DLN: 93493221011058 OMB No 1545-0047 ncome Tax

e Code (except private

2017

Form 990	Return of Organization Exempt From I
% ⊴	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue foundations)
Department of the Treasury Internal Revenue Service	 Do not enter social security numbers on this form as it may be Information about Form 990 and its instructions is at

-		the Treasur ie Service		it Form 990 and its instructions is at <u>w</u>				pen to Public Inspection
A F	or the	2017 ca		ning 04-01-2017 $$, and ending 03	-31-2018			
□ Ad	ck if app dress ch	nange	C Name of organization PROPEL NONPROFITS			D Employer 41-19163		ication number
	me char tıal retuı	-	Doing business as					
		terminated	Number and street (or D.O. hov if m	all is not delivered to street address) Room	Jaurta	E Telephone	number	
	nended r plication	return n pending	1 SE Main ST STE 600	and is not delivered to street address). Room	/suite	(612) 249	9-6700	
			City or town, state or province, cou Minneapolis, MN 55414	ntry, and ZIP or foreign postal code		G Gross rece	epts \$ 6.	123.073
			F Name and address of principa	al officer	H(a)	Is this a group retu		•
			Kate Barr 1 SE Main Street			subordinates?		□Yes ☑No
			STE 600 Minneapolis, MN 55414			Are all subordinate included?	s	☐ Yes ☐No
I Ta:	x-exemp	ot status	✓ 501(c)(3)	(insert no)	1	If "No," attach a lis		•
J W	ebsite	:► wwv	w propelnonprofits org	(Insert no)	H(c)	Group exemption n	umber	>
K Forr	n of orga	anızatıon	✓ Corporation ☐ Trust ☐ Asso	ociation Other ►	L Year o		M State	of legal domicile
Pa	rt I	Sumi	marv					
Activities & Governance	0.	ur missio		r most significant activities veness of nonprofits with guidance, ex See Schedule O for more information	pertise and	capital Propel Nor	nprofits	provides loans to
605				scontinued its operations or disposed o				
× 5	l		-	ng body (Part VI, line 1a)			4	20 19
II 6	l		•	lendar year 2017 (Part V, line 2a)			5	37
c t	l		nber of volunteers (estimate if ne				6	28
ď	7a ⊺	otal unre	elated business revenue from Part	VIII, column (C), line 12			7a	0
	b N	let unrel	ated business taxable income from	m Form 990-T, line 34			7b	0
						Prior Year	_	Current Year
ġ	l		ions and grants (Part VIII, line 1h			7,303,22		3,719,704
Ravenue	l	-	service revenue (Part VIII, line 2g nt income (Part VIII, column (A),	••	-	1,544,97 45,80		2,382,337 21,032
ď	l		enue (Part VIII, column (A), lines	· · · · · · · · · · · · · · · · · · ·		+5,00	0	21,032
	l		, , , , , , , , , , , , , , , , , , , ,	ist equal Part VIII, column (A), line 12	,	8,894,00)4	6,123,073
	13 G	rants an	nd sımılar amounts paıd (Part IX,	column (A), lines 1–3)		1,546,24	18	2,411,978
	14 B	Benefits p	oald to or for members (Part IX, c	olumn (A), line 4)			0	0
8	l			enefits (Part IX, column (A), lines 5–10))	1,431,91	_	2,308,532
Expenses	١.		- '	mn (A), line 11e)		6,80	00	0
Ä	l		aising expenses (Part IX, column (D), l penses (Part IX, column (A), lines	11a-11d, 11f-24e)		1,216,58	13	2,242,382
	l		enses Add lines 13–17 (must equ	,		4,201,54	_	6,962,892
	l	•	less expenses Subtract line 18 fr			4,692,45	57	-839,819
Net Assets or Fund Balances					Begi	nning of Current Yea	ar	End of Year
Bala	20 ⊤	otal asse	ets (Part X, line 16)			28,055,96	55	32,125,168
정말	l		lities (Part X, line 26)			14,186,25	6	19,095,278
			s or fund balances Subtract line	21 from line 20		13,869,70	9	13,029,890
Undei know		ties of pe ind belief		ined this return, including accompanyi Declaration of preparer (other than c				
_		Signati	ire of officer			2018-08-09 Date		
Sign Here		, -						
nert	<i>'</i>		err President r print name and title					
		Pi	rınt/Type preparer's name	Preparer's signature	Date	Charli D c PT	IN	
Paid	k	L				Check L If self-employed		
Pre	parer	' -	rm's name			Firm's EIN ►		
Use	Only	y ''	rm's address ▶			Phone no		
M-: .	h - TDC		Library and the second second					 ′es □No
			this return with the preparer show duction Act Notice, see the ser	,	 Cat	No 11282Y	Y	res □ No Form 990 (2017)

Cat No 11282Y

Form **990** (2017)

Form	990 (2017)					Page 2
Par	t IIII Statement	of Program Service	e Accomplis	hments		
	Check if Sche	dule O contains a respo	onse or note to	any line in this Part III		🗆
1	Briefly describe the o	rganization's mission				
The I	mission of Propel Nonp	rofits is to fuel the imp	act and effective	eness of nonprofits with	guidance, expertise, and capita	<u>l</u>
2	Did the organization	undertake any significa	ant program ser	vices during the year wh	ich were not listed on	
	the prior Form 990 o	r 990-EZ?				🗌 Yes 🗹 No
	If "Yes," describe the	se new services on Sch	nedule O			
3	Did the organization	cease conducting, or m	nake significant	changes in how it condu	cts, any program	
	services?					🗌 Yes 🗹 No
	If "Yes," describe the	se changes on Schedu	le O			
4	Section 501(c)(3) an	d 501(c)(4) organizatio	ons are required	to report the amount of	argest program services, as me f grants and allocations to other	
	expenses, and reven	ue, if any, for each pro	gram service re	ported		
4a	(Code) (Expenses \$	1,954,288	including grants of \$	43,333) (Revenue \$	1,359,813)
	See Additional Data					
4b	(Code) (Expenses \$	2,473,614	including grants of \$	2,225,945) (Revenue \$	222,462)
	See Additional Data					
4c	(Code) (Expenses \$	737,823	including grants of \$	40,000) (Revenue \$	145,736)
	See Additional Data		,			, ,
	(Code) (Expenses \$	1,055,413	including grants of \$	102,700) (Revenue \$	675,356)
			s a wide range of i	ntegrated programs and ser	vices for nonprofit organizations Sei	rvices to nonprofits include
					rofits Programs provide strategic co ed technical assistance helps organiz	
	situation, identify priorit	ies, and develop a plan of	action for the near	and long-term future Tech	nical assistance and consulting servi	ces include a wide range of
	to tie their mission and e	g discussions with starr an goals to strategies that gro	d board leaders III w capacity and str	nese projects neip nonprofits engthen sustainability. Prop	s identify, analyze, and adapt their b el Nonprofits' education and training	program provides workshops on
	topics related to board g	jovernance, financial mana	gement and leade	rship for directors, board me	mbers, and staff and volunteers Proveloping and distributing articles, gu	ppel Nonprofits hosts an annual
				practices, planning, governa		didance, templates, and analysis
4d	Other program service	ces (Describe in Schedi	ıle O)			
	(Expenses \$	1,055,413 incl	•	\$ 102.70	00) (Revenue \$	675,356)
40	Total program serv	<u> </u>	6 221 1	<u> </u>	· · · · · · · · · · · · · · · · · · ·	

or X as applicable

Checklist of Required Schedules

Section 501(c)(3) organizations.

Page 3

No

Nο

Nο

Nο

No

Nο

Nο

Nο

No

Nο

Nο

Nο

No

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Nο

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No

Nο

Form **990** (2017)

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

Did the organization receive or hold a conservation easement, including easements to preserve open space,

Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

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

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

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

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

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

assessments, or similar amounts as defined in Revenue Procedure 98-19?

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🕏

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional

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

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 total of fundraising event gross income and contributions on Part VIII,

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

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX,

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V

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11d

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12a

12b

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14a

14b

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Yes

4 5

Yes

Yes

Yes

Yes

Yes

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36

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		No				
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	Yes					
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		No				
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's			ĺ				

Page 4

Νo

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No

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Yes

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24b

24c

24d

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28b

28c

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35a

35h

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Yes

Yes

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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,"

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

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?

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

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

orm	990 (2017)			Page !
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 47			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
	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	2b	Yes	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	165	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N-
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			No
E-	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		140
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		No
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	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		ı — —

Par	TE VI Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions	"No" respo	nse to li	nes
	Check if Schedule O contains a response or note to any line in this Part VI			✓
Se	ection A. Governing Body and Management		<u> </u>	
	and the second s		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year label 1a	20		
	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 1b	19		
2			Yes	
3		rision 3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
	Did the organization have members of stockholders, or other persons who had the power to elect or appoint one or n	<u> </u>		110
	members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, o persons other than the governing body?		Yes	
8	the following			
	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	. 8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Rev	enue Code		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliate and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing to form?	the 11a	Yes	
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	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise conflicts?	to 12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	7 12 c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independe persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	nt		
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	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 with a taxable entity during the year?	. 16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participal in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exerging the organization of the			
	status with respect to such arrangements?	16b		
	Light the Chahan with which a come of the Form 2000 to recovered to be filed.			
17	List the States with which a copy of this Form 990 is required to be filed► MN			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s of available for public inspection. Indicate how you made these available. Check all that apply	nly)		
	☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interes policy, and financial statements available to the public during the tax year	t		
20	State the name, address, and telephone number of the person who possesses the organization's books and records Curtis Klotz 1 SE Main ST STE 600 Minneapolis, MN 55414 (612) 249-6664			

✓

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, or highest compensated employees who received more than \$100,000

 List all of the organization's former officers, of reportable compensation from the organization 					pen	sated	em	ployees who receive	ed more than \$100	,000
 List all of the organization's former director organization, more than \$10,000 of reportable co 										
List persons in the following order individual trus compensated employees, and former such persoi		rs, ınstı	tutioi	nal t	rust	ees, o	offic	ers, key employees	s, highest	
Check this box if neither the organization no	r any related or	ganızat	ion c	omp	ens	ated a	ny	current officer, dire	ctor, or trustee	
(A) Name and Title	(B) Average hours per week (list any hours	tha pers	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	anizations 이 라를 하는 기계를 하는 이 기계를 하는 기		(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations				
(1) Jean Adams Board Member	2 00	х						0	253,307	45,284
(2) Paul Babcock Board Member	2	×						0	0	0
(3) Ralph Bernstein Board Member	2	X						0	0	0
(4) Heidi Christianson Board Member	2	X						0	0	0
(5) Courtney Colby Board Member	 0	x						0	0	0
(6) Brad Kruse Board Member	2 00	X						0	0	0
(7) Scott Marquardt Board Member	2 00	x						0	0	0
(8) Sony Malhotra Board Member	2	X						0	0	0
(9) David Mitchell Board Member	0	X						0	0	0
(10) Marcus Owens Board Member	0	Х						0	0	0
(11) Patty Pannkuk Board Member	0	X						0	0	0
(12) Ron Price Board Member	2	X						0	0	0
(13) Magui Rubalcava Shulman Board Member	2	X						0	0	0
(14) Gary Taverna Board Member	2	Х						0	0	0

(15) Bo Thao-Urabe Х 0 0 Board Member (16) Diane Tran Χ 0 Board Member (17) Sarah Clyne Х 0 Х 0 Secretary

compensation from the organization ▶ 0

Part VII

Page 8

week (list so both an officer and a from the from related any hours director/trustee) organization (W-organizations	amount of compensa from th	ation ne
organizations below dotted line) organizations below dotted line) organizations below dotted line below dotted line) organizations dighest compensated military and militar	rganizatio related organizat	d
(18) Sean Kershaw 3 X X 0 0		0
vice-Chairperson		
(19) Beth Topoluk 3 X X 0 0 0		0
Treasurer		
(20) Greg Zeller 4 X X 0 0		0
Champerson		
(21) Kate Barr 40 X 183,556 0		30,811
Freshellt and CLO		
(22) Janet Ogden-Brackett 40 X 107,622 0		24,120
vice riesident of Lending		
(23) Curtis Klotz 40 X 102,463 0		22,290
Vice President of Finance & Chief Financial Officer		
1b Sub-Total		
c Total from continuation sheets to Part VII, Section A		
d Total (add lines 1b and 1c)	1	122,505
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 3		
	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on		
line 1a? If "Yes," complete Schedule J for such individual		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such		
The state of the	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		No
Section B. Independent Contractors		
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.	ation	
(A) Name and business address (B) Description of services	(C) Compensa	ntion

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

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

Part '	VΠ											
		Check if Schedul	e O contains a	a respo	onse or note to any	(his Part VII (A) revenue	Re e	(B) lated or xempt unction	(C) Unrelated business revenue	exc tax u	(D) Revenue cluded from nder sections
s	1a	Federated campaig	ns	1a	0				evenue			512-514
ants	ŀ	• Membership dues		1 b	0							
S G		Fundraising events		1 c	0							
sifts lar /		d Related organizatio		1d	165,500							
imil		Government grants (coAll other contributions,		1e	898,906 I							
Contributions, Gifts, Grants and Other Similar Amounts		and similar amounts n above	ot included	1f	2,655,298							
ontril nd O1		Moncash contribution in lines 1a-1f \$ Total.Add lines 1a-1		20,1								
		Total.Add lines 1a-1		• •	Business		3,719,704	ı				
Service Revenue	2a	Loan Interest Revenue			Dusiness	522200	1,2	226,144	1,226	,144	0	0
45	_	Loan Fee Revenue				522200	1	121,949		,949	0	0
ر د	С	Client Fee and Contract	Revenue			541900		85,280		,280	0	0
Ş.	d	Workshop and Training	Fees			611430		42,085	42	,085	0	0
an	e			_				6,879	6	,879	0	0
Program		All other program se			2,3	 382,337				·		
		Total.Add lines 2a-2f			<u> </u>	<u>, </u>						
		Investment income (ii imilar amounts) .			interest, and other •	.	21,03	2	21,032		0	0
		Income from investm			ond proceeds	•		0	0		0	0
	5 F	Royalties			· · · •	·		0	0		0	0
	6a	Gross rents	(ı) Real		(II) Personal	-						
		Less rental expenses										
	_	Rental income or		0								
	٠	(loss)		J		<u>"</u>						
	d	Net rental income o										
	7a	Gross amount from sales of assets other than inventory	(ı) Securit	ies	(II) Other	_						
		Less cost or other basis and sales expenses		0		0						
		Gain or (loss) Net gain or (loss)			•	<u> </u>						
Other Revenue		Gross income from fi (not including \$	undraising eve 0 ed on line 1c)	ents of								
Re		Less direct expense		b								
her		Net income or (loss) Gross income from g			ents •							
ŏ	Ja	See Part IV, line 19		es a								
		Less direct expense Net income or (loss)		b]						
		Gross sales of invent	ory, less		.							
	b	Less cost of goods s	sold	a b		-						
		Net income or (loss)		ınvent	tory ►	_						
		Miscellaneous	Revenue		Business Code							
	11	a										
	b											
	c											
										_		
		All other revenue . Total. Add lines 11a			•							
		Total revenue. See		•	•			0				
		. otal revenue. See	THE UCHOUS	• •	• • • •		6,123,07	3	2,403,369		0	0 m 990 (2017)

Forr	m 990 (2017)				Page 10
	Int IX Statement of Functional Expenses tion 501(c)(3) and 501(c)(4) organizations must complete all co	dumns All other orga	enizations must comm	lete column (A)	
Jec	Check if Schedule O contains a response or note to any	_	·	• •	П
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	2,411,978	2,411,978		
2	Grants and other assistance to domestic individuals See Part IV, line 22	0	0		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	481,322	303,259	157,270	20,793
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0	0	0	0
7	Other salaries and wages	1,415,086	1,218,664	175,737	20,685
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	70,249	60,428	8,787	1,034
9	Other employee benefits	156,081	131,194	24,275	612
10	Payroll taxes	185,794	118,507	64,267	3,020
11	Fees for services (non-employees)				
ā	a Management	14,000	1,469	12,531	0
ı	Legal	19,127	9,265	9,862	0
•	C Accounting	24,734	3,038	21,696	0
•	il Lobbying	0	0	0	0
•	e Professional fundraising services See Part IV, line 17	0			0
1	Investment management fees	0	0	0	0
ģ	g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	330,572	295,039	3,196	32,337
12	Advertising and promotion	47,746	17,019	30,480	247
13	Office expenses	107,532	66,379	39,678	1,475
14	Information technology	88,361	62,619	24,407	1,335
15	Royalties	0	0	0	0
16	Occupancy	237,062	189,330	44,095	3,637
17	Travel	38,680	34,926	3,677	77
18	Payments of travel or entertainment expenses for any federal, state, or local public officials •	0	0	0	0
19	Conferences, conventions, and meetings	37,747	23,922	13,736	89
20	Interest	330,133	330,133	0	0
	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	96,295	78,209	16,552	1,534
23	Insurance	4,457	0	4,457	0
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount				

845,466

6,661

7,413

6,396

6,962,892

845,466

6,661

7,237

6,396

6,221,138

0

0

176

0

654,879

0

0

0

0

0

86,875

Form **990** (2017)

exceeds 10% of line 25, column (A) amount, list line 24e

25 Total functional expenses. Add lines 1 through 24e

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)

expenses on Schedule O)

c Other Filing Fee Expenses

d Uncollectible Accounts Expense

b Lending Expenses

e All other expenses

a Provision for Loan Loss Reserves

Assets

11

12

13

14

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16

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33

34

Liabilities 22

Fund Balances

Assets or 30

Net

End of year

Page **11**

0

0

0

0

0

0

0

0

O

91,230

1.077.752

393.993

60.811

722,266

8,875

996.490

17.367.647

19,095,278

10.519.354

2.510.536

13,029,890

32.125.168

Form **990** (2017)

32,125,168

21,876,252

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

II of Schedule L

Notes and loans receivable, net .

Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other

basis Complete Part VI of Schedule D

Intangible assets

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Investments—publicly traded securities .

Investments—other securities See Part IV, line 11 .

Total assets.Add lines 1 through 15 (must equal line 34) . . .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

Investments—program-related See Part IV, line 11

Tax-exempt bond liabilities

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here

and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Part II of Schedule L

Inventories for sale or use .

b Less accumulated depreciation

Grants payable . . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

1	Cash-non-interest-bearing	1,876,241	1	4,896,631
2	Savings and temporary cash investments	5,678,553	2	1,980,395
3	Pledges and grants receivable, net	1,766,546	3	1,488,089
4	Accounts receivable, net	234,320	4	260,015

Beginning of year

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30

31

32

33

34

0

17.844.073

200.783

106.151

288.487

60.811

271.267

28.055.965

٥

0 14

0 18

٥ 20

0 22

0

3,110

950.381

12 961 498

14,186.256

9.168.761

4.700.948

13,869,709

28.055.965

Accounts receivable, net . . . Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part

section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9)

voluntary employees' beneficiary organizations (see instructions) Complete

10a

10b

Loans and other receivables from other disqualified persons (as defined under

1,353,603

275.851

Financial Statements and Reporting

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

If the organization changed its method of accounting from a prior year or checked "Other," explain in

c 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?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

1 Accounting method used to prepare the Form 990

separate basis, consolidated basis, or both

Schedule O

☐ Separate basis

consolidated basis, or both ✓ Separate basis

Audit Act and OMB Circular A-133?

☐ Cash ☑ Accrual ☐ Other

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

Yes

Yes

Yes

Yes

Yes Form 990 (2017)

2a

2b

2c

3a

3b

No

Νo

Additional Data

Software ID: 17005980

Software Version: v1.00

EIN: 41-1916337

Name: PROPEL NONPROFITS

Form 990 (2017)

Form 990, Part III, Line 4a:

Lending As a Community Development Financial Institution (CDFI) certified by the US Treasury, Propel Nonprofits makes loans to nonprofit organizations to expand programs and services, bridge cash flow gaps, consolidate debt, and make capital improvements. We believe that access to capital is essential to the growth and stability of the nonprofit sector. Propel Nonprofits makes loans to nonprofits of all sizes and stages of development, many of which have been historically under-served by traditional credit markets. Loans are as large as \$1 million and as small as \$10,000. Overall, we made 101 new loans in FY2018 totaling \$18,828,210. Our lending impacted organizations working in health care, human services, arts and humanities, charter schools, community development, and affordable housing. By partnering with other capital providers, we also leveraged additional funds of \$48 million into the community. Within the lending program, Propel Nonprofits has created the innovative Equity. Builder Loan Program This program includes intense technical assistance, a cohort learning process, loan forgiveness, and a structured savings program that brings equity to

the balance sheets of Minnesota-based arts and culture nonprofits. Ultimately, the goal is to allow the leaders of these organizations to be more strategic and visionary in

their work. At the end of FY2018, there were 16 loans active in the Equity Builder program totaling nearly \$1.5 million.

Form 990, Part III, Line 4b:

governance, nonprofit business models, and strategy planning

have not yet established themselves as separate 501(c)(3) nonprofit organizations. These entities may be in the process of applying for 501(c)(3) status or may be short-term in nature or may be exploring whether becoming a separate nonprofit is the most appropriate long-term strategy to accomplish their mission. Propel Nonprofits accepts charitable grants and contributions on behalf of these projects. These funds are treated as contributions with donor restrictions when received by Propel Nonprofits. These

Fiscal Sponsorship Propel Nonprofits acts as a fiscal sponsor to emerging projects based in Minnesota, North Dakota, South Dakota, and Wisconsin that for various reasons

funds are released from restriction as Propel Nonprofits in turn grants them to the fiscally sponsored recipients. Propel Nonprofits ultimately retains the discretion to redirect the funds to another entity if needed in order to accomplish the purpose of the contribution as originally restricted by its donor. Once the funds have been granted to the fiscally sponsored client, the client has the option to hold and manage those funds on its own or enter an arrangement with Propel Nonprofits in which Propel administers the funds on behalf of the client. Along with the fiscal management option, Propel Nonprofits provides extensive technical assistance on topics such as financial leadership, board

Training, Guidance, and Knowledge Sharing Propel Nonprofits provides on-going training, consulting, and technical assistance to groups of nonprofits based either on geographic location (such as Itasca County, MN) or sector (such as arts and culture) Propel Nonprofits' one-to-one expertise and group training programs range in topic

from social enterprise, board governance, financial management, accounting, and nonprofit business models. During FY2018, Propel Nonprofits provided training and

assistance for nonprofits in surrounding states, and continued its partnership with the Arts Midwest ArtsLab program

Form 990, Part III, Line 4c:

consulting to cohorts of nonprofits in Little Falls, Saint Paul, and Duluth that were exploring social enterprise as an alternative revenue generating option. In addition, Propel Nonprofits continued its learning sessions, consulting, technical assistance, and executive director cohort in Grand Rapids, conducted trainings and provided technical

efil	e GR/	APHIC pri	<u> 1t - DO NO</u>	T PROCESS	As Filed Data -			DLN: 9:	3493221011058	
SCI		ULE A		Public (Charity Statu			ort	OMB No 1545-0047	
990I		0 01	Con	ipiete if the oi	rganization is a sect 4947(a)(1) nonexe			a section	2017	
Depart	ment of	f the Treasury	▶ Infe	ormation abou	► Attach to Form it Schedule A (Form www.irs.g			ections is at	Open to Public Inspection	
Nam	e of th	he organiza PROFITS	tion					Employer identific	ation number	
FROFE	L NON	FROITIS						41-1916337		
	rt I				us (All organization it is (For lines 1 thro			See instructions.		
1 1	rganiz		•		•	5 ,	,	/A\/:\		
_		•			sociation of churches					
2					1)(A)(ii). (Attach Sch	•	• •			
3		·	•	·	vice organization desc			•		
4		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								
5		(b)(1)(A)	(iv). (Comple	ete Part II)	t of a college or unive				ped in section 170	
6		•	•	-	governmental unit de					
7	\checkmark	_		mally receives (vi). (Complete	a substantial part of it Part II)	s support from a	governmental u	init or from the genera	al public described in	
8		A communi	ty trust desci	ribed in section	170(b)(1)(A)(vi)	(Complete Part I	I)			
9					escribed in 170(b)(1) ee instructions Enter				ege or university or a	
10		from activit	ies related to income and	its exempt fun unrelated busin	(1) more than 331/39 ctions—subject to cer ess taxable income (le implete Part III)	taın exceptions, a	and (2) no more	than 331/3% of its su		
11		An organiza	ation organize	ed and operated	d exclusively to test fo	r public safety S	ee section 509	(a)(4).		
12		more public	ly supported	organizations of	d exclusively for the be described in section 5 the type of supporting	09(a)(1) or se d	ction 509(a)(2). See section 509(a	e purposes of one or)(3). Check the box	
а		Type I. A so	supporting or n(s) the pow	ganızatıon oper	ated, supervised, or cappoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by		
b		Type II. A manageme	supporting o nt of the sup	rganızatıon sup porting organiza	ervised or controlled i					
С		Type III f	unctionally i		and C. supporting organizatio ons) You must com				ted with, its	
d		Type III n functionally	on-function integrated	ally integrate The organization	d. A supporting organi n generally must satis	ization operated fy a distribution i	ın connection wi requirement and	th its supported orgar		
e		Check this	box if the org	anızatıon receiv	t IV, Sections A and ved a written determin	nation from the II		pe I, Type II, Type II	I functionally	
f	Enter			on-functionally l organizations	integrated supporting	organization				
g				-	ipported organization(5)				
		Name of supp organization	orted	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the orgain your govern		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
						Yes	No			
					-					
Tota	I		tion Act Not			Cat No 11285		 Schedule A (Form 9		

or loss from the sale of capital assets (Explain in Part VI) Total support. Add lines 7 through

Gross receipts from related activities, etc. (see instructions)

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 Schedule A, Part II, line 14

Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))

box and stop here. The organization qualifies as a publicly supported organization

and stop here. The organization qualifies as a publicly supported organization

11

organization

instructions

supported organization

Page 2

13,837,873

7,511,987

70 688 %

69 090 %

▶ ☑

12

14

Schedule A (Form 990 or 990-EZ) 2017

III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support

	Calendar 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 grant")	252,687	1,676,289	793,565	7,303,225	3,719,704	13,745,470
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
4	Total. Add lines 1 through 3	252,687	1,676,289	793,565	7,303,225	3,719,704	13,745,470
5	The portion of total contributions by each person (other than a						

	to or expended on its behalf	U	Ů	U	ľ		l "
3	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
4	Total. Add lines 1 through 3	252,687	1,676,289	793,565	7,303,225	3,719,704	13,745,470
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)						3,963,740
6	Public support. Subtract line 5 from line 4						9,781,730

4	Total. Add lines 1 through 3	252,687	1,676,289	793,565	7,303,225	3,719,704	13,745,470
	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)			·			3,963,740
6	Public support. Subtract line 5 from line 4						9,781,730
- 5	Section B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2013	(b) 2014	(c)2015	(d)2016	(e) 2017	(f)Total
7	Amounts from line 4	252,687	1,676,289	793,565	7,303,225	3,719,704	13,745,470
8	Gross income from interest, dividends, payments received on	23 960	17 672	15.835	13 904	21 032	92 403

	line 1 that exceeds 2% of the amount shown on line 11, column (f)									
6	Public support. Subtract line 5 from line 4						9,781,730			
S	Section B. Total Support	upport								
	C-1d									
	Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f)Total			
7		(a)2013 252,687	` '	` ,	. ,	` ,				

	amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						9,781,730
•	Section B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2013	(b) 2014	(c)2015	(d) 2016	(e) 2017	(f)Total
7	Amounts from line 4	252,687	1,676,289	793,565	7,303,225	3,719,704	13,745,470
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	23,960	17,672	15,835	13,904	21,032	92,403
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10	Other income Do not include gain						

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization,

16a 33 1/3% support test-2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

33 1/3% support test-2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

17a 10%-facts-and-circumstances test-2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

h 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization gualifies as a publicly

Р	Support Schedule for						
	(Complete only if you cl the organization fails to						er Part II. If
Se	ection A. Public Support	quality under t	ine tests listed i	below, please co	ompiete Part II.,)	
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
_	(or fiscal year beginning in) ▶	(a) 2013	(0) 2014	(6) 2015	(4) 2016	(e) 2017	(I) Iotai
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
-	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
S	from line 6) ection B. Total Support						
	Calendar year						
	(or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9							
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
ь	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c,						
14	11, and 12) First five years. If the Form 990 is for	l r the organization	l 's first, second, th	L urd, fourth, or fift	l lax vear as a sec	ction 501(c)(3) o	l rganization.
	check this box and stop here			,,	,		▶ □
Se	ection C. Computation of Public S	Support Perce	ntage				
15	Public support percentage for 2017 (lin			column (f))		15	
16	Public support percentage from 2016 S	chedule A, Part II	II, line 15			16	
Se	ction D. Computation of Investr	nent Income	Percentage				
17	Investment income percentage for 201	7 (line 10c, colur	nn (f) divided by	lıne 13, column (f	·))	17	
18	Investment income percentage from 20	016 Schedule A, I	Part III, line 17			18	
	331/3% support tests—2017. If the	organization did n	ot check the box	on line 14, and lir	ne 15 is more than		e 17 is not
	more than 33 1/3%, check this box and s						ightharpoons
	33 1/3% support tests—2016. If the						. —
_	not more than 33 1/3%, check this box	-			· ·		ightharpoons
20	Private foundation. If the organization	-	-				ightharpoons

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

Yes

5b

5c

7

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

No

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	1	İ	
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)			
	in section 309(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a	İ	
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	3b		

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			
	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 ın Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			

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		
		3с	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a	
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	4b	
С	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	4c	
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and		

			, ,	
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	4a		
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	4b		
c Did the organization support any foreign supported organization that does not have an IRS determination 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure	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	4c		
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)	5a		

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.	6	
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)		

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Substitutions only. Was the substitution the result of an event beyond the organization's control?

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

10a

answer line 10b below

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

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)	8	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as		i

```
defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"
provide detail in Part VI.
```

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

```
9a
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
```

Pa	rt IV Supporting Organizations (continued)			-9	
			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			
	ection 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, supervised or controlled the supporting organization	2			
5	ection C. Type II Supporting Organizations				
	cetion c. Type 11 Supporting Organizations		Yes	No	
1	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 the supported organization(s)				
S	ection D. All Type III Supporting Organizations				
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the 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?		Yes	No	
		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			
s	ection 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 instruct The organization satisfied the Activities Test. Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see		ctions)		
2	Activities Test Answer (a) and (b) below.		Yes	No	
	a 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 activities but for the organization's involvement	2b			
3	Parent of Supported Organizations Answer (a) and (b) below.				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or 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 of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard	3b			

Schedule A (Form 990 or 990-EZ) 2017

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional)

Page 6

Schedule A (Form 990 or 990-F7) 2017

1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross 6 income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions)

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year) a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI)

2 2 Acquisition indebtedness applicable to non-exempt use assets 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see 4 instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 8

Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year 6

2 4 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

3	Administrative expenses paid to accomplish exempt purposes of supported organizations	<u> </u>
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	
10	Line 8 amount divided by Line 9 amount	

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			
10	10 Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			

details in Part VI) See instructions		
(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
	(i)	(i) (ii) Underdistributions

9 Distributable amount for 2017 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			_
d From 2015			

e From 2016. f Total of lines 3a through e

d Excess from 2016. . . . e Excess from 2017.

instructions)

g Applied to underdistributions of prior years h Applied to 2017 distributable amount i Carryover from 2012 not applied (see

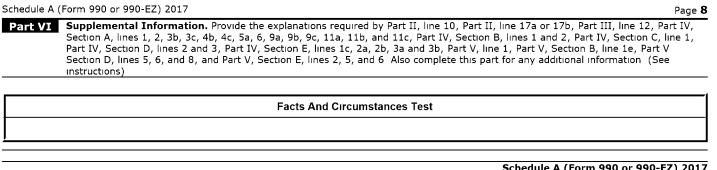
j Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2017 from Section D, line 7

a Applied to underdistributions of prior years **b** Applied to 2017 distributable amount

c 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 If the amount is greater than zero, explain in Part VI See instructions		
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions		
7 Excess distributions carryover to 2018. Add lines 3 ₁ and 4c		

lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions		
7 Excess distributions carryover to 2018. Add lines 3 ₁ and 4c		
8 Breakdown of line 7		
a Excess from 2013		
b Excess from 2014		
c Excess from 2015		

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



SCHEDULE D

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.

OMB No 1545-0047

DLN: 93493221011058

Open to Public

Department of the Treasury Internal Revenue Service

(Form 990)

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

Inspection

PROPEL NONPROFITS			Employer identification number
			41-1916337
	g Donor Advised Funds or		or Accounts.
Complete if the organization	answered "Yes" on Form 990	or advised funds	(b)Funds and other accounts
1 Total number at end of year	(a) 501	ior advisca ranas	(b)) and other accounts
2 Aggregate value of contributions to (dur	ing year)		+
3 Aggregate value of grants from (during)			
4 Aggregate value at end of year	, , , , , , , , , , , , , , , , , , , ,		+
5 Did the organization inform all donors a	L L Writing that	the assets hold in donor	advised funds are the
organization's property, subject to the o	organization's exclusive legal cont	rol?	☐ Yes ☐ No
6 Did the organization inform all grantees charitable purposes and not for the ben private benefit?			
Part II Conservation Easements.	Complete if the organization	answered "Yes" on Fo	orm 990, Part IV, line 7.
1 Purpose(s) of conservation easements h	neld by the organization (check al	that apply)	
Preservation of land for public use	(e g , recreation or education)	Preservation of	an historically important land area
Protection of natural habitat		Preservation of	a certified historic structure
☐ Preservation of open space			
2 Complete lines 2a through 2d if the org	anization held a qualified conserv	ation contribution in the	form of a conservation
easement on the last day of the tax year		acion concribacion in che	Held at the End of the Year
a Total number of conservation easement	s		2a
b Total acreage restricted by conservation	easements		2b
c Number of conservation easements on a	a certified historic structure includ	ed ın (a)	2c
d Number of conservation easements inclusive structure listed in the National Register	uded in (c) acquired after 8/17/06	, and not on a historic	2d
3 Number of conservation easements more tax year ▶	dified, transferred, released, extir	guished, or terminated b	by the organization during the
4 Number of states where property subje	ct to conservation easement is loc	ated >	
5 Does the organization have a written po and enforcement of the conservation ea	olicy regarding the periodic monito		
6 Staff and volunteer hours devoted to m	onitoring, inspecting, handling of	violations, and enforcing	☐ Yes ☐ No conservation easements during the year
7 Amount of expenses incurred in monito > \$	ring, inspecting, handling of viola	ions, and enforcing cons	ervation easements during the year
8 Does each conservation easement repo and section 170(h)(4)(B)(II)?	rted on line 2(d) above satisfy the	requirements of section	170(h)(4)(B)(ı) ☐ Y es ☐ N o
9 In Part XIII, describe how the organizat balance sheet, and include, if applicable the organization's accounting for consei	e, the text of the footnote to the o		pense statement, and
	g Collections of Art, Histor answered "Yes" on Form 990		ther Similar Assets.
1a If the organization elected, as permitted art, historical treasures, or other similar provide, in Part XIII, the text of the foo	r assets held for public exhibition,	education, or research in	n furtherance of public service,
b If the organization elected, as permitted historical treasures, or other similar ass following amounts relating to these item	ets held for public exhibition, edu		
(i) Revenue included on Form 990, Part V	III, line 1		▶ \$
(ii)Assets included in Form 990, Part X			<u> </u>
If the organization received or held wor following amounts required to be report			
a Revenue included on Form 990, Part VI	, , ,	.g := 3ese .eem3	▶ \$
b Assets included in Form 990, Part X			▶ \$
For Paperwork Reduction Act Notice, see	the Instructions for Form 990	. Cat N	lo 52283D Schedule D (Form 990) 20

	Organizations Maintaining C Using the organization's acquisition, access items (check all that apply) Public exhibition Scholarly research Preservation for future generations											
a b	Public exhibition Scholarly research	sion, and other	records,	check a	any of	the fo	llowing t	hat are a	significant	use of its col	lection	
b	Scholarly research											
	_			d		Loan	or excha	ange pro	grams			
c	Preservation for future generations			е		Othe	er					
	-											
	Provide a description of the organization's Part XIII	collections and	explain h	now the	y furth	her th	e organız	ation's e	xempt purpo	ose in		
	During the year, did the organization solici assets to be sold to raise funds rather than								nılar	☐ Yes		lo
Part	Escrow and Custodial Arrange Complete if the organization and X, line 21.		" on Fori	m 990	, Part	IV, I	ine 9, or	reporte	ed an amoi		າ 990,	Part
	Is the organization an agent, trustee, custo included on Form 990, Part X?	odian or other i	ıntermedi	ary for	contril	butior	ns or othe	er assets	not	☐ Yes	✓ N	lo
Ь	If "Yes," explain the arrangement in Part X	III and comple	te the fol	llowina	table		[£	lmount		_
	Beginning balance	a comple		ig			}	1c				_
_	Additions during the year							1d				_
	Distributions during the year							1e				_
-	Ending balance						l	1f				
	Did the organization include an amount on	Form 990, Par	t X, line 2	21, for e	escrow	v or cu	ustodial a	ccount li	ability?	 ✓ Yes		— Io
b	If "Yes," explain the arrangement in Part X										✓	
Part	V Endowment Funds. Complete	If the organi	ızatıon a	nswer	ed "Y	es" o						
		(a)Curren	t year	(b) Pr	or yea	r	(c)Two ye	ears back	(d)Three ye	ars back (e)	our yea	rs back
	eginning of year balance					_						
	ontributions					_						
	et investment earnings, gains, and losses					-+						
	rants or scholarships					_						
aı	ther expenditures for facilities and programs											
	dministrative expenses					_						
g Ei	nd of year balance											
	Provide the estimated percentage of the cu	ırrent year end	balance	(line 1g	g, colu	mn (a)) held a	s				
а	Board designated or quasi-endowment >											
b	Permanent endowment >											
-	Temporarily restricted endowment ▶											
	The percentages on lines 2a, 2b, and 2c sh	•				-14						
	Are there endowment funds not in the poss organization by	session of the C	organizaci	ion that	. are n	eiu ar	ia aamini	stered ic	rune		Yes	No
	(i) unrelated organizations									3a(i)		
	(ii) related organizations									3a(ii)		
	If "Yes" on 3a(II), are the related organizat					? .				3b		
	Describe in Part XIII the intended uses of t		n's endow	vment f	unds							
Part			" on For	m 000	Dart	TV/ I	ıno 11a	Soo Eo	rm 000 Ba	ort V lung 1	Λ	
C	Complete if the organization and Description of property (a) Cost or (invest)	other basis	(b) Cost (depreciation		ook valu	e
1- 1		0				0						0
	and	0				0			0			0
	uildings	0			E 0	83,755			42,547			541,208
	easehold improvements	0				69,848	ļ		233,304			536,544

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) .

0

1,077,752

	See Form 990, Part X, line 12.				Part IV, line 11b.
	(a) Description of security or category (including name of security)		(b) Book value	(c) Method Cost or end-of-y	of valuation ear market value
L) Financial	derivatives				
?) Closely-h B)Other	neld equity interests	<u>·</u>			
.)					
)					
)					
)					
)					
)					
i)					
1)					
otal. (Columi	n (b) must equal Form 990, Part X, col (B) line 12)	•			
art VIII	Investments—Program Related. Complete if the organization answered 'Yes' on Form 9	990, Pa	art IV, lı	ne 11c. See Form 990, Pa	art X, line 13.
	<u> </u>		ok value	(c) Method	
)				COSC OF CHU-OF-Y	La. market value
2)					
;)					
I)					
5)					
)					
·)					
3)					
))					
	n (b) must equal Form 990, Part X, col (B) line 13)				
Part IX	Other Assets. Complete if the organization answered 'Yes' of	on Forr	n 990, Pa	rt IV, line 11d See Form 99	
L)	(a) Description				(b) Book value
· :)					
)					
<u>, </u>					
)					
)					
,					
)					
)					
)	mp (h) must equal Form 990. Part Y, col (R) line 15.)				
))) otal. (Colur	mn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer	red 'Ye	s' on Fo		▶ or 11f.
))) otal. (<i>Colur</i> Part X					
))) otal. <i>(Colur</i> Part X	Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25.			rm 990, Part IV, line 11e	
) ptal. (Colur Part X) Federal I	Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability			rm 990, Part IV, line 11e	
) ptal. (Colum Part X) Federal in	Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability			rm 990, Part IV, line 11e	
) ptal. (Colum Part X) Federal in	Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability			rm 990, Part IV, line 11e	
) ptal. (Column part X) Federal in)	Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability			rm 990, Part IV, line 11e	
) part X) Federal in)	Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability			rm 990, Part IV, line 11e	
part X) Federal in)	Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability			rm 990, Part IV, line 11e	
)) ptal. (Column Part X) Federal in))))	Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability			rm 990, Part IV, line 11e	
otal. (Colur	Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability			rm 990, Part IV, line 11e	
part X (Columnation (Columnati	Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability			rm 990, Part IV, line 11e	

Page 4

6,123,073

6,962,892

6.962.892

Schedule D (Form 990) 2017

2e

3

4c 5

2e e 3 3

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

Total revenue, gains, and other support per audited financial statements

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Supplemental Information

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . .

Schedule D (Form 990) 2017

Part XI

1

3 4

b

5

Part XIII

6,123,073 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b . 4a 4b b

Add lines **4a** and **4b** 4c Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 6,123,073 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1 6,962,892

2 Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities . . . 2a 2b 2c 2d Other (Describe in Part XIII) d

4a

4b

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information Return Reference Explanation

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

See Additional Data Table

Page 5			
	ormation (continued)	Part XIII Supplemental Info	
	Explanation	Return Reference	

Schedule D (Form 990) 2017

Additional Data

Software ID: 17005980

Software Version: v1.00

EIN: 41-1916337

Name: PROPEL NONPROFITS

Supplemental Information

Return Reference	Explanation
Schedule D, Part IV, Line 2b	The combined organization acts as a fiscal sponsor to emerging projects based in Minnesota , North Dakota, South Dakota, and Wisconsin that for various reasons have not established themselves as separate 501(c)(3) nonprofit organizations. These entities may be in the process of applying for 501(c)(3) status or may be short-term in nature or may be exploring whether becoming a separate nonprofit is the most appropriate long-term strategy to accomplish their mission. Propel Nonprofits accepts charitable grants and contributions on behalf of these projects. These funds are treated as contributions with donor restrictions when received by Propel Nonprofits. These funds are released from restriction as Propel Nonprofits in turn grants them to the fiscally sponsored recipients. Propel Nonprofits ultimately retains the discretion to redirect the funds to another entity if needed to accomplish the purpose of the contribution as originally restricted by its donor. Once funds have been granted to the fiscally sponsored client, the client has the option to hold and manage tho se funds on its own or enter into an arrangement with Propel Nonprofits in which Propel Nonprofits administers the funds on behalf of the client. If the client chooses to have Propel el Nonprofits administer its funds, those funds become a liability of Propel Nonprofits and are recorded as such for accounting purposes. The arrangement includes Propel Nonprofits holding the client's funds in a custodial account, providing bookkeeping and accounting services, and assisting in other administrative duties related to those funds. In this arrangement, the management of the fiscally-sponsored client directs the use of the funds. Propel Nonprofits simply executes the mechanics of the transactions.

Supplemental Information	
Return Reference	Explanation
Schedule D, Part X, Line 2	Propel Nonprofits is exempt from income taxes under section 501(c)(3) of the Internal Reve nue Service Code. It has been classified as a public charity that is not a private foundat ion under the Internal Revenue Code and charitable contributions by donors are tax deduction ble. Propel Nonprofits is also exempt from state income taxes. Propel Nonprofits evaluated its tax positions and determined that it has no uncertain tax positions.

efile GRAPHIC print -	DO NOT PROCESS	As Filed Data -					DLN	N: 934932210	11058
Schedule I (Form 990) Department of the	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. Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.							OMB No 1545-0047 2017 Open to Public Inspection	
Treasury Internal Revenue Service	► Intor	mation about Schedu	ie I (Form 990) and its	instructions is at <u>ww</u>	/w.irs.gov/form990.				
Name of the organization PROPEL NONPROFITS		Employe 41-1916							
Part I General Info	ormation on Grants	and Assistance				1			
the selection criteria u Describe in Part IV the	sed to award the grants e organization's procedu	or assistance? res for monitoring the u	se of grant funds in the U	nited States				☑ Yes	□ No
			and Domestic Governme ditional space is needed	ents. Complete If the o	rganization answered "Yes	" on Form 990, P	art IV, line	21, for any recip	ent
(a) Name and address o organization or government	f (b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Descrip noncash ass		(h) Purpose o or assistance	f grant
(1) See Additional Data									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
		-	s listed in the line 1 table				>		29
For Paperwork Reduction Act				Cat No 50055			Sche	edule I (Form 990) 2017

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

Schedule I (Form 990) 2017

(4) (5)

(6) (7)

Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. **Explanation** Grants are made to client participants in our Social Enterprise Cohort, Equity Builder Loan Program, Fiscal Sponsorship Program, and Nonprofit Infrastructure Grant Program (NIGP) In all four of these programs, clients must apply and are vetted for fit and probable success. For clients that are grantees in the Social Enterprise Cohort and Equity Builder Loan Program, the grantee must be actively participating in the program, attending required meetings and trainings, and meeting minimum programmatic and financial thresholds. Our program staff are in constant contact with the client participants and monitor their progress. Each applicant to the fiscal

Part IV Return Reference Schedule I, Part I, Line 2 sponsorship program applies and is vetted by a committee of board, staff, and community members. Once accepted as a fiscally sponsored client, most of these clients have engaged Propel Nonprofits to provide ongoing program and accounting support. Grantees of the NIGP applied to and were accepted by a committee of community representatives. For both the fiscal sponsorship program and the NIGP, grantees are constantly monitored and supported. Program activities include a wide variety of offerings, including the following support for organizational requirements during onboarding, access to no cost or discounted training, guidance on financial management, governance, and strategy, no cost or discounted consulting services, invitations to participate in peer learning, and additional technical assistance provided by Propel Nonprofits staff

Page 2

Additional Data

ANEW BAM

2355 Highway 36 West

Roseville, MN 55113

47-3224688

Software ID: 17005980
Software Version: v1.00

501c3

EIN: 41-1916337

Name: PROPEL NONPROFITS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
African American Community of Practice 10336 Grand Oaks Trail Woodbury, MN 55129	82-3212666		25,000				To build capacity of African American communities to heal from the multi- generational effects of historical trauma and ongoing structural

7,321

racism

Director for

Organizational Sustainability

Hiring an Associate

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization if applicable grant cash or assistance or government other) assistance Transform local communities by

50,000

equipping Black people with powerful economic tools and resources

To help other nonprofits

with their creative

communication needs

Association for Black Economic	81-5486146	501c3	90,171		
Power					
227 Colfax Avenue North					
Suite 230					
Minneapolis, MN 55405					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Big Dreamers United Inc

4225 Beverly Road

Madison, WI 53711

82-4582921

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization arant cash non-cash assistance or assistance or government other) assistance Break the Silence 81-2003541 94,715 To end rape culture, PO Box 17370 hold perpetrators Lot 1851 accountable, and Saint Paul, MN 55117 support survivors of sexual violence in

develop their leadership

potential

healina Charlie Academy 82-1593798 501c3 80,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

To provide leadership 6193 West Ridge Rd content via online Highland, UT 84003 Learning Management System to help students

(b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Coalition of Asian American 81-0874603 501c3 388,711 To support an effort led Leaders by local Asian American PO Box 211211 leaders in Minnesota Saint Paul, MN 55121 who are leveraging their assets to harness power to build unity, cohesion, and common agendas to

community clinics in the Twin Cities metro area

advance equity in the State Community Health Fund 82-0728457 37,984 5810 42nd Ave N

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of

To build capacity for its member clinics to serve Robbinsdale, MN 55422 their individual communities while creating a unified voice for the work of

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) Creative Enterprise Zone 81-0874603 501c3 5,165 To help support a 2314 University Ave W recognized center of STE 28 creativity and Saint Paul, MN 55114 enterprise, a place where people make a living by their creative capacities Cultural Diversity Resources 41-1896836 501c3 5,209 To improve internal 112 N University Dr organizational structure STE 306 by developing the Fargo, ND 58102 financial and database management systems with updated technology, to create and provide professional training on new financial and database systems, to add one staff to

assist with training and skills development, and to increase capacity to serve more in the community

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization ıf applıcable grant cash or assistance or government other) assistance Deer River Area Health Care 41-1770765 501c3 10.000 Social enterprise grant Foundation 1057 Comstock Drive Deer River, MN 56636 Dream of Wild Health 41-1632662 501c3 5.431 For infrastructure 1308 Franklin Ave development and to Suite 203 focus on financial systems, internal

communications technology, training and

support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Minneapolis, MN 55404

if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Family Values for Life 41-2006889 501c3 11,721 To support leadership

(f) Method of valuation

(g) Description of

(h) Purpose of grant

Loan forgiveness

through Equity Builder Loan Program

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501c3

(c) IRC section

1280 Arcade Street				personnel and financial
Saint Paul, MN 55106				process improvement so
				that on the other side of
				this transition period we
				are better equipped for
				sustained, high-quality
				service to families

6,667

FilmNorth

STE 120

550 Vandalia ST

Saint Paul, MN 55114

(a) Name and address of

(b) EIN

41-1594894

organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) 81-2134614 501c3 25.200 Fortune Relief and Youth To provide a continuum of care that includes **Empowerment Organization** 2010 Pill-1---- 4--- C Lateral Control of the Control of th

(f) Method of valuation

(g) Description of

(h) Purpose of grant

games as a culture,

career, and creative

practice

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

Suite 200

Minneapolis, MN 55454

(b) EIN

	the social and structures that poverty
--	--

47-4123991 28,281 To promote the GLITCH 1829 Riverside Avenue exploration of digital

organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Hispanic Advocacy and 41-1900934 501c3 10,908 To increase the capacity Community Empowerment of the organization by through Research - HACER hiring an administrative 2314 University Ave W and financial associate Suite 20 to develop a financial Saint Paul, MN 55114 system, increasing number of partnerships

(f) Method of valuation

(g) Description of

(h) Purpose of grant

and fewer greenhouse gas emissions

with other organizations, diversifying sources of income and updating the organization's

HOURCAR 81-4740695 501c3 286,691

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

(b) EIN

technology To support a great tool 1754 University Avenue West to minimize car travel,

Saint Paul, MN 55104 resulting in cleaner air

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Illusion Theatre 23-7392140 501c3 6.667 Loan forgiveness through Equity Builder

through Equity Builder

Loan Program

528 Hennepin Ave
Suite 704
Minneapolis, MN 55403

In the Heart of the Beast 41-1251313 501c3 6,667

through Equity Bit Character State of the Beast 41-1251313 501c3 6,667

Loan forgiveness

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Puppet Theatre

1500 E Lake ST

Minneapolis, MN 55407

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Intermedia Arts of Minnesota 41-1226945 501c3 120.934 To build understanding

Social enterprise grant

Intermedia Arts of Minnesota 41-1226945 501c3 120,934 To build understanding among people through Arts of Minneapolis, MN 55408

10,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501c3

Itasca County Television

819 NE 4th Street Grand Rapids, MN 55744 36-4209055

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance Itasca Life Options 41-0907640 501c3 10.000 Social enterprise grant

and county) grants

PO Box 20 Grand Rapids, MN 55744 Mentoring Young Adults - MYA 80-0298183 501c3 12,800

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

For infrastructure 550 Rice Street lassistance to compete Saint Paul, MN 55113 for government (city

organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Mewinzha Ondaadiziike 46-2523191 501c3 8,207 To hire our Anishinaabe Wilgaming Doula trainer to train 1819 Bemidji Avenue N local community Suite 3 members to become Bemidji, MN 56601 certified Doula's to expand our workforce development to support, educate and reclaim traditional birthing practices In addition, to help develop our

(f) Method of valuation

(g) Description of

(h) Purpose of grant

committed to a mission that promotes economic participation and educational freedom

financial, education and clinic systems

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

Minnesota Harvest Initiative 82-0930472 55,000 To support a coalition of African American 1300 Yale Place STE 229 business owners and professionals who are

Minneapolis, MN 55403

(a) Name and address of

(b) EIN

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) Minnesota Host Home Network 47-4977811 41,038 To support a network 3748 Bryant Ave S that catalyzes system Minneapolis, MN 55409 change for youth facing homelessness by championing lasting relationships with the caring adults already in their lives who are not their service providers 80,438 Minnesota Indian Business 81-5041824 To align partners committed to the growth and success of Native American businesses and

entrepreneurs, connects Native American businesses, entrepreneurs and resource providers in innovative and practically useful ways, and transforms Native American communities

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Alliance PO Box 1902 Detroit Lakes, MN 56502

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Mu Performing Arts 41-1727881 501c3 10.000 Loan forgiveness 755 Prior Ave N through Equity Builder

Business Development

Suite 107 Loan Program Saint Paul, MN 55104 North American Traditional 82-0613944 501c3 22,563

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Accelerating Food Indigenous Food Systems Access through 3626 Garfield Avenue Indigenous Culinary Education and Small Minneapolis, MN 55409

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance or government other) assistance Northwest Hennepin Early 82-2974713 12,000 Improving the impact of Childhood Network early childhood 17749 62nd Ave N education services Maple Grove, MN 55311 provided by member organizations to member cities and their residents Partnerships for Permanance 36-4861270 40.000 To support foster care 4725 17th Ave S alumni and adoptees to Minneapolis, MN 55407

raise awareness and actively work to improve the child welfare system

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization ıf applıcable grant cash or assistance or government other) assistance Penumbra Theatre 41-1563764 501c3 6.667 Loan forgiveness through Equity Builder 270 N Kent Street Saint Paul, MN 55102 Loan Program Ouality Education Services of 46-4014810 501c3 368,309 To engage community elders to build mutuallybeneficial relationships 1731 Louise Avenue Saint Paul, MN 55106 that foster the social-

emotional and academic skills and abilities children need for success

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Reviving the Islamic 81-1236990 337.927 To support a mission to Sisterhood for Empowerment amplify the voice and 1007 West Broadway Ave N power of Muslim Minneapolis, MN 55411 women Saluting Branches 37-1834210 501c3 9.000 To honor American 11571 K Tel Dr service men and women Minnetonka, MN 55343 by organizing volunteer tree and landscape care

for the property dedicated to our veterans

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 31-1668255 501c3 10.409 Somali Community To increase capacity

program

through hiring culturally Resettlement Services 201 S Lyndale Ave Faribault, MN 55021

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Saint Paul, MN 55119

competent staff St Paul Youth Services 41-1316444 501c3 10.000 Mini-grant for brand 2100 Wilson Ave development of new

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance The Works 41-1570750 501c3 6.667 Loan forgiveness through Equity Builder

9740 Grand Ave S
Bloomington, MN 55420

Ujamaa Place 27-1216065 501c3 10,000

Social enterprise grant 1821 University Ave

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Suite N257

Saint Paul, MN 55104

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of **(b)** EIN (c) IRC section (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 82-1991646 15.429 Young Muslim Collective To aid Muslim vouth 351 Naegele Ave who are subjected to Minneapolis, MN 55421 racism and faith-based hate by promoting arts, healing, activism, outreach, and advocacy

Schedule J (Form 990) 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. Department of the Treasury Internal Revenue Service Name of the organization Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Pattach to Form 990, Part IV, line 23. Pattach to Form 990, and its instructions is at Www.irs.gov/form990. Employer identification numbers	Public cion
For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Compensated Employees Compensated Employees Attach to Form 990, Part IV, line 23. Attach to Form 990. Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification numbers.	Public cion er
Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990. Attach to Form 990. Form 990 and its instructions is at www.irs.gov/form990. Employer identification numbers of the organization Attach to Form 990. Open to Inspection 1.1. Employer identification numbers of the organization Attach to Form 990. Department of the Treasury in Inspection 1.1. Department of the Treasury in Inspection 1.1. Employer identification numbers of the Open to Inspection 1.1. Attach to Form 990. Inspection 1.1. Attach to Form 990. Inspection 1.1. Department of the Treasury in Inspection 1.1. Inspection 1.1.	Public cion er
Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990. Attach to Form 990. Form 990 and its instructions is at www.irs.gov/form990. Employer identification numbers of the organization Attach to Form 990. Open to Inspection 1.1. Employer identification numbers of the organization Attach to Form 990. Department of the Treasury in Inspection 1.1. Department of the Treasury in Inspection 1.1. Employer identification numbers of the Open to Inspection 1.1. Attach to Form 990. Inspection 1.1. Attach to Form 990. Inspection 1.1. Department of the Treasury in Inspection 1.1. Inspection 1.1.	Public cion er
Internal Revenue Service www.irs.gov/form990. Inspector Name of the organization Employer identification numbers	er
Name of the organization Employer identification number	er
	s No
PROPEL NONPROFITS 41-1916337	s No
Part I Questions Regarding Compensation	s No
Ye	
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 idemnification and gross-up payments ☐ Health or social club dues or initiation fees	
☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)	
b If any of the boxes in 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	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2	
directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	
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 ☐ Compensation survey or study	
Form 990 of other organizations 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	
a Receive a severance payment or change-of-control payment? 4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b	No
c Participate in, or receive payment from, an equity-based compensation arrangement? 4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	
Only 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	
a The organization?	No
b Any related organization?	No
If "Yes," on line 5a or 5b, describe in Part III	
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	
a The organization?	No
b Any related organization?	No
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 in lines 5 and 6? If "Yes," describe in Part III 7	No
Were any amounts reported on Form 990, Part VII, paid or accured 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	
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section	No
53 4958-6(c)? For Panerwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50053T Schedule 1 (Form 990).	0) 2015

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

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

Note. The sum of colu	mns (B)(ı)-(ııı) for each listed in	dividual must equal the to	tal amount of Form 990,	Part VII, Section A, line :	1a, applicable column (D)	and (E) amounts for tha	t individual
(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation (i) Base (ii) Bonus & incentive (iii) Other			(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported
		compensation	compensation	reportable compensation	compensation	26.16.11.5	(=)(1) (=)	as deferred on prior Form 990
Kate Barr President and CEO	(i)	168,556	15,000	0	9,335	21,476	214,367	0
	(ii)	0	0	0	0	0	0	0
2 Jean Adams Board Member	(i)	0	0	0	0	0	0	0
	(ii)	253,307	0	0	20,592	24,692	298,591	0
	•						Schedule	J (Form 990) 2017

Schedule J (Form 990) 2017	Page 3			
Part III Supplemental Inform	Part III Supplemental Information			
Provide the information, explanation, or	rovide 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			
Return Reference	Explanation			

Isince that time

consultant, considers salaries of CEOs in peer organizations with comparable experience, consults survey data of nonprofit executives, and reviews the history of the president and CEO's compensation. The president and CEO's salary was last reviewed in Fall 2017. No changes to the president and CEO's salary have occurred

Schedule J (Form 990) 2017

efile GRAPHIC print - DO NOT PROCESS			As Filed Data -		DLN:	93493221011058
SCHEDULE O (Form 990 or 990- EZ) Department of the Treasury		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. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.		2017 Open to Public Inspection		
Internal Revenue Service Name of the organization PROPEL NONPROFITS					Employer ident 41-1916337	ification number
990 Schedule	e O, Supp	olemental Information	n 			1
Return Reference				Explanation		
Form 990, Part I, Line 1	ies and w cial health guidance, ustainabil ans, strate	orking capital We train nor n, clear strategy, and strong and insight for nonprofits ity We consult and guide c egic alliances, and governa ms review We provide fisc	nprofit staff and board g governance practice about governance, pla on strategy, organizati ince We offer nonpro	loans to nonprofits for facilit is to understand and build finan is We provide expert knowledge inning, financial strategy and s onal structure and financial pl fit accounting services and finan ipport for emerging organization	· L	

Return Reference	Explanation
Form 990, Part I, Line 8	Propel Nonprofits regularly receives large, multi-year grants that appear as significant c hanges in contributions and grants from one year to the next. Because some of these grants have donor restrictions that limit their use to certain programs or to certain periods of time, these large, multi-year grants may also cause the total revenue less expenses or ne t income to appear negative one year, then positive the next, and back and forth. In FY201 8, our total change in net assets is a negative \$839,819, but our change in net assets without donor restriction (the more accurate measure of a nonprofit's annual operating result s, is a positive \$1.35 million. For a more complete picture of Propel Nonprofits' operatin g activity, please see our annual audited financial statements as made available at our we bsite, www propelnonprofits org.

D - 4....

Reference	Explanation
Form 990, Part I, Line 19	Propel Nonprofits regularly receives large, multi-year grants that appear as significant c hanges in contributions and grants from one year to the next Because some of these grants have donor restrictions that limit their use to certain programs or to certain periods of
	time, these large, multi-year grants may also cause the total revenue less expenses or ne t income to appear negative one year, then positive the next, and back and forth. In FY201

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t income to appear negative one year, then positive the next, and back and forth. In FY201 8, our total change in net assets is a negative \$839,819, but our change in net assets wit hout donor restriction (the more accurate measure of a nonprofit's annual operating result s, is a positive \$1.35 million. For a more complete picture of Propel Nonprofits' operatin g activity, please see our annual audited financial statements as made available at our we baite, www propelnonprofits org.

Return Explanation

	Propel Nonprofits issues its own audited financial statements. Though operating wholly ind ependently, Propel Nonprofits is a technically a subsidiary organization of The Minneapoli
12a	s Foundation The Minneapolis Foundation approves a bare majority of the slate of board me
	mbers of Propel Nonprofits Because of this structure, The Minneapolis Foundation consolid
	ates Propel Nonprofits' financials in its audited financial statements

Return Explanation

Form 990,
Part VI,
Section A,
Line 2

Kate Barr, president and CEO of Propel Nonprofits, is a board member of Borealis Philanthr
opy, a nonprofit philanthropic intermediary organization whose CEO, Magui Rubalcava Shulma
n, is a board member of Propel Nonprofits

Return Explanation
Reference

Line 7a

Form 990,
Part VI,
Section A,

Board members of Propel Nonprofits are recruited and selected by the board of Propel Nonprofits In an arrangement that represents it historical origins and its current corporate s
tructure as a subsidiary, a bare majority of the Propel Nonprofits board members are prese

nted to and formally elected by the Board of Trustees of The Minneapolis Foundation

Return

Reference	Едриникон
Form 990,	Given that Propel Nonprofits is a subsidiary organization of The Minneapolis Foundation, a
Part VI,	nd according to the bylaws of the Propel Nonprofits, the Board of Trustees of The Minneapo
Section A,	lis Foundation may at any time remove a director of the board of Propel Nonprofits that Th
Line 7b	e Minneapolis Foundation has also elected to The Minneapolis Foundation Board. The Board o
	f Trustees of The Minneapolis Foundation may also appoint a director to fill any vacancy o
	f a Propel Nonprofits board member formally elected by The Minneapolis Foundation in the e
	vent of a vacancy caused by death, resignation, or removal

Explanation

990 Schedule O, Supplemental Information

Return Explanation

Reference

Form 990,	The audited financial statements, on which the Form 990 is based, are presented to the Fin
Part VI,	ance Committee in June by the auditors. The 990 is prepared by the Vice President of Finan
Section B,	ce and CFO based on the audited financial statements The 990 is then reviewed by the Fina
Line 11b	nce Committee and President and CEO The 990 is distributed to the board of directors befo
	re it is filed by its August deadline

Return
Reference

Propel Nonprofits' conflict of interest policy is reviewed annually by all employees and b

Form 990,
Part VI,
Section B,
Line 12c
Line 12c
Set in dwhen a relevant duality of interest arises, the employee or board member disclose est verbally and is recused from any decision making role related to the dual interest.

990 Schedule O, Supplemental Information

ccurred since that time

Part VI.

Line 15

Return Explanation Reference Form 990. The executive committee of the Propel Nonprofits' board of directors is responsible for re viewing annually the performance and salary of the president and CEO Based on the review, Section B.

the committee determines compensation for the president and CEO. In its salary determinat ion, the committee engages an HR compensation consultant, considers salaries of CEOs in pe er organizations with comparable experience, consults survey data of nonprofit executives. and reviews the history of the president and CEO's compensation. The president and CEO's salary was last reviewed in Fall 2017 No changes to the president and CEO's salary have o

Return Explanation

Form 990,
Part VI,
Section C,
Line 19
Fropel Nonprofits makes its governing documents and conflict of interest policy available to anyone upon request Propel Nonprofits governing documents include its articles of inco rporation, bylaws, and IRS Form 1023 Propel Nonprofits financial statements, annual repor ts, and quarterly investor reports are available to the public via its website Propel Non profits financial statements include its audited financial statements, single audit (when required), and IRS Form 990 including schedules and attachments

Return Explanation Reference

Form 990. Jean Adams, Senior Vice President, Strategy and Chief Operating Officer of The Minneapolis Foundation, serves on the Propel Nonprofits board of directors, Because Propel Nonprofits Part VII. Section A. is a subsidiary of The Minneapolis Foundation, Ms. Adams' compensation by The Minneapolis

Line 1a Foundation is listed here as that of a related organization

Return Reference	Explanation
1	While Propel Nonprofits did not change its method of accounting and maintains its books on an accrual basis, it did choose to become an early adopter of FASB Accounting Standards U pdate 2016-14 Presentation of Financial Statements of Not-for-Profit Entities This change in accounting standards affects the audited financial statements of Propel Nonprofits, bu t does not affect the preparation or presentation of this IRS Form 990 Visit our website at www propelnonprofits org to see our FY2018 audited financial statements using the new F ASB standards

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493221011058 OMB No 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships** 2017 (Form 990) ► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** PROPEL NONPROFITS 41-1916337 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I **(b)** Primary activity (c) Legal domicile (state **(f)** Direct controlling (a)
Name, address, and EIN (if applicable) of disregarded entity (d) (e) End-of-year assets Total income or foreign country) entity

Part II Identification of Related Tax-Exempt Organization related tax-exempt organizations during the tax year.	s Comple	te if the orgar	nization	answered "	Yes" on F	orm 990,	Part I\	/, line 34 be	cause	it had one or	more	
(a) Name, address, and EIN of related organization	(b) Primary activity		(c) Legal domicile (state or foreign country)					(e) charity status on 501(c)(3))	(f) Direct controlling entity		Section (13) cor ent	512(b) ntrolled
(1)The Minneapolis Foundation	District the second		MN		501(c)(3)		17				Yes	No No
80 South 8th Street IDS Center 800 Minneapolis, MN 55402 41-6029402	Philanthropy		1111		301(0)(3)				N/A			NO

(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income				amount in box 20 of Schedule K-1 (Form 1065)		ging ov	(k) Percentag ownershi
								Yes	No		Yes	No	
Identification of Related Organizates because it had one or more related o						ation answ	ered "Yes	" on Fo	orm 99	90, Part IV,	line 3	34	
(a) Name, address, and EIN of related organization	(b) Primary activity	L do	(c) egal micile or foreign	Direct	(d) controlling Type entity (C co	(e) e of entity rp, S corp, r trust)	(f) Share of total Income		(g) of end-o year assets	of- Percei owne	ntage	Secti (13)	(ı) ion 5 cont entity
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			untry)										 - - -

Part V Transactions With Related Organizations Complete if the organization answered "Yes"	on Form 990. Par	t IV. line 34, 35h	. or 36.			<u> </u>
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		(11, 1110 0 1, 000			Yes	No
During the tax year, did the organization engage in any of the following transactions with one or more related or	rganizations listed in	Parte II-IV2		$\overline{}$		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	-			1a	-	No
b Gift, grant, or capital contribution to related organization(s)				1b	-	No
				\vdash	Yes	
c Gift, grant, or capital contribution from related organization(s)				1d	163	No
d Loans or loan guarantees to or for related organization(s)				\vdash	Yes	
e Loans or loan guarantees by related organization(s)				1	163	
6. Dondon do Gran malabad anacomatan (a)				1f		No
f Dividends from related organization(s)				\vdash	-	
g Sale of assets to related organization(s)				1g 1h	\dashv	No
h Purchase of assets from related organization(s)				1i		No
i Exchange of assets with related organization(s)				\perp		
j Lease of facilities, equipment, or other assets to related organization(s)				1j	_	No
				<u> </u>		
k Lease of facilities, equipment, or other assets from related organization(s)				1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)				11		No
m Performance of services or membership or fundraising solicitations by related organization(s)				1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No_
o Sharing of paid employees with related organization(s)				10		No_
p Reimbursement paid to related organization(s) for expenses				<u></u>	Yes	
q Reimbursement paid by related organization(s) for expenses				1q		No
r Other transfer of cash or property to related organization(s)				1r		No
s Other transfer of cash or property from related organization(s)				1s		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line	e, including covered r	elationships and tra	nsaction thresholds			
(a) Name of related organization	(b) Transaction	(c) Amount involved	(d) Method of determining am	ount inv	olved	
-	type (a-s)					
(1)The Minneapolis Foundation	С	165,500	Propel Nonprofits received three g \$130,000 for program services an			ants
			totaling \$35,500 for the fiscal spo The Minneapolis Foundation in FY2	nsorship	fund t	from
			service grants included \$50,000 fo	or merge	er-rela	ted
			expenses, \$50,000 to support workschools, and \$30,000 to support to			•
			Comeback initiative The grants for supported the work of two fiscally			
			Reviving the Islamic Sisterhood of	Empow	ermen	it .
			(RISE) and the Coalition of Asian (CAAL)	Americai	n Lead	ers
(2)The Minneapolis Foundation	е	1,000,000	During FY2018, Propel Nonprofits a program-related investment from			
			Foundation Propel Nonprofits enti-	ered into	o a nev	v
			program-related investment of \$1 to charter schools Propel Nonprof			
			line of credit with The Minneapolis			
			credit during FY2018	araw on	tilis ili	ie oi
(3)The Minneapolis Foundation	р	12,690	For efficiency of scale, Propel Non business liability and workers com			
			in conjunction with The Minneapol	is Found	dation	This
			amount represents Propel Nonpro share of the premiums for these i			ate
	1	I	1			

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	section 501(c)(3) organizations?		Are all partners section 501(c)(3) organizations?		(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	(h) Disproprtionate allocations? Code V-l amount in 20 of Sched K-1 (Form 10		partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No			
													_		
	•		•			•				Schedul	e R (Forn	າ 99	0) 2017		

Schedule R (Form 990) 2017 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2017