

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public.

2018

Department of the Treasury

Open to Public

* Contraction of the last	No.	enue Service	■ Go to	www.irs.gov/Form990 for i	nstructions and t	the latest infor	mation.	ra a sk	Inspection		
wine.			dar year, or tax year be		04-01	, 2018, and e	nding	03-3	1 ,2019		
		f applicable:	C Name of organization Amo	erican Civil Libert	ies Union o	f Massachu	setts	D	Employer identification no.		
		change	Doing business as						4-1180450		
H	Name ch	hange	Number and street (or P.O.	box if mail is not delivered to street ac	ddress)	be the state of th	Room/suite		Telephone number		
	Initial ret		211 Congress			1 y	301		517) 482-3170		
H	Final reti	urn/terminated	City or town, state or provin	ice, country, and ZIP or foreign postal	code	C settle in the	Control Solve		Gross receipts		
H .	Amende	d return	Boston, MA 02	110	Wen in segment the		in hermany		3,361,323		
	Applicati	ion pending	F Name and address of princ	ipal officer:			H(a) Is this a group	The second second second			
							H(b) Are all subo		7 7		
		mpt status:	501(c)(3) X 501(c) (4) 4 (insert no.) 4947(a	a)(1) or 527	- 700 G			(see instructions)		
61		: N/A				F TOTAL IT TO	H(c) Group exe				
protessance	THE RESIDENCE AND ADDRESS OF THE PERSON NAMED IN		The second secon	ssociation Other	L Yes	ar of formation: 1		of legal dor			
Pa	rt I	Summar									
	1			ssion or most significant activi		f MA was e	stablished	to de	fend freedoms		
9		guarante	ed in the consti	tution and bill of	rights thro	ugh publi	c education	and 1	legislation		
an						Same repliet			steel to restate the		
ern	1		The state of the s				-				
Activities & Governance	2	Check this bo	ox 🕨 🔲 if the organizati	on discontinued its operations	s or disposed of m	ore than 25% of	of its net assets.				
త	3	Number of vo	oting members of the government	erning body (Part VI, line 1a)				3	20		
es	4	Number of in	dependent voting memb	ers of the governing body (Pa	rt VI, line 1b) .			4	28		
Ν	5	Total number	of individuals employed	in calendar year 2018 (Part V	/, line 2a)			5	28		
Acti	6	Total number	of volunteers (estimate				the second secon	6	0		
1	7a	Total unrelate	ed business revenue from	n Part VIII, column (C), line 12	2			7a			
	b	Net unrelated	d business taxable incom	e from Form 990-T, line 38				7b	0		
					And the second s	T	Prior Year		Current Year		
	8	Contributions	and grants (Part VIII, lin	e 1h)				,328			
Revenue	9	Program serv	vice revenue (Part VIII, lin	ne 2g)			2,486		212,552		
Ver	10	Investment in	come (Part VIII, column			666	3,042,148				
8	11	Other revenue	e (Part VIII, column (A),	lines 5, 6d, 8c, 9c, 10c, and 1	1e)		- 55	106,267			
	12	Total revenue	- add lines 8 through 11	(must equal Part VIII, column	(A), line 12)		2 000	002	356		
	13	Grants and si	milar amounts paid (Par		2,909	,092	3,361,323				
	14	Benefits paid	to or for members (Part	IX, column (A), line 4)			0				
S	15	Salaries, othe	er compensation, employ	ee benefits (Part IX, column (A), lines 5-10)		355	470.014			
Expenses	16a	Professional f	fundraising fees (Part IX,	column (A), line 11e)			333	470,014			
per	b	Total fundrais	ing expenses (Part IX, co	olumn (D), line 25)		0			0		
Ĕ			es (Part IX, column (A),			-	270	010			
				t equal Part IX, column (A), lii			370,	-	281,615		
	19	Revenue less	expenses. Subtract line	18 from line 12			726,		751,629		
Ces			The state of the s				2,182,		2,609,694		
alan	20	Total assets (I	Part X, line 16)				eginning of Current		End of Year		
AS	21	Total liabilities	(Part X, line 26)	· · · · · · · · · · · · · · · · · · ·			4,879,		7,434,567		
Net Assets or Fund Balances	22	Net assets or	fund balances. Subtract	line 2) from line 20			192,		132,518		
Par		Signatur					4,686,		7,302,049		
Under	penaltie	es of perjury, I decla	are that I have examined this ret	urn, including accompanying schedule	es and statements, and	to the best of my ki	nowledge and belief it	is			
ii ue, c	orrect, a	ind complete. Deci	aration of preparer (other than e	flicer) is based on all information of wh	nich preparer has any k	nowledge.					
			whil				7	12	15/19		
Sign		Signature	of officer				- 	Date	19/1		
lere		Carol	Rose, Executive	Director				Duto			
			int name and title								
		Print/Type prepa	arer's name	Preparer's signature	Date		Check X				
Paid		Melissa	Gilroy	Melissa Gilroy		15-2010	2000	if PTIN	110.00000		
	arer	Firm's name Melissa Gilrov CPA						19 self-employed P01069			
Jse	Only	Firm's address						THE REAL PROPERTY.			
	1000			MA 02090		1	Phone no.				
lay th	e IRS	discuss this re	eturn with the preparer st	nown above? (see instructions	s)		78:	L-696-	4019		
-	- Allerton Standards	The second secon						a 12 12 2 2	. I I VOC IVI NO		

990

Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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OMB No. 1545-0047 2018

Open to Public Inspection

<u>A</u>	For the	2018 calend	dar year, or tax year begi	nning	04-01	, 2018, and en	nding	03-	31 , 2019
В	Check if a	applicable:	C Name of organization Ame	rican Civil Libertie	s Union o	f Massachu	setts	D	Employer identification no.
	Address	change	Doing business as						0450
	Name ch	ange	Number and street (or P.O. b	ox if mail is not delivered to street addre	ss)		Room/suite	E	Telephone number
	Initial retu	ırn	211 Congress S	treet			301		(617)482-3170
	Final retu	rn/terminated	City or town, state or province	e, country, and ZIP or foreign postal code	9			G	Gross receipts
	Amended	d return	Boston, MA 021	10					\$ 3,361,323
	Application	on pending	F Name and address of princip				H(a) Is this a group	return for s	
							H(b) Are all subo	rdinates i	ncluded? Yes No
$\overline{}$	Tax-exem	npt status:	501(c)(3) X 501(c) (4) 4 (insert no.) 4947(a)(1)	or 527				ist. (see instructions)
	Website:	► N/A	.,,,	· · · · · · · · · · · · · · · · · · ·			H(c) Group exe		
ĸ	Form of o	organization: X	Corporation Trust As	sociation Other	L Ye	ear of formation: 1	973 M State	of legal of	domicile: MA
Pa	art I	Summar			•		•		
	1	Briefly descr	ribe the organization's miss	sion or most significant activitie	s: ACLU c	of MA was e	stablished	to d	lefend freedoms
4		-	•	cution and bill of r					
nce									
rna		_							
Governance	2	Check this b	oox 🕨 🗌 if the organizatio	n discontinued its operations o	r disposed of r	more than 25% o	of its net assets.		
Ŏ	3	Number of v	oting members of the gove	erning body (Part VI, line 1a)				3	28
Activities &	4	Number of in	ndependent voting membe	rs of the governing body (Part	VI, line 1b)			4	28
itie	5		· ·	n calendar year 2018 (Part V, I				5	0
ફ	6	Total numbe	er of volunteers (estimate if	necessary)	. .			6	·
ĕ	7a		,	Part VIII, column (C), line 12				7a	0
	b							7b	0
				,			Prior Year		Current Year
	8	Contribution	s and grants (Part VIII. line	e 1h)				,328	212,552
ě	9			e 2g)		_	2,486		3,042,148
en	10			A), lines 3, 4, and 7d)				,666	106,267
Revenue	11		,	nes 5, 6d, 8c, 9c, 10c, and 11e		_		,000	356
	12			(must equal Part VIII, column (2,909	092	3,361,323
	13			IX, column (A), lines 1-3)			2,303	,092	0,301,323
	14		• •	X, column (A), line 4)		<u> </u>			0
	15			ee benefits (Part IX, column (A)			255	,364	470,014
es	162	· ·		column (A), line 11e)	,	-	355	, 304	470,014
ens	h		ising expenses (Part IX, co						0
Expenses	17		ises (Part IX, column (A), I	• • • • • • • • • • • • • • • • • • • •			370	,913	281,615
	18	•	, , ,	t equal Part IX, column (A), line		H		,277	751,629
	19	•	,	18 from line 12	•	—	2,182		2,609,694
_		TOVOITGO 100	oo expenses. Cabiraet iine	10 110111 11110 12			Beginning of Current		End of Year
ts o	<u><u> </u></u>	Total assets	(Part X, line 16)			 ˈ	4,879		7,434,567
Ąsse	E 21		` ·					,541	132,518
Net Assets or	22		,	line 21 from line 20			4,686		7,302,049
	art II		re Block	IIIIC Z1 IIOIII IIIIC Z0			4,000	, 400	7,302,049
				urn, including accompanying schedules	and statements, a	and to the best of my l	knowledge and belief,	it is	
true	, correct,	and complete. De	eclaration of preparer (other than o	fficer) is based on all information of which	ch preparer has an	y knowledge.			
		Caro	ol Rose						
Sig	ın		re of officer					Date	
He				Director					
	. •		ol Rose, Executive print name and title	Director					
			•	Proporaria aignotura	l D:	ate	Check X	if P1	 FIN
Pai	id		eparer's name	Preparer's signature				- 1	
	eparei		A Gilroy Melissa	Melissa Gilroy	μ2	2-05-2019	self-employe	eu	P01069703
	e Only		псттрри	Gilroy CPA			Firm's EIN		
U 3	C OIII	Firm's addres		nacre Rd			Phone no.	.1	6 4010
N40:	the ID	S discuss this		d MA 02090	١		•		6-4019 · · · ☐ Yes
ivial	ี แเษ เหง	ว นเรษนรร เกเร	return with the preparer s	hown above? (see instructions	,				· · · ∐ Yes ⊠ No

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A · · · · · · · · · · · · · · · · · ·	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? • • • • • • • • • • • • • • • • • • •	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I · · · · · · · · · · · · · · · · · ·	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V · · · · · · · · · · · · · · · · · ·	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	44.	37	
		11a	X	
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С		110		
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	110		21
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е		11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a				
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States? • • • • • • • • • • • • • • • • • • •	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
_	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
•-	If "Yes," complete Schedule G, Part III	19		X
20 a		20a		X
) 24	, , , , , , , , , , , , , , , , , , , ,	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	24		37
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

	(**************************************		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		162	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1 · · · · · · · · · · · · · · · · · ·	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O.	38	X	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			Ш.
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	16	l v	ı

18) American Civil Liberties Union of Massachusetts
Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			Yes	No						
2a En	nter the number of employees reported on Form W-3, Transmittal of Wage and Tax									
Sta	atements, filed for the calendar year ending with or within the year covered by this return • • • • • • 2a 0									
b If a	at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х							
No	ote. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)									
3a Die	d the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X						
b If "	'Yes," has it filed a Form 990-T for this year? If "No" 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 f	inancial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X						
b If "	'Yes," enter the name of the foreign country:									
Se	ee instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).									
5a Wa	as the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X						
b Die	d any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X						
c If "	'Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c								
6a Do	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the									
org	ganization solicit any contributions that were not tax deductible as charitable contributions?	6a		X						
	'Yes," did the organization include with every solicitation an express statement that such contributions or									
gif	its were not tax deductible? • • • • • • • • • • • • • • • • • • •	6b								
7 Or	ganizations that may receive deductible contributions under section 170(c).									
a Die	d the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods									
	d services provided to the payor?	7a		X						
b If "	'Yes," did the organization notify the donor of the value of the goods or services provided?	7b								
	d the organization sell, exchange, or otherwise dispose of tangible personal property for which it was									
	quired to file Form 8282? • • • • • • • • • • • • • • • • • • •	7c		X						
d If "	'Yes," indicate the number of Forms 8282 filed during the year · · · · · · · · · · · · · · · · · · ·									
e Die	d the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X						
f Die	d the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X						
g If t	the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X						
	he organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X						
	ponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the									
	onsoring organization have excess business holdings at any time during the year?	8								
	ponsoring organizations maintaining donor advised funds.									
	d the sponsoring organization make any taxable distributions under section 4966?	9a								
	d the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b								
	ection 501(c)(7) organizations. Enter:									
	tiation fees and capital contributions included on Part VIII, line 12									
	ross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b									
	ection 501(c)(12) organizations. Enter:									
	ross income from members or shareholders									
	ross income from other sources (Do not net amounts due or paid to other sources									
	painst amounts due or received from them.)	10-								
	ection 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
	'Yes," enter the amount of tax-exempt interest received or accrued during the year · · · · · · · · 12b ection 501(c)(29) qualified nonprofit health insurance issuers.									
	the organization licensed to issue qualified health plans in more than one state?	13a								
	the organization licensed to issue qualified fleatin plans in hidre than one state?	ısa								
	nter the amount of reserves the organization is required to maintain by the states in which									
	e organization is licensed to issue qualified health plans									
	nter the amount of reserves on hand									
	d the organization receive any payments for indoor tanning services during the tax year?	14a		X						
	Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14b		- 21						
	the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or									
	cess parachute payment(s) during the year	15		Х						
	'Yes," see instructions and file Form 4720, Schedule N.									
	the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X						
	the organization an educational institution subject to the section 4900 excise tax on her investment income?									

Part VI

8) American Civil Liberties Union of Massachusetts 0450
Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

	Charle if School III O contains a response or note to any line in this Bort VI			₽
800	Check if Schedule O contains a response or note to any line in this Part VI			• <u>X</u>
Sec	tion A. Governing Body and Management			
4.	Entertier and the Conference of the Conference o		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			3.5
_	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body? • • • • • • • • • • • • • • • • • • •	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	X	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? • • •	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Χ	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Χ	
	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		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed Massachusetts			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	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 interest policy, and			
-	financial statements available to the public during the tax year.			
20	State the name address and telephone number of the person who personed the organization's backs and records:			

Shirley Lai (617)482-3170, 211 Congress Street, Boston, MA 02110

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American Civil Liberties Union of Massachusetts

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Page 7

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

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

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

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

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

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

		(C)								
(A)	(B)	Position						(D)	(E)	(F)
Name and Title	Average	(do not check more than one				Reportable	Reportable	Estimated		
Name and This	hours per		box, unless person is both an officer and a director/trustee)				compensation	compensation from	amount of	
	week (list any						from	related	other	
	hours for related	Inc or	sul	Оf	Ke	en Hi	Fo	the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations	direc	stituti	Officer	y en	ghes	Forme	(W-2/1099-MISC)	,	organization
	below dotted line)	ual tr	onal		Key employee	t cor	ı i			and related organizations
	,	Individual trustee or director	Institutional trustee		ее	npen				3
		Φ	lee			Highest compensated employee				
						۵				
(1) JB Kittredge	1.00									
President		Х		Х				0	0	0
(2) Daryl Wiesen	1.00									
Clerk		X		Х				0	0	0
(3) Maria Manning	1.00									
Vice President		Х		Х				0	0	0
(4) Iphigenia Demetriades	1.00									
Board Member		Х						0	0	0
(5) David Bowman	1.00									
Board Member		Х						0	0	0
(6) Shannon Al-Wakeel	1.00									
Board Member		X						0	0	0
(7) Martin Murphy	1.00									
Board Member		X						0	0	0
(8) Jack Cushman	1.00									
Board Member		Х						0	0	0
(9) Lael_Elizabeth_Chester	1.00_									
Board Member		Х						0	0	0
(10)Martin Fantozzi	1.00									
Board Member		Х						0	0	0
(11)April Evans	1.00									
Treasurer		Х		Х				0	0	0
(12)Adam_Kessel	1.00									
Board Member		X						0	0	0
(13)John_Regier	1.00									
Board Member		Х						0	0	0
(14)Michael Tumposky	1.00									
Board Member		X						0	0	0

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American Civil Liberties Union of Massachusetts

0450

Page 7

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

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

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

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

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

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

	T	·		((C)	,		•		
(A) Name and Title	(B) Average hours per week (list any	Position (do not check more than one box, unless person is both an officer and a director/trustee)				s both a	n	(D) Reportable compensation from	(E) Reportable compensation from related organizations	(F) Estimated amount of other
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Annmarie Levins Board Member	1.00_	Х						0	0	0
(2) Kim McLaurin Board Member	1.00_	Х						O	0	0
(3) Charu Verma Board Member	1.00_	Х						O	0	0
(4) Leslie Shapiro Board Member	1.00	Х						O	0	0
(5) Harmony Wu Board Member	1.00	Х						O	0	0
(6) Robert M Thomas Jr. Board Member	1.00	Х						O	0	0
(7) Susan Yanow Board member	1.00	Х						O	0	0
(8) Ellen Fisher Board member	1.00	Х						O	0	0
(9) Antonio Massa Viana Board member	1.00_	Х						O	0	0
(10)Holly Gunner Director	1.00_	Х						O	0	0
(11)Charmane Higgins Director	1.00	Х						0	0	0
(12)Gail Jackson Blount Director	1.00	Х						0	0	0
(13)Lisa_Wong	1.00	Х						0	0	0
(14)Jacob Lipton Director	1.00_	Х						O	0	0

Part VII Section A. Officers, Directors, Trustees	, Key Employ	ees, a	nd F	ligh	est (Comp	ensa	ated Employees (continued)			
(A)	(B)			(C Pos	•			(D)	(E)		(F)	
Name and title	Average	,				an one		Reportable	Reportable	E:	stimated	d
	hours per					both ar trustee)		compensation	compensation from		nount of	
	week (list any hours for	오 코	'n	Q	Š	역 표	FC	from the	related organizations	com	other pensati	ion
	related	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization	(W-2/1099-MISC)	f	rom the	
	organizations below dotted	ual ti	ional		nploy	it cor		(W-2/1099-MISC)		٠ ،	janizatio d relate	
	line)	uste.	trus		/ee	nper					anizatio	
		Ф	tee			ısate						
						۵						
(15)Carol Rose												
Executive Director	31.00				X							
(16)Shirley Lai	4.00				X							
Director of Finance and Admin (17)Matthew Segal	1.00				Λ							_
Dir of Legal Services	39.00				x							
(18)												_
(19)												
(20)												
(21)												
(21)												
(22)												
<u>`</u>												
(23)												
(24)												
(05)												
(25)												
1b Sub-total · · · · · · · · · · · · · · · · · · ·												
c Total from continuation sheets to Part VII, Sect												
d Total (add lines 1b and 1c)							•	84,968	575,503	1	183,8	850
2 Total number of individuals (including but not limite	d to those list	ed abo	ve)	who	rece	eived	more	than \$100,000 of				
reportable compensation from the organization	•								0			
											Yes	No
3 Did the organization list any former officer, directo			•	ee, c	or hig	ghest	comp	ensated				7.
employee on line 1a? If "Yes," complete Schedule				•••	• • •			eation from the		3		X
4 For any individual listed on line 1a, is the sum of re organization and related organizations greater than	•						•					
individual • • • • • • • • • • • • • • • • • • •										4	Х	
5 Did any person listed on line 1a receive or accrue				unre	lated	d orga	ınizat	tion or individual		•	21	
for services rendered to the organization? If "Yes,"	•		•			•				5		Х
Section B. Independent Contractors												
1 Complete this table for your five highest compensation												
compensation from the organization. Report comp	ensation for th	ne cale	nda	r yea	ar en	nding v	with c	or within the organ	ization's tax			
year.								1				
(A)								(B)			(C)	
Arline Issacson, State House PO Box 2		n. M	A 0	21	3 3			Description of Consultan		Comp	ensatio 120	,000
IDDAODON, DEADO HOUSE TO BOX Z		, 14						Comparcan	-			, , , , ,
2 Total number of independent contractors (including				liste	d ab	ove)	who		, I			
received more than \$100 000 of compensation fro	n the organiz	ation							7			

Part VIII

		Check if Schedule O contains a response or n	ote to any line in th	is Part VIII			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
(0, to	1a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b					
ي ق	C	Fundraising events 1c		-			
ifts ar A	d	Related organizations • • • • • • 1d					
a,° ⊟	e	Government grants (contributions) - 1e		-			
Sign	f	All other contributions, gifts, grants,		-			
but		and similar amounts not included above 1f	212,552				
g d	q	Noncash contributions included in lines 1a-1f: \$	212,332				
္မွ မွ	h h	Total. Add lines 1a-1f		212,552			
	-"	Total: Add lines to the control of t	Business Code	212,552			
e	22	Membership income	900099	3,042,148	3,042,148		
Program Service Revenue	b		300033	3,042,140	3,042,140		
ě	C	·					
ř	d						
Š	e						
gra	f	All other program service revenue • • • • • •					
P.		Total. Add lines 2a-2f		3,042,148			
	Ŭ			3,042,140			
	3	Investment income (including dividends, interest, and other similar amounts) • • • • • • • • • • • • • • • • • • •		106,267			106,267
	4	Income from investment of tax-exempt bond prod		100,207			100,207
	5	Royalties · · · · · · · · · · · · · · · · · · ·					
		(i) Real	(ii) Personal				
	62	Gross rents	(ii) i cisoriai	-			
		Less: rental expenses		-			
	l	Rental income or (loss)		-			
	l	Net rental income or (loss)					
		` ,	(ii) Other				
	/a	Gross amount from sales of (i) Securities assets other than inventory	(ii) Other	-			
		, l		-			
	В	Less: cost or other basis and sales expenses					
	С	Gain or (loss)					
	l	Net gain or (loss)					
e	l	Gross income from fundraising					
'enue		events (not including \$					
Š		of contributions reported on line 1c).					
Other Rev		See Part IV, line 18 a					
돌	b	Less: direct expenses b					
		Net income or (loss) from fundraising events •					
	l	Gross income from gaming activities.					
		See Part IV, line 19 a					
	b	Less: direct expenses b					
		Net income or (loss) from gaming activities • •					
		Gross sales of inventory, less					
		returns and allowances a					
	b	Less: cost of goods sold $ \cdot \cdot \cdot \cdot \cdot \cdot b$					
	С	Net income or (loss) from sales of inventory • •					
		Miscellaneous Revenue	Business Code				
	11a	Other income	900099	356	356		
	b						
	С						
		All other revenue					
	l	Total. Add lines 11a-11d		356			
	12	Total revenue. See instructions		3,361,323	3,042,504	0	106,267

Part IX Statement of Functional Expenses

 $\underline{ \ \, Section\ 501(c)(3)\ and\ 501(c)(4)\ organizations\ must\ complete\ all\ columns.\ All\ other\ organizations\ must\ complete\ column\ (A).}$

	Crieck if Scriedule O contains a response of note to	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 7b,	Total expenses	Program service	Management and	Fundraising
_	Ob, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
•	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees	60,447	45,335	15,112	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	301,767	261,802	39,965	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	31,876	22,583	9,293	
9	Other employee benefits	48,414	40,551	7,863	
10	Payroll taxes	27,510	23,451	4,059	
11	Fees for services (non-employees):				
а	Management				
b	Legal	13,611		13,611	
С	Accounting	9,665		9,665	
d	Lobbying	120,000	120,000		
е	Professional fundraising services. See Part IV, line 17 •				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	26,535	4,791	21,744	
12	Advertising and promotion				
13	Office expenses	15,922	10,850	5,072	
14	Information technology	10,744	8,894	1,850	
15	Royalties				
16	Occupancy	40,210	32,518	7,692	
17	Travel	10,648	7,660	2,988	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest · · · · · · · · · · · · · · · · · · ·				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization • • • • • •	3,227	2,337	890	
23	Insurance	1,065	788	277	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Books and subscriptions	4,112	4,036	76	
b	Printing	8,619	8,485	134	
С	Dues and fees	4,792	4,141	651	
d	Telephone, equip etc	12,465	8,815	3,650	
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e .	751,629	607,037	144,592	0
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)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X • • • •			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	712,334	1	1,318,372
	2	Savings and temporary cash investments	•	2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under 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 Part II of Schedule L		6	
"	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	26,604	9	26,604
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a 15,866			
	b	Less: accumulated depreciation 10b 6,986	12,107	10c	8,880
	11	Investments - publicly traded securities	3,734,572	11	5,596,733
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	393,384	15	483,978
	16	Total assets. Add lines 1 through 15 (must equal line 34)	4,879,001	16	7,434,567
	17	Accounts payable and accrued expenses	59,697	17	23,211
	18	Grants payable · · · · · · · · · · · · · · · · · · ·		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors,			
Ĭ		trustees, key employees, highest compensated employees, and			
Lia		disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	122 044	25	100 207
	26	Total liabilities. Add lines 17 through 25	132,844 192,541	26	109,307 132,518
	20	Organizations that follow SFAS 117 (ASC 958), check here	192,541	20	132,316
S		complete lines 27 through 29, and lines 33 and 34.			
JC .	27	Unrestricted net assets	4,622,354	27	7,302,049
ala	28	Temporarily restricted net assets	64,106	28	7,302,013
Б	29	Permanently restricted net assets	01/100	29	
or Fund Balances	-	Organizations that do not follow SFAS 117 (ASC 958), check here			
o		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
SS	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
Z	33	Total net assets or fund balances	4,686,460	33	7,302,049
	34	Total liabilities and net assets/fund balances	4,879,001	34	7,434,567

orm	1990 (2018) American Civil Liberties Union of Massachusetts		0450)	Pa	age 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					<u>. 🗌 </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	- 1		3,3	861,3	323
2	Total expenses (must equal Part IX, column (A), line 25)	- 2		7	'51 , 6	529
3	Revenue less expenses. Subtract line 2 from line 1	- 3		2,6	09,6	594
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	- 4		4,6	86,4	 160
5	Net unrealized gains (losses) on investments	- 5			5,8	
6	Donated services and use of facilities	. 6				
7	Investment expenses	. 7				
8	Prior period adjustments	. 8				
9	Other changes in net assets or fund balances (explain in Schedule O)	. 9				0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	- 10		7,3	02,0	149
Pa	rt XII Financial Statements and Reporting		•			
	Check if Schedule O contains a response or note to any line in this Part XII					. 🗆
					Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in					
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		[2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		[2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both:					
	∑ Separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight					
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		[2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in		Ī			
	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 Audit Act and OMB Circular A-133?			3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		Ī			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>		3b		

EEA

Form **990** (2018)

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service

Complete if the organization is described below. Department of the Treasury ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

 Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of organization **Employer identification number** American Civil Liberties Union of Massachuset 0450 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for definition of "political campaign activities") 2 Political campaign activity expenditures (see instructions) Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). Part I-B Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 · · · · · · · · · ▶ \$ 2 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? No 3 ☐ No If "Yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function Enter the amount of the filing organization's funds contributed to other organizations for section 2 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, 3 line 17b · · · · · · · · · · · · · · · · · ▶ \$ Did the filing organization file Form 1120-POL for this year? No Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received and funds. If none, enter -0-. promptly and directly delivered to a separate political organization. If none, enter -0-. (1) (2) (3) (4) (5) (6)

	dule C (Form 990 or 990-EZ) 2018 American Civi	l Liberties	Union of Mass	achusetts		450 Page 2
Pa	complete if the organization	n is exempt u	nder section 50	1(c)(3) and file	d Form 5768 (ele	ction under
	section 501(h)).					
Α	Check If the filing organization belongs to			ch affiliated group m	iember's name,	
_	address, EIN, expenses, and shar	•	•			
В	Check I if the filing organization checked b			ly.	I	
		oying Expenditure			(a) Filing organization's totals	(b) Affiliated group totals
4.	(The term "expenditures" n				Organization's totals	group totals
1a	Total lobbying expenditures to influence public or	,-				
b	Total lobbying expenditures to influence a legisla					
C	Total lobbying expenditures (add lines 1a and 1b					
d	and the first of the same					
e	Total exempt purpose expenditures (add lines 10					
t	Lobbying nontaxable amount. Enter the amount	from the following to	adie in doth			
	columns.	The lebbying	nantavable amazını	· ia.		
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000		nontaxable amount	is:		
			nount on line 1e.	vor \$500,000		
	Over \$1,000,000 but not over \$1,000,000		15% of the excess of the exces			
	Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000		55% of the excess ov			
	Over \$17,000,000 but not over \$17,000,000	\$1,000,000.	5 5% OF THE EXCESS OV	er \$1,500,000.		
	Grassroots nontaxable amount (enter 25% of line	•				
g h	Subtract line 1g from line 1a. If zero or less, ente	,				
;	Subtract line 1f from line 1c. If zero or less, enter					
	If there is an amount other than zero on either lin		he organization file F	orm 4720		
J		·				☐ Yes ☐ No
	reporting section 4011 tax for this year:		ng Period Under			
	(Some organizations that made a se	_	_	• •	of the five colum	ns below.
	-		structions for lin	=		
		tilo copulato il		00 <u>_</u> a 0 a g	-,	
	Lobby	ing Expenditures	During 4-Year Avera	aging Period		
	Colondor year (or fined year	(a) 204F	(L) 2016	(-) 2017	(-I) 2040	(a) Total
	Calendar year (or fiscal year	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
	beginning in)					
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column (e))					
С	Total lobbying expenditures					
d	Grassroots nontaxable amount					
е	Grassroots ceiling amount (150% of line 2d, column (e))					

EEA Schedule C (Form 990 or 990-EZ) 2018

f Grassroots lobbying expenditures

	Tule C (Form 990 or 990-EZ) 2018 American Civil Liberties Union of Massachusetts Tt II-B Complete if the organization is exempt under section 501(c)(3) and has NOT for the complete in the organization is exempt under section 501(c)(3).	iled		0450 Page 3
	(election under section 501(h)).	(a)	(b)
For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.			No	Amount
1 a	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
С	Media advertisements?			
d	Mailings to members, legislators, or the public?			
е	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			

d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?

Direct contact with legislators, their staffs, government officials, or a legislative body?

Total. Add lines 1c through 1i

Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?

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

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

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

Part IV Supplemental Information

i

j

2a

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

EEA Schedule C (Form 990 or 990-EZ) 2018

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

2018

Open to Public Inspection

Name	of the organization	Employer identification number
Ame	erican Civil Liberties Union of Massachusetts	0450
Pa	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accord	unts.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised	
	funds are the organization's property, subject to the organization's exclusive legal control?	· · · · · · · · · · · · · · · · · · ·
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose	
	conferring impermissible private benefit?	· · · · · · · · · · · · · · · · · · ·
Pa	rt II Conservation Easements.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (e.g., recreation or education)	lly 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 organization held a qualified conservation contribution in the form of a contribution in t	conservation
	easement on the last day of the tax year.	Held at the End of the Tax Year
а	Total number of conservation easements	. 2a
b	Total acreage restricted by conservation easements	. 2b
С	Number of conservation easements on a certified historic structure included in (a)	. 2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a	
	historic structure listed in the National Register	. 2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization	anization during the
	tax year 🕨	g .
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservat	ion easements during the year
	>	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation e	easements during the year
	> \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?	· · · · · · · · · · · · · · · · · · ·
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense stat	ement, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements the	hat describes the
	organization's accounting for conservation easements.	
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement	and balance sheet
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research in	furtherance of
	public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these ite	ems.
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and	balance sheet
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research in	furtherance of
	public service, provide the following amounts relating to these items:	
	(i) Revenue included on Form 990, Part VIII, line 1	
	(ii) Assets included in Form 990, Part X	> \$
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain	<u> </u>
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1	> \$
h	Assets included in Form 990 Part Y	

Pai	t III Organizations Maintaining Colle	ctions of Art, Histo	rical Treasures,	or Other Similar <i>A</i>	Assets (continued)
3	Using the organization's acquisition, accession, and o	ther records, check any o	of the following that are	a significant use of its	
	collection items (check all that apply):				
а	Public exhibition	d Loan or excha	nge programs		
b	Scholarly research	e Other			
С	Preservation for future generations				
4	Provide a description of the organization's collections	and explain how they fur	ther the organization's	exempt purpose in Part	
	XIII.				
5	During the year, did the organization solicit or receive	donations of art, historica	al treasures, or other si	milar	
	assets to be sold to raise funds rather than to be mair	ntained as part of the orga	anization's collection?		Yes No
Pai	t IV Escrow and Custodial Arrangeme	ents.			
	Complete if the organization answe 990, Part X, line 21.	red "Yes" on Form 9	990, Part IV, line 9	, or reported an an	nount on Form
1a	Is the organization an agent, trustee, custodian or oth	er intermediary for contril	outions or other assets	not	
	included on Form 990, Part X?				· · · · 🗌 Yes 🗌 No
b	If "Yes," explain the arrangement in Part XIII and com	plete the following table:			
					Amount
С	Beginning balance			1c	
d	Additions during the year			1d	
е	Distributions during the year			1e	
f	Ending balance			1f	
2a	Did the organization include an amount on Form 990,	Part X, line 21, for escro	w or custodial account	liability?	· · · · · Yes No
b	If "Yes," explain the arrangement in Part XIII. Check h	ere if the explanation has	been provided on Par	t XIII	
Pa	t V Endowment Funds.	·	·		
	Complete if the organization answe	red "Yes" on Form 9	990, Part IV, line 1	0.	
	· · · · · · · · · · · · · · · · · · ·	Current year (b) Pri			ack (e) Four years back
1a	Beginning of year balance	, , , ,	, , ,		
b	Contributions				
С	Net investment earnings, gains, and				
_	losses				
d	Grants or scholarships				
e	Other expenditures for facilities and				
·	programs				
	Administrative expenses				
f					
g	-		(a)) b ald a a		
2	Provide the estimated percentage of the current year Board designated or quasi-endowment	· · · · · ·	ımın (a)) neid as:		
a		%			
b	Permanent endowment %	0/			
С	Temporarily restricted endowment	%			
_	The percentages on lines 2a, 2b, and 2c should equa				
3a	Are there endowment funds not in the possession of t	he organization that are t	neld and administered f	or the	
	organization by:				Yes No
	(i) unrelated organizations				3a(i)
	(ii) related organizations				· · · 3a(ii)
b	If "Yes" on line 3a(ii), are the related organizations list	•	ıle R? • • • • • • •		3b
4	Describe in Part XIII the intended uses of the organization				
Pai	t VI Land, Buildings, and Equipment.				D ()/ !! (0)
	Complete if the organization answe	red "Yes" on Form 9	990, Part IV, line 1	1a. See Form 990,	, Part X, line 10.
	Description of property	(a) Cost or other basis	(b) Cost or other basis	(c) Accumulated	(d) Book value
		(investment)	(other)	depreciation	
1a	Land				4
b	Buildings				
С	Leasehold improvements		15,866	6,986	8,880
d	Equipment				
е	Other				
Tota	. Add lines 1a through 1e. (Column (d) must equal For	m 990, Part X, column (B), line 10c.)		8,880

Schedule D	(Form	990) 201	8

Part VII	Investments -	Other	Securities.
----------	---------------	-------	-------------

Complete if the organization answered	"\/~~"	' an Earm 000	Dor# 1\/	1ina 11h	Caa Farm 000	Dort V line 12
Complete if the organization answered	THS	OH FORM 990	Paniv	iine i io	See Form 990	Pan A line 17

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Investments - Program Related. Part VIII

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

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

(a) Description	(b) Book value
(1) Due from ACLU National	294,451
(2) Due from ACLU Foundation	189,527
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	483,978

Other Liabilities. Part X

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

1.	(a) Description of liability	(b) Book value
(1) Federa	al income taxes	
(2) Defe	rred rent	109,307
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column	(b) must equal Form 990. Part X. col. (B) line 25.)	109.307

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

Га	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	Nett	II I I I .
1	Total revenue, gains, and other support per audited financial statements	1	2 202 226
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	'	3,392,336
a b		-	
C	Donated services and use of facilities	-	
d	Other (Describe in Part XIII.)	-	
e	Add lines 2a through 2d	2e	21 012
3	Subtract line 2e from line 1	3	31,013
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		3,361,323
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)	-	
C	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	3,361,323
	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	•	
1	Total expenses and losses per audited financial statements	1	776,747
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		•
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses 2c		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	25,118
3	Subtract line 2e from line 1	3	751,629
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	751,629
Pa	art XIII Supplemental Information.		
Prov	vide 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 IV, lines 1b and 2b; Part V, line 4; Part IV, lines 1b and 2b; Part V, line 4; Part IV, lines 1b and 2b; Part IV, li	art X, lir	ne
2; Pa	art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.		

EEA Schedule D (Form 990) 2018

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

0450

American Civil Liberties Union of Massachusetts

01. Members or stockholder classes and rights (Part VI, line 6)
There are two (2) classes of members of the Corporation ("Members"): Class A Members and
Class B Members. The Class A Members are all general members of the American Civil
Liberties Union, Inc., a District of Columbia corporation (the "ACLU"), having an address
of record within the Commonwealth of Massachusetts. The Class B Members shall be those
individuals the are compine from time to time on the Board of Directors (or homestern
individuals who are serving, from time to time, on the Board of Directors (as hereafter
defined) and who are also Class A Members.
02. Member election for additional members (Part VI, line 7a)
The Class A Members shall have the power and authority to elect the Directors of the
Corporation and to amend the By-laws.
02 Form 990 governing body review (Part VI line 11)
03. Form 990 governing body review (Part VI, line 11)
As required, we make a completed copy of the form 990 available to the ACLU MA Board
members prior to the return being filed. All Board member changes, if any, are forwarded
members prior to the return being rired. Arr board member changes, if any, are forwarded
to the preparer prior to the return being filed.
04. Conflict of interest policy compliance (Part VI, line 12c)
If conflicts of interest are present, the interested member is not permitted to vote on
related issues. Annually at a Board meeting any potential conflicts are discussed and
disclosed. Any conflicts are documented at that meeting.
05. CEO, executive director, top management comp (Part VI, line 15a)
THE EXECUTIVE DIRECTOR'S COMPENSATION IS DETERMINED BY THE BOARD OF DIRECTORS BASED ON A
RI-ANNILAI, DERFORMANCE REVIEW WHICH CONSISTS OF ROTH WRITTEN SIRMISSIONS BY ALL DIRECTORS

Schedule O (Form 990 or 990-EZ) (2018)

0450 American Civil Liberties Union of Massachusetts AND TRUSTEES, WHICH IS REVIEWED BY FOUNDATION CHAIRMAN, UNION BOARD PRESIDENT AND UNION VICE PRESIDENT. BASED ON THIS PERFORMANCE REVIEW, THE DIRECTORS AND TRUSTEES DETERMINE AND APPROVE ANY SALARY INCREASE. 06. Other officer or key employee compensation (Part VI, line 15b For existing staff, compensation reviews are completed twice a year. During the annual budgeting and performance review, salary levels are reviewed against other ACLU affiliates of the same size. National ACLU also provides results from an annual salary survey and that data is considered during the annual budgeting and staff review process. For new positions, we gather internal and external data from other non-profits of similar size and type to ensure staff compensation is in line with other ACLU affiliates and other non-profits of similar size and type. During the staff review, staff compensation is increased by COLA, performance or adjustment increases. Increases are also limited based on an approved pool for increase in the annual budget. The budget is approved by the Board. 07. Governing documents, etc, available to public (Part VI, line 19) ACLU OF MA, INC. MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. CERTAIN GOVERNING DOCUMENTS ARE ALSO AVAILABLE OF THE SEC. OF STATE'S WEBSITE.

Name of the organization

Employer identification number

SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

2018

Employer identification number

Open to Public

Inspection

OMB No. 1545-0047

Americ	can Civil Liberties Union of Massachusetts				045	0
Part I	Identification of Disregarded Entities. Complete if the	ne organization answered "Ye	s" on Form 990,	Part IV, line 33		
	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal dom. (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)						
(2)						
(3)						
(4)						
(5)						

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

(a)	(b)	(c)	(d)	(e)	(f)	Sec. 51	(g) 12(b)(13)
Name, address, and EIN of related organization	Primary activity	Legal dom. (state	Exempt Code section	Public charity status	Direct controlling	controll	ed entity?
		or foreign country)		(if section 501(c)(3))	entity	Yes	No
(1) ACLU Foundation of Massachusetts, 47-3686152							
211 Congress street	Preserve Civil						
Boston, MA 02110	Liberties	MA	501 c 3	10	N/A		X
(2)							
(3)							
(4)							
(5)							

Part III	Identification of Related Organia because it had one or more related	zations d orgar	Taxable as a Pa	artners as a pa	ship. Co rtnership	mple o duri	te if the organing the tax yea	ization answar.	ered "Yes"	on Fo	orm 9	990, Part	t IV, line	34	,	<u>ge -</u>
	(a) Name, address, and EIN of related organization		(b) Primary activity	Legal domicile (state or foreign country)	(d) Direct cont entit	rolling	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	Dis ortic allo tio	proponate ocans?	(i) Code V-UI amount in be of Schedule (Form 10	ox 20 r e K-1 65)	(j) Gen. on manag partne	or 9 ling ov er? sh	(k) % wner- hip
(1)							333,37,37									
(2)																
(3)																
(4)																
(5)																
Part IV	Identification of Related Organiz									ed "\	res"	on Form	990, P	art I	V,	
	(a) Name, address, and EIN of related organization		(b) Primary activity		Legal domicile (state or foreign country)	D	(d) irect controlling entity	(e) Type of entity (C corp, S corp. or trust)	(f) Share of t income		I	(g) Share of i-year assets	(h) Percentage ownership	С	(i) :.512(b) controlle entity?	ed
(1)														Ye	s N	<u>lo</u>
(2)																
(3)																
(4)																
(5)																

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

No	ote: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.			_		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organization	ns listed in Parts	s II-IV?				
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			[1a		X
b	Gift, grant, or capital contribution to related organization(s)			[1b		X
С	Gift, grant, or capital contribution from related organization(s)			[1c		X
d	Loans or loan guarantees to or for related organization(s)			[1d		X
е	Loans or loan guarantees by related organization(s)			[1e		X
	Dividends from related organization(s)			L L	1f		_X_
_	Sale of assets to related organization(s)				1g		_X_
h	Purchase of assets from related organization(s)				1h		_X_
i	Exchange of assets with related organization(s)				1i		_X_
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		_X_
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		X
I	Performance of services or membership or fundraising solicitations for related organization(s)			[11		X
m	Performance of services or membership or fundraising solicitations by related organization(s)			[1m		X
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			[1n	X	
0	Sharing of paid employees with related organization(s)			[10	Х	
	Reimbursement paid to related organization(s) for expenses				1р	Χ	
q	Reimbursement paid by related organization(s) for expenses				1q	Χ	
r	Other transfer of cash or property to related organization(s)				1r		X
s	Other transfer of cash or property from related organization(s)				1s		X
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including co	overed relations	hips and transaction thre	sholds.			
	(a)	(b)	(c)	(d)			
		ansaction	Amount involved	Method of determining	amount	involved	
	ty _l	/pe (a-s)					
141							

(a)
Name of related organization
Transaction
Type (a-s)

(1)
(2)
(3)
(4)
(6)

Page 4

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

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j) (k)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Predominant income (related, unrelated, excluded from tax under	sect	all tners tion (c)(3) jani- jns?	Share of total income	Share of end-of-year assets	Disp ortio allo		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gen	or % owne ner? ship
(1)				res	NO			res	NO		res	NO
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
(11)												
(12)												
			<u> </u>					1				

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Part VII Supplemental Information. Provide additional information for responses to questions on Schedule R. See instructions.
01. Explanation of information on Schedule R
The organization shares employees with a related organization (the ACLU Foundation,
inc.). This organization reimburses the related organization for its share of the
cost of these employees based on time and effort working for this organization.
Additionally, this organization leases space for which it shares with a related
organization (the ACLU Foundation, inc.). The Foundation is charged its
proportional
share of the rent expense based on the space utilized by that organization.