Cost of end	d-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C) (D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes" of	on Form 990. Part IV.	line 11c. See Form 990.	Part X. line 13.	
(a) Description of investment	(b) Book value			d-of-year market value
(1)				•
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets.				
Complete if the organization answered "Yes" of	on Form 990, Part IV,	line 11d. See Form 990,	Part X, line 15.	
(a) [Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		>	
Part X Other Liabilities.				
Complete if the organization answered "Yes" of	on Form 990, Part IV,		n 990, Part X, line 25	
1. (a) Description of liability		(b) Book value	4	
(1) Federal income taxes			-	
(2)			-	
(3)			-	
(4)				
(5)			-	
(6)			-	
(7)				
(8)			-	
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.)			

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2017

PART XI, LINE 4B - OTHER ADJUSTMENTS:

PRIOR YEAR GRANT REFUND REPORTED ON PART XI, LINE 9

20,941.

Schedule D (Form 990) 2017 50 CAN, INC.	27-3069592 Page 5
Schedule D (Form 990) 2017 5 0 CAN , INC . Part XIII Supplemental Information (continued)	. 490
(Continued)	

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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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.

2017
Open to Public Inspection

OMB No. 1545-0047

≗ Employer identification number 27-3069592 PURSUANT TO AGREEMENT (h) Purpose of grant or assistance COBBYING EXPENSES X 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 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 (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) 0 (e) Amount of assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of 30,156, cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) 501(C)(4) Enter total number of other organizations listed in the line 1 table 45-4698768 General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization 50CAN 1625 K STREET NW, SUITE 400 or government 50CAN ACTION FUND, INC. WASHINGTON, DC 20006 Name of the organization Part I Part II

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Schedule I (Form 990) (2017)

27-3069592

Page 2

Schedule I (Form 990) (2017) 5 0 CAN, INC.

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

				•	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
			c		
KISE ADVOCACY PROGRAM STIPENDS	35	.008,87	0		
YOUCAN CROWD-FUNDING PROGRAM STIPENDS	20	72,000.	0		
IN POLICY FELLOWSHIP STIPENDS	2	17,900.	.0		
PARENT ADVOCACY LEADER STIPENDS	12	120,455.	.0		
Part IV Supplemental Information. Provide the information required in P	uired in Part I, lin	e 2; Part III, column (art I, line 2; Part III, column (b); and any other additional information	ditional information.	
PART I, LINE 2:					
FROM TIME TO TIME WE WILL PARTNER W	WITH OTHER	STATE	LEVEL ADVOCATES	res when	
OPPORTUNITIES ARISE. IN CERTAIN CAS	CASES, 50CAN	ACTS AS	FISCAL AGENT	NT FOR SUCH	
GRANTS AND WILL ENTER INTO SEPARATE	GRANT	AGREEMENTS	WITH SUB-G	SUB-GRANTEES	
BEFORE DISTRIBUTING FUNDS. WE REQUIRE	24	EPORTING ON THE	USE OF	FUNDS AND AN	
UPDATE ON PROGRAMMING FROM ANY AND	ALL	SUB-GRANTEES.	50CAN, INC.	. HAS NOT	
HISTORICALLY MADE INDEPENDENT GRANTS	οŢ	OTHER ORGANIZ	ORGANIZATIONS UNLESS	ESS 50CAN IS	
PART OF THE SAME PROJECT.					

50CAN ALSO MAINTAINS SEVERAL ONGOING GRANT AGREEMENTS WITH 50CAN ACTION FUND, INC., WHICH STIPULATE THAT 50CAN WILL REIMBURSE 50CAN ACTION FUND,

INC. FOR CERTAIN CONTRACTS THAT BENEFIT 50CAN'S NETWORK.

PARTICIPANTS IN OUR YOUCAN PROGRAM CAN APPLY FOR SMALL SEED GRANTS TO FUND

THEIR COMMUNITY-BASED ADVOCACY EFFORTS. THEIR AWARD AMOUNT IS BASED ON THE

QUALITY OF THEIR APPLICATION, WHICH INCLUDES A PITCH PRESENTATION. THEY ARE

EVALUATED BASED ON A PRE-SET RUBRIC BY 50CAN'S DIRECTOR OF TRAININGS AND A

PANEL OF 50CAN STAFFERS.

PARTICIPANTS IN OUR RISE PROGRAM CAN APPLY FOR TRAINING ION HOW TO ADVOCATE

FOR CHANGE IN THEIR COMMUNITIES. THE APPLICANTS MUST BE PARENTS LIVING IN

THE GREAT CHARLESTON AREA. THEY ARE EVALUATED BASED ON A PRE-SET RUBRIC BY

50CAN AND INTERVIEWED EITHER BY A SOUTH CAROLINACAN STAFFER OR A FORMER

RISE PARTICIPANT.

THE TN POLICY FELLOWSHIPS ARE AWARDS TO POLICY FELLOWS WHO APPLY ONLINE AND INTERVIEW WITH RELEVANT TEAM STAFFERS.

PARENT ADVOCACY LEADER STIPENDS ARE AWARDED THROUGH PGCS (PARENTS OF GREAT

CAMDEN SCHOOLS). 50CAN PROVIDES FISCAL OVERSIGHT OF THE PROGRAM THROUGH

PGCS.

Schedule I (Form 990)

SCHEDULE J (Form 990)

Department of the Treasury

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.

► Attach to Form 990.

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

OMB No. 1545-0047 **2017**

Open to Public Inspection

Name of the organization

50CAN, INC.

Part I Questions Regarding Compensation

Employer identification number 27-3069592

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as, maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the filing 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.			
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		Х
	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7	X	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958.6(c)2	a		

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

Schedule J (Form 990) 2017

Schedule J (Form 990) 2017

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

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

		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation		(a)-(i)(a)	reported as deferred on prior Form 990
(1) MARC MAGEE	(i)	246,914.	0.	0	12,381.	2,989.	262,284.	0
CEO & BOARD MEMBER	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) VALLAY-LATH VARRO	(i)	207,241.	1,900.	0	10,704.	13,091.	232,936.	0
PRESIDENT	(ii)	• 0	0.	• 0	• 0	• 0	0.	• 0
(3) DERRELL BRADFORD	(i)	159,650.	3,900.	0.	• 0	.407,7	171,259.	0
EXECUTIVE VICE PRESIDENT	(ii)	0	0	0	0	0.	0	0
(4) CHRIS TESSONE	(E)	144,906.	1,900.	0	7,820.	22,977.	177,603.	0
CFO AND SECRETARY	(ii)	•0	0	0	•0	0	•0	0
(5) MICHELLE JOHNSON	(E)	180,000.	0	0	0	12,031.	192,031.	0
CHIEF ADVISOR	(ii)	0	0	0	0	0	•0	0
(6) BRADFORD SWANN	(E)	151,974.	1,900.	0	8,078.	13,180.	175,132.	0
ED SOUTHCAROLINACAN	(ii)	•0	0	0	•0	0	•0	0
(7) REBECCA GREENBERG-ELLIS	(i)	147,381.	3,900.	0	7,695.	12,893.	171,869.	• 0
SVP OF GROWTH	(ii)	• 0	0	0	• 0	• 0	• 0	• 0
(8) JONATHAN CETEL	(i)	148,189.	1,900.	0	7,504.	7,604.	165,197.	• 0
ED PENNCAN	(ii)	• 0	• 0	• 0	• 0	• 0	• 0	• 0
(9) BRENT EASLEY	(i)	137,172.	1,900.	0	1,278.	21,680.	162,030.	• 0
ED TENNESSECAN	(ii)	• 0	0.	• 0	• 0	• 0	0.	• 0
	(i)							
	(ii)							
	Ξ							
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	<u>(i)</u>							
	(ii)							
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	(ii)							
	Ξ							
	(ii)							
								1, 00 000

	t II. Also complete this part for ar
	, 6b, 7, and 8, and for Pa
	, 3, 4a, 4b, 4c, 5a, 5b, 6a
	ed for Part I, lines 1a, 1b
	n, or descriptions requir
Supplemental IIII Ormati	e information, explanatior
	Provide th

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 7:
50CAN PROVIDES BONUS COMPENSATION BASED ON VARIOUS PERFORMANCE RELATED
CRITERIA AND THE JUDGEMENT OF MANAGEMENT. BONUSES ARE APPROVED BY THE BOARD
OF DIRECTORS ON AN ANNUAL BASIS.
Schedule J (Form 990) 2017

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

Employer identification number

50CAN, 27-3069592 INC. Part I Types of Property (a) (b) (c) (d) Number of Noncash contribution Check if Method of determining contributions or amounts reported on applicable noncash contribution amounts items contributed Form 990, Part VIII, line 1g Art - Works of art Art - Historical treasures 2 Art - Fractional interests 3 Books and publications 4 Clothing and household goods 5 Cars and other vehicles 6 Boats and planes 7 Intellectual property 8 Securities - Publicly traded 134,466.AVG. SELLING PRICE Х Securities - Closely held stock 10 Securities - Partnership, LLC, or trust interests Securities - Miscellaneous 12 13 Qualified conservation contribution -Historic structures Qualified conservation contribution - Other 14 Real estate - Residential 15 Real estate - Commercial 16 Real estate - Other 17 18 Collectibles Food inventory 19 Drugs and medical supplies 20 Taxidermy 21 Historical artifacts 22 Scientific specimens 23 Archeological artifacts 24 25 26 Other 27 Other 28 Other Number of Forms 8283 received by the organization during the tax year for contributions 0 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for Х exempt purposes for the entire holding period? 30a **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash X contributions? **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, 33

732141 09-07-17

LHA

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

Schedule M (Form 990) 2017

732142 09-07-17 Schedule M (Form 990) 2017

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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.

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

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

50CAN INC. **Employer identification number** 27-3069592

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
50CAN, INC. IS A NOT-FOR-PROFIT ORGANIZATION COMMITTED TO CLOSING
AMERICA'S ACHIEVEMENT GAP BY BUILDING PUBLIC SUPPORT FOR PROVEN MODELS
OF EFFECTIVE PUBLIC EDUCATION.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
50CAN TO ODCANTZED FOR THE DIDDOCE OF IMPROVING THE GUALTTY OF DUDITG

EDUCATION IN THE 50 STATES OF THE UNITED STATES OF AMERICA. IT DOES SO THROUGH THE CREATION AND MANAGEMENT OF STATE-BASED EDUCATIONAL REFORM PROGRAMS IN SUPPORT OF GREATER CHOICES, TRANSPARENCY, ACCOUNTABILITY AND FLEXIBILITY IN PUBLIC EDUCATION. ELEMENTS OF THESE PROGRAMS INCLUDE: RESEARCH ON AND DEVELOPMENT OF EFFECTIVE EDUCATIONAL REFORM POLICIES; DEVELOPMENT AND USE OF INFORMATION TECHNOLOGY, DATA GATHERING AND OUTCOME MEASUREMENTS DESIGNED TO INFORM, EVALUATE AND STRENGTHEN PUBLIC EDUCATION; PRODUCTION OF COMMUNICATIONS MATERIALS AND THE USE OF OUTREACH STRATEGIES TO EDUCATE THE GENERAL PUBLIC, ELECTED OFFICIALS, SCHOOL ADMINISTRATORS AND TEACHERS, CIVIC AND COMMUNITY GROUPS AND OTHER INTERESTED PARTIES ABOUT THE STATE OF PUBLIC EDUCATION AND THE POTENTIAL OF EDUCATION REFORM POLICIES AND PROGRAMS; AND EDUCATIONAL AND FELLOWSHIP PROGRAMS TO TRAIN INDIVIDUALS AS EFFECTIVE EDUCATIONAL REFORM LEADERS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

RESEARCH & POLICY

50CAN'S RESEARCH MARRIES IN-DEPTH ANALYSIS OF STATE-LEVEL PUBLIC

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

Schedule O (Form 990 or 990-EZ) (2017)

732211 09-07-17

Schedule O (Form 990 or 990-EZ) (2017) **Employer identification number** Name of the organization 50CAN, INC. 27-3069592 EDUCATION DATA IN EACH STATE WITH THE LATEST NATIONAL EDUCATION POLICY RESEARCH. FISCAL SPONSORSHIPS FROM TIME TO TIME 50CAN WILL OFFER FISCAL AGENCY SERVICES TO PARTNER ORGANIZATIONS WITH SIMILAR MISSIONS. TO DATE THESE RELATIONSHIPS HAVE BEEN OFFERED TO NEW ORGANIZATIONS AWAITING INDEPENDENT 501(C)(3) STATUS OR TO THOSE THAT WANT TO TAKE ADVANTAGE OF 50CAN'S FINANCIAL PROCESSES. EXPENSES \$ 1,564,937. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. FORM 990, PART VI, SECTION A, LINE 8B: 50CAN DOES NOT HAVE BOARD COMMITTEES WITH THE AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BOARD. FORM 990, PART VI, SECTION B, LINE 11B: THE FORM 990 WILL BE COMPLETED ANNUALLY AND COPIES WILL BE PROVIDED TO THE ENTIRE BOARD OF DIRECTORS AS WELL AS THE PRESIDENT OF THE ORGANIZATION. AT THAT TIME THE PRESIDENT WILL REVIEW THE FORM 990 WITH THE BOARD'S AUDIT/FINANCE COMMITTEE. ANY NECESSARY CHANGES WILL THEN BE UPDATED ON THE FORM. ONCE ALL NECESSARY CHANGES ARE MADE AND THE PRESIDENT IS IN AGREEMENT WITH THE AUDIT COMMITTEE ON THE FINISHED FORM 990, IT IS SUBMITTED WITH THE IRS BY THE FILING DEADLINE. A COPY OF THE APPROVED FORM 990 WILL BE PROVIDED TO THE BOARD OF DIRECTORS. FORM 990, PART VI, SECTION B, LINE 12C:

ANY DIRECTOR, PRINCIPAL OFFICER, OR MEMBER OF A COMMITTEE WITH GOVERNING

BOARD DELEGATED POWERS, WHO HAS A DIRECT OR INDIRECT FINANCIAL INTEREST,

Schedule O (Form 990 or 990-EZ) (2017)

Name of the organization 50CAN, INC. Employer identification number 27-3069592

DEFINED BELOW, IS AN INTERESTED PERSON.

A PERSON HAS A FINANCIAL INTEREST IF THE PERSON HAS, DIRECTLY OR

INDIRECTLY, THROUGH BUSINESS, INVESTMENT, OR FAMILY: (A) AN OWNERSHIP OR

INVESTMENT INTEREST IN ANY ENTITY WITH WHICH THE ORGANIZATION HAS A

TRANSACTION OR ARRANGEMENT, (B) A COMPENSATION ARRANGEMENT WITH THE

ORGANIZATION OR WITH ANY ENTITY OR INDIVIDUAL WITH WHICH THE ORGANIZATION

HAS A TRANSACTION OR ARRANGEMENT, OR (C) A POTENTIAL OWNERSHIP OR

INVESTMENT INTEREST IN, OR COMPENSATION ARRANGEMENT WITH, ANY ENTITY OR

INDIVIDUAL WITH WHICH THE ORGANIZATION IS NEGOTIATING A TRANSACTION OR

ARRANGEMENT. COMPENSATION INCLUDES DIRECT AND INDIRECT REMUNERATION AS

WELL AS GIFTS OR FAVORS THAT ARE NOT INSUBSTANTIAL. A FINANCIAL INTEREST

IS NOT NECESSARILY A CONFLICT OF INTEREST. A PERSON WHO HAS A FINANCIAL

INTEREST MAY HAVE A CONFLICT OF INTEREST ONLY IF THE APPROPRIATE GOVERNING

BOARD OR COMMITTEE DECIDES THAT A CONFLICT OF INTEREST EXISTS.

IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, AN

INTERESTED PERSON MUST DISCLOSE THE EXISTENCE OF THE FINANCIAL INTEREST AND

BE GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE DIRECTORS

AND MEMBERS OF COMMITTEES WITH GOVERNING BOARD DELEGATED POWERS CONSIDERING

THE PROPOSED TRANSACTION OR ARRANGEMENT.

AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS, AND

AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, HE/SHE SHALL LEAVE THE

GOVERNING BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT

OF INTEREST IS DISCUSSED AND VOTED UPON. THE REMAINING BOARD OR COMMITTEE

MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS.

Schedule O (Form 990 or 990-EZ) (2017) **Employer identification number** Name of the organization 27-3069592 50CAN, INC. PROCEDURES FOR ADDRESSING THE CONFLICT OF INTEREST: AN INTERESTED PARTY MAY MAKE A PRESENTATION AT THE GOVERNING BOARD OR COMMITTEE MEETING, BUT AFTER THE PRESENTATION, HE/SHE SHALL LEAVE THE MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT INVOLVING THE POSSIBLE CONFLICT OF INTEREST. B. THE CHAIRPERSON OF THE GOVERNING BOARD OR COMMITTEE SHALL, IF APPROPRIATE, APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT. C. AFTER EXERCISING DUE DILIGENCE, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE WHETHER THE ORGANIZATION CAN OBTAIN WITH REASONABLE EFFORTS A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST. D. IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY POSSIBLE UNDER CIRCUMSTANCES NOT PRODUCING A CONFLICT OF INTEREST, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE ORGANIZATION'S BEST INTEREST, FOR ITS OWN BENEFIT, AND WHETHER IT IS FAIR AND REASONABLE. IN CONFORMITY WITH THE ABOVE DETERMINATION IT SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT. IF THE GOVERNING BOARD OR COMMITTEE HAS REASONABLE CAUSE TO BELIEVE A MEMBER HAS FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, IT SHALL INFORM THE MEMBER OF THE BASIS FOR SUCH BELIEF AND AFFORD THE MEMBER

AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE. IF, AFTER HEARING THE MEMBER'S RESPONSE AND AFTER MAKING FURTHER INVESTIGATION AS WARRANTED BY THE CIRCUMSTANCES, THE GOVERNING BOARD OR COMMITTEE DETERMINES THE MEMBER HAS FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, IT SHALL TAKE APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION.

Schedule O (Form 990 or 990-EZ) (2017) Page 2 **Employer identification number** Name of the organization 27-3069592 50CAN, INC. EACH DIRECTOR, PRINCIPAL OFFICER AND MEMBER OF A COMMITTEE WITH GOVERNING BOARD DELEGATED POWERS SHALL ANNUALLY SIGN A STATEMENT WHICH AFFIRMS SUCH PERSON A. HAS RECEIVED A COPY OF THE CONFLICT OF INTEREST POLICY, B. HAS READ AND UNDERSTANDS THE POLICY, C. HAS AGREED TO COMPLY WITH THE POLICY, AND D. UNDERSTANDS THE ORGANIZATION IS CHARITABLE AND IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION IT MUST ENGAGE PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES. FORM 990, PART VI, SECTION B, LINE 15: FOR ALL POSITIONS, 50CAN LOOKS AT NON-PROFIT COMPENSATION ACROSS ITS VARIOUS STATES TO ENSURE THAT ITS COMPENSATION IS COMPETITIVE TO RETAIN THE BEST TALENT. WHEN SETTING COMPENSATION FOR POSITIONS, 50CAN REVIEWS COMPENSATION SURVEYS FOR NON-PROFITS AND CONSIDERS OTHER EDUCATION REFORM GROUPS AND HOW THEY COMPENSATE THEIR EMPLOYEES. RAISES AND PROMOTIONS ARE USUALLY BASED ON 50 CAN'S PERFORMANCE REVIEW SYSTEMS. ONCE COMPENSATION HAS BEEN DETERMINED, A CHART IS SUBMITTED TO THE BOARD OF DIRECTORS WITH EXPLANATIONS OF ANY PROPOSED CHANGES AND THE BOARD THEN VOTES ON THESE FIGURES DURING AN EXECUTIVE SESSION. THE VOTING AND APPROVAL ARE DOCUMENTED IN THE MINUTES OF

THIS PROCESS WAS LAST UNDERTAKEN IN DECEMBER 2017.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

THE EXECUTIVE SESSION.

Name of the organization 50CAN, INC.	Employer identification number 27 – 3069592
CA,CT,FL,GA,HI,LA,MD,NC,NJ,NM,NY,PA,RI,SC,TN,VA	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS FORM 990 AVAILABLE FOR PUBLIC I	NSPECTION AS
REQUIRED UNDER SECTION 6104 OF THE INTERNAL REVENUE CODE.	THE RETURN IS
ALSO POSTED ON GUIDESTAR.ORG AND OTHER SIMILAR TYPES OF WE	BSITES. IN
ADDITION, THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS A	VAILABLE TO THE
PUBLIC BY PROVIDING COPIES UPON REQUEST.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
PRIOR YEAR GRANT REFUND	-20,941.
FORM 990, PART XII, LINE 2C:	
THE BOARD OF DIRECTORS ASSUMES THE RESPONSIBILITY FOR THE	OVERSIGHT OF
AUDITED FINANCIAL STATEMENTS; THE BOARD COLLECTIVELY REVIE	WS AND
APPROVES THE AUDITED FINANCIAL STATEMENTS.	

SCHEDULE R (Form 990)

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

▶ Attach to Form 990.

Open to Public Inspection

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

OMB No. 1545-0047

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

INC

50CAN,

Name of the organization

Part I

Department of the Treasury Internal Revenue Service

Employer identification number 27-3069592

(g) Section 512(b)(13) controlled entity? Direct controlling 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. Direct controlling entity End-of-year assets status (if section 501(c)(3)) Public charity Total income Exempt Code ਰ section ਭ Legal domicile (state or Legal domicile (state or foreign country) foreign country) Primary activity Primary activity Name, address, and EIN (if applicable) Name, address, and EIN of related organization of disregarded entity Part II

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

Schedule R (Form 990) 2017

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Yes

×

50CAN, INC.

501(C)(4)

CONNECTICUT

EDUCATIONAL ACHIEVEMENT

GAP

TO CLOSE AMERICA'S

50CAN ACTION FUND, INC. - 45-4698768

1625 K STREET NW, SUITE 400 WASHINGTON, DC 20006

INC. 50CAN,

27-3069592

Page 2

Schedule R (Form 990) 2017

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. Part III

(j) (k) General or Percentage managing ownership									
(j) eneral or anaging	Yes No								
(i) Code V-UBI	20 of Schedule F-K-1 (Form 1065)								
(h) Disproportionate	2								
Disprop	Yes								
(g) Share of end-of-year	assets								
(f) Share of total income									
(e) Predominant income (related, unrelated,	excluded from tax under sections 512-514)								
(d) Direct controlling entity									
(c) Legal domicile	foreign country)								
(b) Primary activity									
(a) Name, address, and EIN of related organization									

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. Part IV

l		<u> </u>	٥		1						
9	Contion	512(b)(13) controlled entity?	Yes No								
		9. <u>a</u>	Ye								
3	:	Percentage ownership									
(a)	6)	Share of end-of-year	433413								
		Share of total income									
(9)	2	Type of entity (C corp, S corp,	Ol tidat)								
(5)	ì	Legal domicile Direct controlling Ty (C entity foreign									
(3))	Legal domicile (state or foreign	country)								
(a)		Primary activity									
(6)	<u>(i)</u>	Name, address, and EIN of related organization									

Schedule R (Form 990) 2017

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				_	Yes	٩
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?	ons with one or more re	lated organizations listed i	in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	iity			1a		×
b Gift, grant, or capital contribution to related organization(s)				1b	×	
c Gift, grant, or capital contribution from related organization(s)				10	×	
:				1d		×
:				1e		×
f Dividends from related organization(s)				#		×
g Sale of assets to related organization(s)				1g		×
Purchase of assets from related organization(s)				4		×
				÷		×
j Lease of facilities, equipment, or other assets to related organization(s)				Ė		×
				:		\\
K Lease of facilities, equipment, or other assets from related organization(s)				¥		4
I Performance of services or membership or fundraising solicitations for related org	related organization(s)			=		×
m Performance of services or membership or fundraising solicitations by related orc	elated organization(s)			£		×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ation(s)			1	×	
o Sharing of paid employees with related organization(s)				10	×	
p Reimbursement paid to related organization(s) for expenses				1p		×
Reimbursement paid by related organization(s) for expenses				1q	×	
r Other transfer of cash or property to related organization(s)				+		×
s Other transfer of cash or property from related organization(s)				18		×
for infor	who must complete th	s line, including covered r	mation on who must complete this line, including covered relationships and transaction thresholds.			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	olved		
(1) 50CAN ACTION FUND, INC.	В	30,156.	COST			
(2) 50CAN ACTION FUND, INC.	υ	354,463.	COST			
(3) 50CAN ACTION FUND, INC.	Ø	568,258.	COST			
(4)						
(5)						
(9)						
732163 09-11-17			Schedule R (Form 990) 2017	R (Form	(066	2017

Page 4

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

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

ip de				
(k) rcenta vnersk				
ୁ ଜୁନ୍ଦ ତ				
(j) Seneral nanagi partner				
(h)				
(h) spropor- tionate cations?				
Dis t				
(g) Share of end-of-year assets				
(f) Share of total income				
(e) Are all partners sec. 501(c)(3) Gr Yes No				
or jan (
Predominant income (related, unrelated, excluded from tax under sections 512-514)				
(c) Legal domicile (state or foreign country)				
(b) Primary activity				
(a) Name, address, and EIN of entity				

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Schedule F	R (Form 990) 2017 SUCAN, INC.	27-3009392	Page 5
Part VII	Supplemental Information.		
	Provide additional information for responses to questions on Schedule R. See instructions.		
	Provide additional information for responses to questions on schedule h. See instructions.		

TAX RETURN FILING INSTRUCTIONS

NEW YORK FORM CHAR500

FOR THE YEAR ENDING

DECEMBER 31, 2017

PREPARED FOR:

50CAN, INC. 1625 K STREET NW NO. 400 WASHINGTON, DC 20006

PREPARED BY:

PKF O'CONNOR DAVIES, LLP 3001 SUMMER STREET, 5TH FLOOR, EAST STAMFORD, CT 06905

AMOUNT OF TAX:

BALANCE DUE OF \$275

MAKE CHECK PAYABLE TO:

DEPARTMENT OF LAW

MAIL TAX RETURN TO:

NYS OFFICE OF ATTORNEY GENERAL CHARITIES BUREAU REGISTRATION SECTION 28 LIBERTY STREET NEW YORK, NY 10005

RETURN MUST BE MAILED ON OR BEFORE:

NOVEMBER 15, 2018

SPECIAL INSTRUCTIONS:

THE REPORT SHOULD BE SIGNED AND DATED BY AN AUTHORIZED INDIVIDUAL(S).

THE ATTACHED COPY OF THE FEDERAL FORM 990 MUST BE PROPERLY SIGNED AND DATED.

CHAR500

NYS Annual Filing for Charitable Organizations www.CharitiesNYS.com

Send with fee and attachments to:

NYS Office of the Attorney General
Charities Bureau Registration Section
28 Liberty Street
New York, NY 10005

2017

Open to Public Inspection

1.General Information									
For Fiscal Year Beginning (mm/dd/yyyy) 01/01/2017 and Ending (mm/dd/yyyy) 12/31/2017									
Check if Applicable: Address Change	Name of Organization: 50CAN, INC.			Employer Identification Number (EIN): 27 – 3069592					
Name Change Initial Filing	Mailing Address: 1625 K STREET NW, NO. 400 NY Registration Number: 42-64-57								
Final Filing Amended Filing	City / State / ZIP: WASHINGTON, DC 20006 Telephone: 301 761-4385								
Reg ID Pending Website: Email:									
Check your organization's	Check your organization's								
registration category: TA only EPTL only DUAL (7A & EPTL) EXEMPT* Confirm your Registration Category in the Charities Registry at www.CharitiesNYS.com.									
2. Certification									
See instructions for certification requirements. Improper certification is a violation of law that may be subject to penalties. The certification requires two signatories.									
We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report.									
			MARC MAGEE						
President or Authorized	Officer:		CEO & BOARI	D MEMBER					
	Signature		Print Name	e and Title Date					
			CHRIS TESS	ONE					
Chief Financial Officer or	Treasurer:		CFO						
	Signature		Print Name	e and Title Date					
3. Annual Reporting	Exemption								
		organization is claiming an	exemption under one cate	gory (7A or EPTL only filers) or both					
	,,,	· ·	•	ed Char500. No fee, schedules, or					
-				e exemption, you must file applicable					
	nts and pay applicable fees.								
	1 7 11								
3a. 7A filir	ng exemption: Total contribution	ons from NY State including	g residents, foundations, go	overnment agencies, etc. did not					
	· — ·	d not engage a professiona	al fund raiser (PFR) or fund i	raising counsel (FRC) to solicit					
contribution	ons during the fiscal year.								
		s did not exceed \$25,000	and the market value of ass	sets did not exceed \$25,000 at any time					
during the	fiscal year.								
4. Schedules and Attachments									
l " " -	See the following page for a checklist of Yes X No. 4a Did your organization use a professional fund raisor, fund raising sounced or commercial so venturer.								
for a checklist of Yes X No 4a. Did your organization use a professional fund raiser, fund raising counsel or commercial co-venturer for fund raising activity in NY State? If yes, complete Schedule 4a									
schedules and for fund raising activity in NY State? If yes, complete Schedule 4a. attachments to									
complete your filing. Yes X No 4b. Did the organization receive government grants? If yes, complete Schedule 4b.									
5. Fee									
See the checklist on the	7A filing fee:	EPTL filing fee:	Total fee:						
next page to calculate yo		Li it iming lee.	TOTAL ICC.	Make a single check or money order					
fee(s). Indicate fee(s) you				payable to:					
are submitting here:	\$ <u>25.</u>	\$ <u>250.</u>	\$ <u>275.</u>	"Department of Law"					

CHAR500 Annual Filing for Charitable Organizations (Updated April 2018)

768451 04-27-18 1019

^{*}The "Exempt" category refers to an organization's NYS registration status. It does not refer to its IRS tax designation.

Annual Filing Checklist

Simply submit the certified CHAR500 with no fee, schedule, or additional attachments IF:

- Your organization is registered as 7A only and you marked the 7A filing exemption in Part 3.
- Your organization is registered as EPTL only and you marked the EPTL filing exemption in Part 3.
- Your organization is registered as DUAL and you marked both the 7A and EPTL filing exemption in Part 3.

Checklist of Schedules and Attachments

If you answered "yes" in Part 4b, submit Schedule 4b: Government Grants	(PFR), Fund Raising Counsel (FRC), Commercial Co-Venturers (CCV)
Check the financial attachments you must submit with your CHAR500: X IRS Form 990, 990-EZ, or 990-PF, and 990-T if applicable X All additional IRS Form 990 Schedules, including Schedule B (Schedule of Condisclosure and will not be available for public review. Our organization was eligible for and filed an IRS 990-N e-postcard. Our revenue filing year. We have included an IRS Form 990-EZ for state purposes only.	
If you are a 7A only or DUAL filer, submit the applicable independent Certified Public A Review Report if you received total revenue and support greater than \$250,000 X Audit Report if you received total revenue and support greater than \$750,000 No Review Report or Audit Report is required because total revenue and support We are a DUAL filer and checked box 3a, no Review Report or Audit Report is required.	ort is less than \$250,000
Calculate Your Fee	
For 7A and DUAL filers, calculate the 7A fee: \$0, if you checked the 7A exemption in Part 3a \$25, if you did not check the 7A exemption in Part 3a	Is my Registration Category 7A, EPTL, DUAL or EXEMPT? Organizations are assigned a Registration Category upon registration with the NY Charities Bureau: 7A filers are registered to solicit contributions in New York under Article 7-A of the Executive Law ("7A")
For EPTL and DUAL filers, calculate the EPTL fee:	EPTL filers are registered under the Estates, Powers & Trusts Law ("EPTL") because they hold assets and/or conduct activities for charitable purposes in NY.
\$0, if you checked the EPTL exemption in Part 3b \$25, if the NET WORTH is less than \$50,000	DUAL filers are registered under both 7A and EPTL.
\$50, if the NET WORTH is \$50,000 or more but less than \$250,000 \$100, if the NET WORTH is \$250,000 or more but less than \$1,000,000 \$250, if the NET WORTH is \$1,000,000 or more but less than \$10,000,000 \$750, if the NET WORTH is \$10,000,000 or more but less than \$50,000,000 \$1500, if the NET WORTH is \$50,000,000 or more	EXEMPT filers have registered with the NY Charities Bureau and meet conditions in Schedule E - Registration Exemption for Charitable Organizations . These organizations are not required to file annual financial reports but may do so voluntarily.
	Confirm your Registration Category and learn more about NY law at www.CharitiesNYS.com.
Send Your Filing Send your CHAR500, all schedules and attachments, and total fee to:	Where do I find my organization's NET WORTH? NET WORTH for fee purposes is calculated on:

NYS Office of the Attorney General

Charities Bureau Registration Section

28 Liberty Street

New York, NY 10005

Need Assistance?

www.CharitiesNYS.com Visit:

Call: (212) 416-8401

Email: Charities.Bureau@ag.ny.gov

- IRS Form 990 Part I, line 22
- IRS Form 990 EZ Part I, line 21
- IRS Form 990 PF, calculate the difference between Total Assets at Fair Market Value (Part II, line 16(c)) and Total Liabilities (Part II, line 23(b)).

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