**Return of Organization Exempt From Income Tax** 

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

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Α	For the	2022 calendar year, or tax year beginning and en	ding		
В	Check if applicable	C Name of organization		D Employer identifi	cation number
Г	Addres	LGBTQ Victory Fund, Inc.			
	Name change			52-17297	01
	Initial return	, , , , , , , , , , , , , , , , , , , ,	om/suite	E Telephone numbe	
	Final return/ termin	1225 I Street, NW 52	25	202-842-	
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		<b>G</b> Gross receipts \$	2,933,505.
	Ameno return	Washington, DC 20005		H(a) Is this a group re	eturn
	Applic tion	F Name and address of principal officer: Annise Parker		for subordinates	? Yes No
	pendir	same as C above		H(b) Are all subordinates in	ncluded? Yes No
$\overline{\Gamma}$	Tax-exe	empt status: 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or	<b>X</b> 527	If "No," attach a	list. See instructions
	Websit	' , ' C 1		H(c) Group exemption	
K	Form of	organization: X Corporation Trust Association Other	L Year o		A State of legal domicile: DC
	art I	Summary		•	Ŭ
_	Τ1	Briefly describe the organization's mission or most significant activities: To cha	ange	the face an	d voice of
Activities & Governance		America's politics and achieve equality for			
'n	1 .	Check this box if the organization discontinued its operations or disposed			
ĕ	1			3	16
ဇ္		Number of independent voting members of the governing body (Part VI, line 1a)			15
ళ		Total number of individuals employed in calendar year 2022 (Part V, line 2a)			49
ij					17
₹.		Total number of volunteers (estimate if necessary)			0.
Ą		Total unrelated business revenue from Part VIII, column (C), line 12			0.
	D	Net unrelated business taxable income from Form 990-T, Part I, line 11	······	Prior Year	Current Year
		Oracle State of the state of th		2,702,080.	2,512,122.
ne		Contributions and grants (Part VIII, line 1h)		0.	0.
Revenue		Program service revenue (Part VIII, line 2g)		52.	122.
Be		Investment income (Part VIII, column (A), lines 3, 4, and 7d)			
	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-74,526.	83,249.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,627,606.	2,595,493.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,304,521.	1,630,587.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ă	b	Total fundraising expenses (Part IX, column (D), line 25)	<u>).</u>		
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		797,531.	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,102,052.	2,830,729.
	19	Revenue less expenses. Subtract line 18 from line 12		525,554.	-235,236.
O.S.	3		Be	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		2,148,881.	3,291,743.
AS	21	Total liabilities (Part X, line 26)		712,362.	2,090,460.
Net Assets or Fund Balances	22	Net assets or fund balances. Subtract line 21 from line 20		1,436,519.	1,201,283.
P	art II	Signature Block			
Unc	ler pena	lties of perjury, I declare that I have examined this return, including accompanying schedules a	nd stateme	ents, and to the best of m	y knowledge and belief, it is
true	, correc	t, and⁄qomplete. Declaration of preparer (other than officer) is based on all information of which	h preparer	has any knowledge.	
		Unhan D. Tarker		11/08	3/2023
Sig	ın	Signature of officer		Date	
He		Annise Parker, President & CEO			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	D	Date Check	PTIN
Pai	d	Jie Chen, CPA		11/9/23 if self-employ	P01049760
	parer	Firm's name Rogers & Company PLLC			8-2676261
	Only	Firm's address 8300 Boone Boulevard, Suite 600			
		Vienna, VA 22182		Phone no (7	03) 893-0300
Ma	v the IE	RS discuss this return with the preparer shown above? See instructions		[ 1 HOHO HO. ( 7	X Yes No
ivid	у и 1 <del>С</del> 1Г	to disouss this return with the preparer shown above? See instructions			169 - 100

Page **2** 

Pai	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:  LGBTQ Victory Fund works to change the face and voice of America's
	politics and achieve equality for LGBTQ Americans by increasing the
	number of openly LGBTQ officials at all levels of government.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.  Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
	LGBTQ Victory Fund: is the only national organization that endorses and supports openly lesbian, gay, bisexual, transgender and queer (LGBTQ)
	candidates for elected office at every level of government. The
	organization supports its endorsed candidates by providing them with
	fundamination supports its endorsed candidates by providing them with
	fundraising support, campaign services and communications support.
	LGBTQ Victory Fund is non-partisan and endorses hundreds of LGBTQ
	candidates each year.
4b	(Code:) (Expenses \$
	Its fundraising support includes bundling contributions for candidates
	through its national network of donors, organizing fundraising events
	and promoting candidates through Victory Campaign Board members. Its
	campaign services include technical assistance to candidate and
	campaign teams on effective campaigning, advice on running as an openly
	LGBTQ candidate, and investing in independent expenditures when
	appropriate. Its communications support includes raising the profile of
	LGBTQ candidates in local and national press and responding when
	candidates face homophobic or transphobic attacks.
4c	(Code:) (Expenses \$
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses

# Form 990 (2022) LGBTQ Victory Fund, Inc. 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		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
Ŭ	public office? If "Yes," complete Schedule C, Part I	3	Х	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
•	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	•		
	similar amounts as defined in Rev. Proc. 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	_		. v
_	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,	_		х
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			х
_	Schedule D, Part III	8		
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?			х
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40		х
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		
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,	44-	х	
	Part VI	11a	21	
D	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	446		х
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
C	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
ч	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	х	
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
•	the organization's separate of consolidated limit class statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
124	Schedule D, Parts XI and XII	12a	Х	
h	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		14a		Х
	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		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	<b>20</b> a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<b>20</b> b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

Part IV	Checklist of Required Schedules (co	ntinued
raitiv	Officerial of negatives self-carries (ca	)I I(II IU <del>C</del> U)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
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		Х
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		
25 a	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		
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		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			l
	entity (including an employee thereof) 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 the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			١
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?lf			7.7
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Α.
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	l		3.7
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			X
	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			X
0.4	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Λ
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		X
25.0	211	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	33a	<del>                                     </del>	<del></del>
b	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?	335		
00	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			
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	<u> </u>		
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai	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			X
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable   1a   9			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b C			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	

Description 122) LGBTQ Victory Fund, Inc.

Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			Yes	No
<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 4		X	
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	1 ^	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	1	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
48	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	4a		x
h	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		125
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	"		
	any contributions that were not tax deductible as charitable contributions?	6a	X	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b	X	
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		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7с		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	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		
9	sponsoring organization have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.	-		
а	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		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
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		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	Note: See the instructions for additional information the organization must report on Schedule O.	134		
h	Enter the amount of reserves the organization is required to maintain by the states in which the			
-	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			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 on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
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	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		Х
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		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?			
	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			7.7
	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 DC , CA , FL , NY , PA , VA	_	_	
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	) avail	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	nd fina	ncial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	Annise Parker, President and CEO - 202-842-8679			

### Form 990 (2022) 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 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 all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A)	(B)	l		((	C)		ilout	(D)	(E)	(F)
Name and title	Average	(do	not c	Pos heck	more	than	one	Reportable	Reportable	Estimated
	hours per week					is bot or/trus		compensation from	compensation from related	amount of other
	(list any	or director						the	organizations	compensation
	hours for related	e or di	童			Highest compensated employee		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	truste	al trus		yee	ubeu		1099-NEC)	1000 (100)	and related
	below	In dividual trustee	Institutional trustee	ser	Key employee	hest co oloyee	ner	·		organizations
42)	line)	Indi	Inst	Officer	Key	E High	휸			
(1) Annise Parker President and CEO	28.00	X		x				125,769.	0.	10,243.
(2) Andrea Hernandez	22.00	^		Δ				123,709.	0.	10,243.
CFO	22.00	1		Х				59,059.	0.	11,185.
(3) Brady Walkinshaw	1.00			25				33,033.	<u></u>	11,103.
Director		x						0.	0.	0.
(4) Chris Kehoe	1.00									
Director		Х						0.	0.	0.
(5) Chrys Lemon	1.00									
Director		Х						0.	0.	0.
(6) Greg Porter	1.00							_	_	_
Director		Х						0.	0.	0.
(7) Jess Nahigian	1.00	ļ								
Secretary	1 00	Х		Х				0.	0.	0.
(8) Joe Falk	1.00	Į.,							0	0
Director	1.00	Х						0.	0.	0.
(9) Kate Maeder	1.00	x						0.	0.	0.
Ex Officio (10) Kevin B. Morrison	1.00	^						0.	0.	0.
Director	1.00	x						0.	0.	0.
(11) Mark Buse	1.00	┢═								
Director		Х						0.	0.	0.
(12) Mellie Price	2.00									
Treasurer		Х		Х				0.	0.	0.
(13) Paul Feeny	2.00									
Vice Chair		Х		Х				0.	0.	0.
(14) RJ Stillwell	1.00							_	_	_
Director		Х						0.	0.	0.
(15) Sam Garrett-Pate	1.00									
Ex Officio	2 00	Х						0.	0.	0.
(16) Sharon Callahan-Miller	2.00	₩.						_	_	^
Director	1.00	Х						0.	0.	0.
(17) Sue Burnside Ex Officio	1.00	X						0.	0.	0.
EX OTITCIO		$\Gamma_{\nabla}$						<u> </u>	U •	- 000

Form 990 (2022) 232007 12-13-22

Page 8

Part VII Section A. Officers, Directors, Trus		ploy	/ees	, an	d Hi	ighe	st C	Compensated Employe	es (continued)				
(A)	(B)				C)			(D)	(E)			(F)	
Name and title	Average		not c		more	than		Reportable	Reportable		l	timated	
	hours per week					is bot or/trus		compensation	compensatio			ount o	f
	(list any						Ĺ	from the	from related organizations		l	other pensat	ion
	hours for	direct				P		organization	(W-2/1099-MIS			om the	
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	,0,		anizatio	
	organizations	trust	al tru		yee	ompe		1099-NEC)	,			d relate	
	below	Individual trustee or director	Institutional trustee	Je.	Key employee	Highest compensated employee	ner				orga	nizatio	ns
	line)	Indi	lnst	Officer	Key	High	- Par						
(18) Terrence Meck	1.00	,,						0					^
Director	2 00	Х			-			0.		0.			0.
(19) Wade Rakes	2.00	Х		x				0.		0.			0.
Chair		^	$\vdash$	^	-	-		0.		0.			<u> </u>
					-					$\longrightarrow$			
					$\vdash$								
9													
1b Subtotal	•							184,828.		0.	2	1,42	8.
c Total from continuation sheets to Part V	II, Section A							0.		0.			0.
d Total (add lines 1b and 1c)								184,828.		0.	2	1,42	8.
2 Total number of individuals (including but r								eceived more than \$100	,000 of reportabl	е			
compensation from the organization													1
												Yes	No
3 Did the organization list any former officer,	,	,	,		,	,	_	, , ,	,				
line 1a? If "Yes," complete Schedule J for s	such individual										3		<u>X</u>
4 For any individual listed on line 1a, is the su	-		-					•	the organization				
and related organizations greater than \$15	0,000? If "Yes,	" co	mpl	ete S	Sch	edul	e J f	for such individual			4		X
5 Did any person listed on line 1a receive or	•				•	•		•	dual for services				
rendered to the organization? If "Yes," com	plete Schedul	e J t	for s	uch	pers	son .					5		X
Section B. Independent Contractors			_						<b>.</b>				
1 Complete this table for your five highest co										ıpens	ation f	rom	
the organization. Report compensation for	the calendar y	ear	endi	ng v	vith	or w	ıthır İ		year.				
(A) Name and business	address	NI	INC	7.				<b>(B)</b> Description of s	ervices	С	(C Compe	7) nsation	
		111	2141	_			_	2000			· · · · · · · · · · · · · · · · · · ·		
Total number of independent contractors (     \$100,000 of compensation from the organi		ot li	mite	d to	tho	se li:	stec	d above) who received m	nore than				
											_	222	

Page 9

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) Revenuè éxcluded Related or exempt Unrelated Total revenue from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues ..... 1b 877,930. c Fundraising events ..... 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 1,634,192. similar amounts not included above 1f 1g \$ g Noncash contributions included in lines 1a-1f 2,512,122. h Total. Add lines 1a-1f **Business Code** Program Service Revenue 2 a f All other program service revenue g Total. Add lines 2a-2f ..... Investment income (including dividends, interest, and 122. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties ..... (i) Real (ii) Personal 6 a Gross rents **b** Less: rental expenses ... 6b c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory 7a **b** Less: cost or other basis Other Revenue and sales expenses ..... 7b c Gain or (loss) \_\_\_\_\_\_7c d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ 877,930. of contributions reported on line 1c). See  $|_{8a}|_{317,900}$ Part IV, line 18 8b 338,012. **b** Less: direct expenses -20,112.c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9b **b** Less: direct expenses c Net income or (loss) from gaming activities **10 a** Gross sales of inventory, less returns 10a and allowances **b** Less: cost of goods sold ..... c Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 64,758. 11 a Cash Rewards 900099 b Administrative Fee 900099 38,603. С d All other revenue 103,361. e Total. Add lines 11a-11d

2,595,493.

Total revenue. See instructions

# Form 990 (2022) LGBTQ Victory Fund, Inc. Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4)	organizations must comp	ete all columns. All other	organizations must c	omplete column (l	A).
---------------------------------	-------------------------	----------------------------	----------------------	-------------------	-----

	Check if Schedule O contains a respon	•			
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations			g	
	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,	226 256			
	trustees, and key employees	206,256.			
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	1,175,091.			
7	Other salaries and wages	1,110,031.		+	
8	Pension plan accruals and contributions (include	25,910.			
9	section 401(k) and 403(b) employer contributions)	113,029.		+	
10	Other employee benefits	110,301.			
11	Payroll taxes Fees for services (nonemployees):	110,301.			
'' a	Management				
b	Legal	10,530.			
	Accounting	11,005.			
d		,			
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	((() 44 ) 1 400/ () 05				
	column (A), amount, list line 11g expenses on Sch O.)	156,781.			
12	Advertising and promotion	107,500.			
13	Office expenses	134,747.			
14	Information technology	152,817.			
15	Royalties	11 010			
16	Occupancy	-11,948.			
17	Travel	128,662.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	2/1 6/2			
19	Conferences, conventions, and meetings	341,643.		+	
20	Interest Payments to offiliates			+	
21	Payments to affiliates  Depreciation, depletion, and amortization	83,009.			
22 23		13,946.		+	
23 24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	Other program expenses	71,179.			
b	Research and polling	8,000.			
С	Taxes	29.			
d	Election law compliance	-7,758.			
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	2,830,729.			
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)				F 000 (0000)

# Form 990 (2022) Part X Balance Sheet

Pa	πχ	Balance Sheet					
		Check if Schedule O contains a response or r	ote to an	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			874,989.	1	346,021
	2	Savings and temporary cash investments			100,205.	2	100,235
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net		131,619.	4	122,701	
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub					
		controlled entity or family member of any of th		5			
	6	Loans and other receivables from other disqu					
		under section 4958(f)(1)), and persons describ				6	
şţs	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ä	9	Prepaid expenses and deferred charges			86,727.	9	122,546
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	726,159.			
	b	Less: accumulated depreciation		383,887.	413,278.	10c	342,272
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line	e 11			12	
	13	Investments - program-related. See Part IV, lin			13		
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	542,063.	15	2,257,968		
	16	Total assets. Add lines 1 through 15 (must ed			2,148,881.	16	3,291,743
	17	Accounts payable and accrued expenses	138,931.	17	158,508		
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complet	e Part IV	of Schedule D		21	
es	22	Loans and other payables to any current or fo	rmer offic	er, director,			
Ė		trustee, key employee, creator or founder, sub	ostantial c	ontributor, or 35%			
Liabilities		controlled entity or family member of any of the	ese perso	ons		22	
_	23	Secured mortgages and notes payable to unr	elated thi	rd parties		23	
	24	Unsecured notes and loans payable to unrela	ted third p	parties		24	
	25	Other liabilities (including federal income tax,	oayables <sup>·</sup>	to related third			
		parties, and other liabilities not included on lin	es 17-24)	. Complete Part X			
		of Schedule D			573,431.		1,931,952
	26	Total liabilities. Add lines 17 through 25			712,362.	26	2,090,460
ý		Organizations that follow FASB ASC 958, c	heck her	e X			
ဥ		and complete lines 27, 28, 32, and 33.			1 426 510		1 001 000
<u>a</u>	27	Net assets without donor restrictions			1,436,519.	27	1,201,283
Ď	28	Net assets with donor restrictions				28	
Š		Organizations that do not follow FASB ASC	958, che	ck here			
F.		and complete lines 29 through 33.					
SIS (	29	Capital stock or trust principal, or current fund				29	
SSe	30	Paid-in or capital surplus, or land, building, or				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated			1 126 542	31	1 001 000
ž	32	Total net assets or fund balances			1,436,519.	32	1,201,283
	33	Total liabilities and net assets/fund balances			2,148,881.	33	3,291,743

Form **990** (2022)

Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,59				
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,83 -23				
3	Revenue less expenses. Subtract line 2 from line 1						
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))						
5	Net unrealized gains (losses) on investments	5					
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,						
	column (B))	10	1,201,283				
Pa	rt XIII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII				X		
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedul	e O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		2b	X			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,					
	consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,		х			
review, or compilation of its financial statements and selection of an independent accountant?							
	If the organization changed either its oversight process or selection process during the tax year, explain on Sci	nedule O.					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the						
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		За		Х		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	ired audit					
	or guidite, explain why an Sahadula O and deparibe any stone taken to undergo such guidite		26		l		

Form **990** (2022)

## SCHEDULE C (Form 990)

Department of the Treasury Internal Revenue Service

# **Political Campaign and Lobbying Activities**

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

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** 52-1729701 LGBTQ Victory Fund, Inc. Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political campaign activity expenditures \$\_\_\_\_\_ 3 Volunteer hours for political campaign activities Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 \$ 2 Enter the amount of any excise tax incurred by organization managers under section 4955 \_\_\_\_\_\_\$ \_\_\_\_ 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Nο 4a Was a correction made? 」Yes No b If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$ 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$ \_\_\_\_\_\_ 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b \_\_\_\_\_\_\$ \_\_\_ 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (b) Address (d) Amount paid from (a) Name (c) EIN (e) Amount of political contributions received and filing organization's promptly and directly funds. If none, enter -0-. delivered to a separate political organization. If none, enter -0-.

Calendar year (or fiscal year beginning in)

(a) 2019
(b) 2020
(c) 2021
(d) 2022
(e) Total

2a Lobbying nontaxable amount
(150% of line 2a, column(e))

c Total lobbying expenditures

d Grassroots nontaxable amount
(150% of line 2d, column (e))

f Grassroots lobbying expenditures

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

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a	1)	(b	))
	e lobbying activity.			Amount	
		Yes	No	Amo	ount
1	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:				
а	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?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
i	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	t III-A   Complete if the organization is exempt under section 501(c)(4), section 501(c)(	on 501(c)	(5), or se	ction	
	501(c)(6).		(-),		
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4)			ction	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				e 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 expenditures)				
_	expenses for which the section 527(f) tax was paid).				
9	Current year		2a		
	Carryover from last year		_		
	Total				
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 exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	oolitical			
_	expenditures next year?		4		
_	Taxable amount of lobbying and political expenditures. See instructions		5		
	t IV Supplemental Information				
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	o list); Part II	-A, lines 1	and 2 (See	
	ictions); and Part II-B, line 1. Also, complete this part for any additional information.				
Pai	ct I-A, Line 1:				
m1	TCDEO Total constitue there have no seemed for	1 2	1		
Tne	e LGBTQ Fund provides three key areas of support fo	r poli	tical		
	'				
car	mpaigns of openly LGBTQ political candidates. The	most t	radit	ionai	
<u>met</u>	chod, bundling contributions through a national don	or net	work	to	
		611	_		
taı	rgeted races throughout the country, raises the pro	tile c	ot can	didate	s
		. •		-	-
tha	at might not be able to reach a donor network large	r than	thei	r loca	ĮΤ

Part IV   Supplemental Information (continued)
community. Secondly, the Victory Fund provides technical assistance to
candidates and campaign teams on effective campaigning as well as
dealing with the media when under attack regarding their sexual
orientation. Finally, the Victory Fund directly contributes and
invests in independent expenditures that will either promote an
endorsed candidate or highlight the differences between the candidates
vying for the same position.
-

# **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

LGBTQ Victory Fund, Inc.

Employer identification number 52-1729701

Pai	t I Organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lin-		Is or Accounts. Complete if the
	organization answered Tee en Term eee, Farthy, in	(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 v	writing that the assets held in donor adv	ised funds
	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o		
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the org		
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (for example, recrea	tion or education) 🔲 Preservation c	of a historically important land area
	Protection of natural habitat	Preservation of	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	
	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 stru		2c
d	Number of conservation easements included in (c) acquired a		
	historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the	ne organization during the tax
	year		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cor	nservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing consequ	ration agreements during the year
•	Amount of expenses incurred in monitoring, inspecting, hand	illing of violations, and emorcing conserv	ation easements during the year
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 17	O(h)(4)(B)(i)
_	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation		
	balance sheet, and include, if applicable, the text of the footr	•	
	organization's accounting for conservation easements.	C	
Pai	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or 0	Other Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement	and balance sheet works
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education, or research in	furtherance of public
	service, provide in Part XIII the text of the footnote to its finar	ncial statements that describes these ite	ems.
b	If the organization elected, as permitted under FASB ASC 95	8, 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 fur	therance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
			•
2	If the organization received or held works of art, historical treatments	asures, or other similar assets for financi	ial gain, provide
	the following amounts required to be reported under FASB A	SC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		

Sche	dule D (Form 990) 2022 LGBTQ V	ictory Fun	d, I	nc.				52-17	2970	l Pa	age <b>2</b>
_	rt III   Organizations Maintaining C				easures,	or Othe					
3	Using the organization's acquisition, accessi	on, and other record	ls, chec	k any of the	following that	at make s	ignificant	use of its			
	collection items (check all that apply):										
а	a Public exhibition d Loan or exchange program										
b	Scholarly research	е		Other							
С											
4	Provide a description of the organization's co	ollections and explai	n how th	ney further t	he organizat	ion's exer	npt purpo	se in Par	t XIII.		
5											
	to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No										
Par	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or										
	reported an amount on Form 990, Pa			Ü				,	,		
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contribution	ns or other as	ssets not	included				
	on Form 990, Part X?		-						Yes		No
b	If "Yes," explain the arrangement in Part XIII										
									Amount	:	
С	Beginning balance						1c				
	Additions during the year										
	Distributions during the year										
f	Ending balance										
2a	Did the organization include an amount on F								Yes		No
	If "Yes," explain the arrangement in Part XIII.						•				]
	t V Endowment Funds. Complete i										
		(a) Current year		Prior year	(c) Two yea			ears back	(e) Four	years	back
1a	Beginning of year balance	,		-			-				
b	Contributions										
c	Net investment earnings, gains, and losses										
d	Grants or scholarships										
	Other expenditures for facilities										
•	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	rent vear end haland	e (line 1	a column (a	a)) held as:	L			<u>I</u>		
	Board designated or quasi-endowment	,	%	9, 00141111 (0	<i>2))</i> 11010 00.						
b	Permanent endowment	%	_′°								
c		<u></u> /3 %									
•	The percentages on lines 2a, 2b, and 2c sho	, -									
За	Are there endowment funds not in the posse		ation tha	at are held a	nd administe	ered for th	ne				
	organization by:	esien er ine erganiz							Γ	Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations										
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requi	red on S	Schedule R?					3b		
4	Describe in Part XIII the intended uses of the										
	t VI Land, Buildings, and Equipm										
	Complete if the organization answere		), Part I	V, line 11a. S	See Form 99	0, Part X,	line 10.				
	Description of property	(a) Cost or o			or other	i	cumulate	ed	(d) Bool	c value	<del></del>
	=p.i.o. p. p.opoi()	basis (investr			(other)		reciation	·	(=, 200		
1a	Land	<del>-   ` ` ` </del>	•		· · · · · · · · · · · · · · · · · · ·						
	Buildings										
	Leasehold improvements			47	8,489.	1	.97,6	15.	28	3,8	74.
	Equipment				7,670.		86,2			1,3	
		***									

342,272. Schedule D (Form 990) 2022

e Other

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

Part VII	Investments -	Other Securities

Operation of the approximation are accounted.	F 000 D-+ N/ I'	44h O Farma 000 Dark V Bara 40
Complete if the organization answered "Yes"	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
(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. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		

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

(4) (5) (6) (7) (8) (9)

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) Deposits	20,790.
(2) Due from Victory Institute	708,245.
(3) Right-of-use aseets - operating lease	1,528,933.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	2,257,968.

#### Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) Lease liability - operating lease	1,931,952.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	1,931,952.

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

Coby	edule D (Form 990) 2022 LGBTQ Victory Fund, Inc.			52-	1729701 <sub>Page</sub> 4
_	t XI Reconciliation of Revenue per Audited Financial Stateme	nts W			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	4,602,422.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities				
С	Recoveries of prior year grants				
d			2,006,929.		
е	Add lines 2a through 2d			2e	2,006,929.
3	Subtract line 2e from line 1			3	2,595,493.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12.)			5	2,595,493.
	rt XII Reconciliation of Expenses per Audited Financial Statem			Retu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				4 700 471
1	Total expenses and losses per audited financial statements			1	4,729,471.
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		1 000 540		
	Other (Describe in Part XIII.)		1,898,742.		1 000 540
	Add lines 2a through 2d			2e	1,898,742.
3	Subtract line 2e from line 1			3	2,830,729.
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.)	4b			
С	Add lines 4a and 4b			4c	0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	2,830,729.
Pa	rt XIII Supplemental Information.				
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addi			4; Part	X, line 2; Part XI,
<u>Pa</u> :	rt X, Line 2:				
Ma	nagement has evaluated Victory Fund's tax p	posit	cions and co	ncl	uded that
th	e financial statements do not include any t	uncei	rtain tax po	sit	ions as of
De	cember 31, 2022 and 2021.				
Pa:	rt XI, Line 2d - Other Adjustments:				
Fe	deral portion of PAC contributions				1,668,917.
Di:	rect Benefit to Donors				338,012.
То	tal to Schedule D, Part XI, Line 2d				2,006,929.

Part XII, Line 2d - Other Adjustments:

Federal portion of PAC expenses

1,560,730.

### SCHEDULE G (Form 990)

#### Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

**Open to Public** 

Department of the Treasury Inspection Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization Employer identification number LGBTQ Victory Fund, Inc. 52-1729701 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants Internet and email solicitations b Solicitation of government grants ☐ Phone solicitations ☐ Special fundraising events In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or Yes No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No

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

52-1729701 Page 2 LGBTQ Victory Fund, Inc. Schedule G (Form 990) 2022 Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-F7, lines 1 and 6b. List events with gross receipts greater than \$5,000

		or fullulaising event contributions and give		LE, IIICS T and Ob. LIST	events with gross receip	713 greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			L ,	San Diego	•	(add col. (a) through
			DC Brunch	Champagne Br	2	col. <b>(c)</b> )
ne			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	386,794.	287,701.	521,335.	1,195,830.
	2	Less: Contributions	240,219.	226,101.	411,610.	877,930.
	3	Gross income (line 1 minus line 2)	146,575.	61,600.	109,725.	317,900.
	4	Cash prizes				
S	5	Noncash prizes				
pense	6	Rent/facility costs	92,048.	46,561.	199,403.	338,012.
Direct Expenses	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses				
	_		n 9 in column (d)			338,012.
	11	Net income summary. Subtract line 10 from li				-20,112.
Pa	ırt I		answered "Yes" on Form	n 990, Part IV, line 19, or	reported more than	
		\$15,000 on Form 990-EZ, line 6a.	Г	a Dulltoka forstand		
ne			(a) Bingo	<b>(b)</b> Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c)
Revenue				Singo, progressive singe		coi. (a) through coi. (c)
Re	4	Gross revenue				
	Ė	areas revenue				
SS	2	Cash prizes				
ense						
≅xb€	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes %	Yes % No	Yes % No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			
		•				
	8	Net gaming income summary. Subtract line 7	nomine i, column (d)			<u> </u>
9 Enter the state(s) in which the organization conducts gaming activities:						
a Is the organization licensed to conduct gaming activities in each of these states?						
<b>b</b> If "No," explain:						
		ere any of the organization's gaming licenses re	evoked, suspended, or to	erminated during the tax	year?	Yes No
b	IT "	Yes," explain:				

Scn	edule G (Form 990) 2022 LGBIQ VICCOLY Fund, Inc. 52-1	143	701	. Раде <b>з</b>
	Does the organization conduct gaming activities with nonmembers?		Yes	☐ No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	└── No
13	Indicate the percentage of gaming activity conducted in:			
	ı The organization's facility	13a		%
	An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	. 🗆	Yes	☐ No
b	olf "Yes," enter the amount of gaming revenue received by the organization \$ and the amount			
	of gaming revenue retained by the third party \$			
С	s If "Yes," enter name and address of the third party:			
	Name			
	Address			
40				
16	Gaming manager information:			
	Name			
	Gaming manager compensation \$			
	Description of services provided			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
4-	Many distance distance			
	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		Yes	□ No
<b>L</b>	retain the state gaming license?	. —	162	L NO
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$			
Pa	organization's own exempt activities during the tax year \$  Intiviorum Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and (	rt III T	ines 9	9h 10h
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	,	,	00, 100,
	ros, ros, ro, and rrs, as applicable. riles provide any additional illustration.			

Schedule G	(Form 990)	LGBTQ Victory	Fund,	Inc.	52-1729701	Page 4
Part IV	Supplemental Infor	LGBTQ Victory mation (continued)				

## SCHEDULE J (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

2022

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

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

LGBTQ Victory Fund, Inc.

 $Employer\ identification\ number \\ 52-1729701$ 

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

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

Schedule J (Form 990) 2022

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 aren't listed on Form 990, Part VII.

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	incentive reportable				reported as deferred on prior Form 990
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J (Form 990) 2022

## SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization

LGBTQ Victory Fund, Inc.

Employer identification number 52-1729701

Form 990, Part I, Line 1, Description of Organization Mission:

increasing the number of openly LGBTQ officials at all levels of the

government.

Form 990, Part VI, Section B, line 11b:

The Audit Committee reviewed the 990 in detail. The Board was provided a copy prior to filing.

Part V, Lines 2a & b, Part VII, Part IX Compensation & Benefits Reporting:

The Organization has a professional employer organization (PEO)

arrangement with Insperity. Insperity files all required federal

employment tax returns.

Form 990, Part VI, Section B, Line 12c:

Board members sign a Conflict of Interest and Gift Policy Disclosure

Statement upon joining. Beginning in 2023, all board members will sign
these policies on an annual process.

Form 990, Part VI, Section B, Line 15:

The CEO's compensation is determined by the Board of Directors. The Board surveys the compensation of similar organizations in the political, non-profit, and LGBTQ movement fields as a benchmark when negotiating the CEO's base compensation.

Form 990, Part VI, Section C, Line 19:

Schedule O (Form 990) 2022 Page **2** 

Name of the organization  LGBTQ Victory Fund, Inc.	Employer identification number 52-1729701
Available upon request.	
Form 990, Part XII, Line 2c:	
The Fund's Board of Directors is responsible for the over	sight of the
audit, including the selection of the independent account	ant. This
process is consistent with previous years.	
Form 990, Parts VIII & IX:	
Revenue and expense reported on this Form 990 exclude amo	unts
pertaining to federal political action committee activity	, as this
information has been reported to the Federal Election Com	mission and is
excepted from 990 reporting requirements. The federal ac	tivity has
been reported as audit/tax differences on Form 990, Part	XI and Form
990, Schedule D, Parts XI - XIII.	