** PUBLIC DISCLOSURE COPY **

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Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Open to Public

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury ► Go to www.irs.gov/Form990 for instructions and the latest information. Inspection and ending A For the 2020 calendar year, or tax year beginning Check if applicable: C Name of organization D Employer identification number Address change THE EQUAL RIGHTS CENTER Name change 52-1297949 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ 202-234-3062 820 FIRST STREET NE LL160 termin-ated 943,600. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended return WASHINGTON, DC 20002 H(a) Is this a group return Applica-F Name and address of principal officer: ANNIE KATE SCOTT Yes X No for subordinates? pending SAME AS C ABOVE H(b) Are all subordinates included? Yes No Tax-exempt status: X = 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or If "No," attach a list. See instructions J Website: ► WWW.EQUALRIGHTSCENTER.ORG **H(c)** Group exemption number ▶ **K** Form of organization: X Corporation Trust Association Other > L Year of formation: 1983 M State of legal domicile: DC Part I Summary Briefly describe the organization's mission or most significant activities: SEE PART III, LINE 1. Activities & Governance Check this box | if the organization discontinued its operations or disposed of more than 25% of its net assets. 11 Number of voting members of the governing body (Part VI, line 1a) <u>11</u> Number of independent voting members of the governing body (Part VI, line 1b) 17 5 Total number of individuals employed in calendar year 2020 (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, Part I, line 11 7b **Prior Year Current Year** 530,889. 556,281. Contributions and grants (Part VIII, line 1h) Revenue 384,333. 631,202. Program service revenue (Part VIII, line 2g) 2,986. 20,683. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 0. 0. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,182,774. 943,600. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0. 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) Ō. 0. Benefits paid to or for members (Part IX, column (A), line 4) 935,755. 954,190. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 378,675. 357,914. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,312,104. -368,504. 1,314,430. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -131,656. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 1,540,054. 1,719,018. 20 Total assets (Part X, line 16) 205,575. 395,115. 21 Total liabilities (Part X, line 26) 513,443. 144,939. Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign ANNIE KATE SCOTT, EXECUTIVE DIRECTOR Here Type or print name and title PTIN Print/Type preparer's name Preparer's signature seast Paid RICHARD J. LOCASTRO, CPA P00288314 11/12/2021 Firm's name GELMAN, ROSENBERG & FREEDMAN Firm's EIN **▶** 52-1392008 Preparer Firm's address $\sqrt{4550}$ MONTGOMERY AVE SUITE 800N Use Only

X Yes No

Phone no. (301) 951-9090

May the IRS discuss this return with the preparer shown above? See instructions

BETHESDA, MD 20814-2930

Pai	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: THE ERC IS A CIVIL RIGHTS ORGANIZATION THAT IDENTIFIES AND SEEKS TO
	ELIMINATE UNLAWFUL AND UNFAIR DISCRIMINATION IN HOUSING, EMPLOYMENT,
	- <u></u>
	AND PUBLIC ACCOMMODATIONS IN ITS HOME COMMUNITY OF GREATER WASHINGTON, D.C. AND NATIONWIDE.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes X No
_	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
3	3, 3 3 , 1 3
	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. (Code:) (Expenses \$ 1,075,348 • including grants of \$) (Revenue \$ 384,333 •)
4a	(Code:) (Expenses \$ 1,075,348 including grants of \$) (Revenue \$ 384,333 including grants of \$) (Revenue \$ 517 CIVIL
	RIGHTS TESTS, RESPONDED TO 281 INDIVIDUALS REPORTING DISCRIMINATION,
	FILED 9 ADMINISTRATIVE COMPLAINTS WITH LOCAL CIVIL RIGHTS ENFORCEMENT
	AGENCIES, AND SUBMITTED 20 REASONABLE ACCOMMODATION AND MODIFICATION
	REQUESTS ON BEHALF OF PEOPLE WITH DISABILITIES. THE ERC ALSO TRAINED
	HOUSING PROFESSIONALS AND MEMBERS OF THE COMMUNITY ABOUT FAIR HOUSING
	AND ACCESSIBILITY REQUIREMENTS. THE ORGANIZATION RELEASED A REPORT
	BASED ON CIVIL RIGHTS TESTING, "NAVIGATING A PANDEMIC", WHICH
	DOCUMENTED BARRIERS TO INFORMATION ABOUT COVID-19 TESTING THAT PEOPLE
	WHO ARE LIMITED ENGLISH PROFICIENT ENCOUNTERED IN THE D.C. REGION. THE
	ORGANIZATION DEVELOPED AND DISTRIBUTED NUMEROUS MISSION RELATED
	EDUCATIONAL MATERIALS THROUGHOUT THE COURSE (CONTINUED ON SCHEDULE O)
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$
4d	Other program services (Describe on Schedule O.)
_	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ 1,075,348.
4e	
	Form 990 (2020)

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)?	1	х	
2	If "Yes," complete Schedule A	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
Ū	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	Х	
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		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in 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,		Х	
L	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	11a		-
b	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			١
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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	446		x
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		
13	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		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	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,"			_v
00	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u> </u>
b 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		-
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
	demosts government on that the column by some time too, complete conceders, that of the manner manner manner.			

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Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		1.55	
	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			x
04.0	Schedule J	23		├ ^
24 a	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		
	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 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			37
	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	27		x
28	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	21		22
20	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
-	"Yes, " complete Schedule L, Part IV	28a		Х
b	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 lines 28a or 28b?If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	00		x
22	Schedule N, Part II	32		├ ^
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		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		
٠,	Part V, line 1	34		x
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			3,7
	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?	38	x	
Pai	Note: All Form 990 filers are required to complete Schedule 0 t V Statements Regarding Other IRS Filings and Tax Compliance	30	- 21	
	Check if Schedule O contains a response or note to any line in this Part V			
	1 /		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	

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Form 990 (2020) THE EQUAL RIGHTS CENTER Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

				Yes	No						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,										
	filed for the calendar year ending with or within the year covered by this return2a	17									
b	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?										
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)										
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За		Х						
b	b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O										
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authorized and the organization have an interest in, or a signature or other authorized and the organization have an interest in, or a signature or other authorized and the organization have an interest in, or a signature or other authorized and the organization have an interest in, or a signature or other authorized and the organization have an interest in, or a signature or other authorized and the organization have an interest in, or a signature or other authorized and the organization have an interest in the organization have a signature or other authorized have	ority over, a									
	financial account in a foreign country (such as a bank account, securities account, or other financial account	unt)?	4a		Х						
b	If "Yes," enter the name of the foreign country ▶										
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).										
5a	5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?										
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction		5b		X						
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5с								
6a		-									
	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	-									
	were not tax deductible?		6b								
7	Organizations that may receive deductible contributions under section 170(c).										
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services		7a		X						
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b								
С											
	to file Form 8282?		7c		Х						
d											
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contra	ľ	7e 7f		X						
f	3 , 3 , 11 , 1 ,										
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?										
8	 h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 										
Ü	sponsoring organizations maintaining donor advised failus. Bid a donor advised failus maintaining donor advised failus advised	37/3	8								
9	Sponsoring organizations maintaining donor advised funds.										
а	Did the sponsoring organization make any taxable distributions under section 4966?	N/A	9a								
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	37 / 3	9b								
10	Section 501(c)(7) organizations. Enter:										
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a	, l									
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	+									
11	Section 501(c)(12) organizations. Enter:	'									
а	Gross income from members or shareholders N/A 11a	ı									
b	Gross income from other sources (Do not net amounts due or paid to other sources against										
	amounts due or received from them.)										
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 104	1?	12a								
b	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.										
а	Is the organization licensed to issue qualified health plans in more than one state?	N/A	13a								
	Note: See the instructions for additional information the organization must report on Schedule O.										
b	Enter the amount of reserves the organization is required to maintain by the states in which the	,									
	organization is licensed to issue qualified health plans	<u> </u>									
С	Enter the amount of reserves on hand	;			X						
14a	14a Did the organization receive any payments for indoor tanning services during the tax year?										
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O											
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration				17						
	excess parachute payment(s) during the year?		15		X						
40	If "Yes," see instructions and file Form 4720, Schedule N.	0			v						
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment inc	:ome'?	16		X						
	If "Yes," complete Form 4720, Schedule O.		Form	990	(2020)						

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 1									
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?									
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?									
4										
5										
6	Did the organization have members or stockholders?	6		X						
7a	Did the organization have members, stockholders, or other persons who had the power to elect or 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	Х							
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		Х						
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						
	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	1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?									
b	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.									
12a										
b	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									
	in Schedule O how this was done	12c	Х							
13	Did the organization have a written whistleblower policy?	13	X							
14	Did the organization have a written document retention and destruction policy?	14	X							
15	Did the process for determining compensation of the following persons include a review and 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	Х							
b	Other officers or key employees of the organization	15b		Х						
	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 ►MD , 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.									
	X 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, an	d finaı	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									
	CRYSTAL LEWIS - 202-370-3213									
	820 FIRST STREET NE, STE LL160, WASHINGTON, DC 20002									

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Form **990** (2020)

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.

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

See instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					h an	(D) Reportable compensation	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line) (lint any hours for related organizations below line)		from the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations					
(1) ANNIE KATE SCOTT	40.00			77				126 760	0	F 010
EXECUTIVE DIRECTOR	1.00			Х				136,760.	0.	5,812.
(2) ROBERT DINERSTEIN PRESIDENT	1.00	Х		х				0.	0.	0.
(3) PETER EDELMAN	1.00	^		Λ				0.	0.	0.
1ST VICE PRESIDENT	1.00	Х		х				0.	0.	0.
(4) SUNIL MANSUKHANI	1.00			22					0.	
TREASURER	1.00	x		х				0.	0.	0.
(5) SUE MARSHALL	1.00	-								
SECRETARY		х		х				0.	0.	0.
(6) KATY NEAS	1.00							-		
DIRECTOR		Х						0.	0.	0.
(7) OLIVIER KAMANDA	1.00									
DIRECTOR		Х						0.	0.	0.
(8) REBECCA CROOTOF	1.00									
DIRECTOR		Х						0.	0.	0.
(9) JACKIE SIMON	1.00									
DIRECTOR		Х						0.	0.	0.
(10) REV. CAMERON BYRD	1.00									
DIRECTOR	1	Х						0.	0.	0.
(11) GEORGE RUTTINGER	1.00	l								•
DIRECTOR	1 00	Х						0.	0.	0.
(12) LEVI CHRISTIAN PEARSON	1.00	,,							0	0
DIRECTOR		Х						0.	0.	0.
		ł								
		\vdash	\vdash		<u> </u>	\vdash	\vdash			
		1								
	1					\vdash				
		1								
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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
(A) Name and title	(B) Average hours per week	box, offic	not c , unle	Posi heck r ss per nd a di	ition more rson i	than o	n an	(D) Reportable compensation from	(E) Reportable compensation from related	on d	an	(F) stimate nount other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MIS	l '			e ion ed
4.01111								136,760.		0.		5,8	1 2
1b Subtotal c Total from continuation sheets to Part VI								0.		0.			0.
d Total (add lines 1b and 1c)							<u> </u>	136,760.	000 of roportab	0.		5,8	12.
compensation from the organization	or invited to the	1036	iiste	ou at	JOVE	<i>5)</i> WI	10 1	eceived more than \$100	,,000 or reportab	10		Vaa	1
3 Did the organization list any former officer,	director, trust	ee, k	сеу е	empl	oye	e, or	hiç	ghest compensated emp	oloyee on			Yes	No
line 1a? If "Yes," complete Schedule J for s 4 For any individual listed on line 1a, is the su								her compensation from			3		X
and related organizations greater than \$150	0,000? <i>If</i> "Yes,	" co	mple	ete S	Sche	edule	J i	for such individual			4		Х
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com	-				-			-			5		Х
Section B. Independent Contractors													
 Complete this table for your five highest co the organization. Report compensation for 										npens	ation t	rom	
(A) Name and business	address	NC	ONI	3				(B) Description of s	ervices	C	(C compe		n
2 Total number of independent contractors (i \$100,000 of compensation from the organi.)		ot lir	nite	d to	thos	_	stec	d above) who received n	nore than				
, , , , , , , , , , , , , , , , , , , ,	-										Form	990 (2020)

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Part VIII Statement of Revenue

			Check if Schedule O conta	ins a response	or note to any lin	e in this Part VIII			
				'	,	(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded
							function revenue	business revenue	from tax under sections 512 - 514
σω				1.1					000110110 0 12 0 1 1
lut au			Federated campaigns						
اع ق			Membership dues						
Αţ			Fundraising events						
를 를			Related organizations		505 604				
in,	•	е	Government grants (contribution	ons) 1e	505,691.				
흡	1	f	All other contributions, gifts, grants	s, and					
혈美			similar amounts not included above	e 1f	50,590.				
Contributions, Gifts, Grants and Other Similar Amounts	9	g	Noncash contributions included in lines	1a-1f 1g \$					
ပ္ပဲ မြ	ı	h	Total. Add lines 1a-1f			556,281.			
					Business Code				
ø	2 :	а	CONTRACTS		900099	281,310.	281,310.		
اگر خ			MEMBERSHIP	_	900099	75,000.	75,000.		
Ser			SETTLEMENTS AND	AWARDS	900099	26,483.	26,483.		
E §	Ì		ONLINE TRAINING		900099	1,540.	1,540.		
Pg		<u>-</u>			70007				
Program Service Revenue	,	e f	All other program service rever						
	'					384,333.			
	3	y	Total. Add lines 2a-2f			304,333.			
	3					2,986.			2,986.
			other similar amounts)			2,500.			2,500.
	4				•				
	5		Royalties	(i) Real	(ii) Personal				
	_			(i) neai	(II) Personal				
			Gross rents 6a						
			Less: rental expenses 6b						
			Rental income or (loss) 6c						
			Net rental income or (loss)	(i) Casa witing					
	7 :	а	Gross amount from sales of	(i) Securities	(ii) Other				
			assets other than inventory 7a						
	١	b	Less: cost or other basis						
ž			and sales expenses						
Revenue	•	С	Gain or (loss) 7c						
Ř			Net gain or (loss)						
ther	8	а	Gross income from fundraising eve	ents (not					
0			including \$	of					
			contributions reported on line	1c). See					
			Part IV, line 18						
	١	b	Less: direct expenses	8b					
			Net income or (loss) from funda						
	9 ;	а	Gross income from gaming act	ivities. See					
			Part IV, line 19	9a					
	ı	b	Less: direct expenses	9b					
	(С	Net income or (loss) from gami	ng activities					
	10 a	а	Gross sales of inventory, less r	eturns					
			and allowances	10a					
	-	b	Less: cost of goods sold	10b					
	(С	Net income or (loss) from sales	of inventory	>				
<u>v</u>					Business Code				
Miscellaneous Revenue	11 :	а							
enc	ı	b							
ě e	(С							
Mis	(d	All other revenue						
			Total. Add lines 11a-11d						
	12		Total revenue. See instructions			943,600.	384,333.	0.	2,986.

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Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	ion 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a respon	'		, , ,	
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	Total expenses	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,	146 770	110 070	20 254	7 220
	trustees, and key employees	146,772.	110,079.	29,354.	7,339
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	C70 F40	F7F 24F	00 045	12 250
7	Other salaries and wages	679,542.	575,345.	90,845.	13,352
8	Pension plan accruals and contributions (include	16 206	14 010	2 070	200
	section 401(k) and 403(b) employer contributions)	16,386.	14,018.	2,079.	289 895
9	Other employee benefits	43,167.	36,489.	5,783.	
10	Payroll taxes	68,323.	56,981.	9,687.	1,655
11	Fees for services (nonemployees):				
а	Management				
b	Legal	40 114	15 650	06 440	
С	Accounting	42,114.	15,672.	26,442.	
d	, , , , , , , , , , , , , , , , , , , ,				
е	ř ,				
f	Investment management fees				
g	,	E0 00E	P4 PP4		202
	column (A) amount, list line 11g expenses on Sch O.)	72,097.	71,774.		323
12	Advertising and promotion	130.	25 552	0.740	130
13	Office expenses	45,493.	35,759.	8,742.	992
14	Information technology				
15	Royalties	106 004	104 550	10.010	2 44 5
16	Occupancy	126,034.	104,668.	18,249.	3,117
17	Travel	6,407.	5,811.	596.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0.546		0.604	4.0
19	Conferences, conventions, and meetings	2,716.	83.	2,621.	12
20	Interest				
21	Payments to affiliates	4 -40	2 7 4 2		444
22	Depreciation, depletion, and amortization	4,513.	3,748.	653.	112
23	Insurance	5,138.	4,267.	744.	127
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	TESTING	30,344.	30,344.		
a b	EQUIP. REPAIR. & MAINT.	13,953.	8,965.	4,721.	267
c	DUES & SUBSCRIPTIONS	5,278.	. , , , , ,	-,	5,278
d	STAFF TRAIN. & RECRUIT.	2,852.	500.	2,222.	130
	All other expenses	845.	845.	_,	
25	Total functional expenses. Add lines 1 through 24e	1,312,104.	1,075,348.	202,738.	34,018
26	Joint costs. Complete this line only if the organization	_,,	=,:::,020	= ,	,
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
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Form 990 (2020) Part X | Balance Sheet

Balance Sheet					
Check if Schedule O contains a response or no	te to an	y line in this Part X			X
			(A) Beginning of year		(B) End of year
Cash - non-interest-bearing		93,263.	1	39,306.	
Savings and temporary cash investments		1,438,148.	2	1,218,853.	
Pledges and grants receivable, net			3		
Accounts receivable, net		155,239.	4	235,329.	
Loans and other receivables from any current o					
trustee, key employee, creator or founder, subs	contributor, or 35%				
controlled entity or family member of any of the	se pers	ons		5	
Loans and other receivables from other disqual	ified pe	rsons (as defined			
under section 4958(f)(1)), and persons describe	d in sec	ction 4958(c)(3)(B)		6	
Notes and loans receivable, net				7	
Inventories for sale or use				8	
Prepaid expenses and deferred charges			2,820.	9	15,686.
Land, buildings, and equipment: cost or other					
basis. Complete Part VI of Schedule D		48,703.	44 00-		10 - 10
Less: accumulated depreciation	36,134.	11,237.	10c	12,569.	
Investments - publicly traded securities				11	
Investments - other securities. See Part IV, line		12			
Investments - program-related. See Part IV, line		13			
Intangible assets			10 211	14	10 211
Other assets. See Part IV, line 11			18,311.	15	18,311.
Total assets. Add lines 1 through 15 (must equ			1,719,018.	16	1,540,054.
Accounts payable and accrued expenses			26,242.	17	65,464.
Grants payable	94,000.	18	60 000		
Deferred revenue	94,000.	19	69,000.		
Tax-exempt bond liabilities				20	
Escrow or custodial account liability. Complete				21	
Loans and other payables to any current or form					
trustee, key employee, creator or founder, subs				00	
controlled entity or family member of any of the				22	
Secured mortgages and notes payable to unrela				23	173,491.
Unsecured notes and loans payable to unrelate				24	1/3,451.
Other liabilities (including federal income tax, pa parties, and other liabilities not included on lines					
of Cobodulo D	•		85,333.	25	87,160.
Total liabilities. Add lines 17 through 25			205,575.	26	395,115.
Organizations that follow FASB ASC 958, che					333,223.
and complete lines 27, 28, 32, and 33.	JOIN 11101				
Net assets without donor restrictions			1,480,649.	27	1,144,939.
Net assets with donor restrictions			32,794.	28	0.
Organizations that do not follow FASB ASC 9					
and complete lines 29 through 33.	,	,			
				29	
				30	
				31	
			1,513,443.	32	1,144,939.
			1,719,018.	33	1,540,054.
and c Capita Paid-i Retain Total	complete lines 29 through 33. al stock or trust principal, or current funds in or capital surplus, or land, building, or ended earnings, endowment, accumulated in net assets or fund balances	complete lines 29 through 33. al stock or trust principal, or current funds in or capital surplus, or land, building, or equipment ned earnings, endowment, accumulated income, net assets or fund balances		complete lines 29 through 33. al stock or trust principal, or current funds in or capital surplus, or land, building, or equipment fund ned earnings, endowment, accumulated income, or other funds net assets or fund balances 1,513,443.	complete lines 29 through 33. al stock or trust principal, or current funds in or capital surplus, or land, building, or equipment fund ned earnings, endowment, accumulated income, or other funds net assets or fund balances 1,513,443.32

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	9 <u>4</u> 1,31		00.				
2	Total expenses (must equal Part IX, column (A), line 25)								
3	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	5 Net unrealized gains (losses) on investments5								
6	Donated services and use of facilities	6							
7	Investment expenses	7							
8									
9	Other changes in net assets or fund balances (explain on Schedule O)								
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,								
	column (B)) 10								
Part 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 X Accrual Other								
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.								
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?								
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	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	Х					
	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,							
	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 on Scl	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 Si	ngle 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 requ								
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits								
			Form	990	(2020)				

THE EQUAL RIGHTS CENTER

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization THE EOUAL RIGHTS CENTER 52-1297949 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Total

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

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

Sec	ction A. Public Support												
Cale	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total						
1	Gifts, grants, contributions, and												
	membership fees received. (Do not												
	include any "unusual grants.")	535,094.	456,562.	619,151.	530,889.	556,281.	2,697,977.						
2	Tax revenues levied for the organ-						_						
	ization's benefit and either paid to												
	or expended on its behalf												
3	The value of services or facilities						_						
	furnished by a governmental unit to												
	the organization without charge												
4	Total. Add lines 1 through 3	535,094.	456,562.	619,151.	530,889.	556,281.	2,697,977.						
5	The portion of total contributions												
	by each person (other than a												
	governmental unit or publicly												
	supported organization) included												
	on line 1 that exceeds 2% of the												
	amount shown on line 11,												
	column (f)						53,630.						
6	Public support. Subtract line 5 from line 4.						2,644,347.						
Sec	Section B. Total Support												
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total						
7	Amounts from line 4	535,094.	456,562.	619,151.	530,889.	556,281.	2,697,977.						
8	Gross income from interest,												
	dividends, payments received on												
	securities loans, rents, royalties,												
	and income from similar sources		4,333.	13,536.	20,683.	2,986.	41,538.						
9	Net income from unrelated business												
	activities, whether or not the												
	business is regularly carried on												
10	Other income. Do not include gain												
	or loss from the sale of capital												
	assets (Explain in Part VI.)	15,340.	2,561.	430.			18,331.						
11	Total support. Add lines 7 through 10						2,757,846.						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 4	,988,979.						
13	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3)							
_	organization, check this box and stop						<u></u>						
	ction C. Computation of Publ					 	05 00						
14	Public support percentage for 2020 (I					14	95.88 %						
15	Public support percentage from 2019					15	94.26 %						
16a	33 1/3% support test - 2020. If the o	•		•		•							
	stop here. The organization qualifies						<u>X</u>						
b	33 1/3% support test - 2019. If the c						is box						
	and stop here. The organization qual						▶□						
17a	10% -facts-and-circumstances tes	_											
	and if the organization meets the fact		•	-		•							
	meets the facts-and-circumstances to	_			-								
b	10% -facts-and-circumstances tes	_					U% or						
	more, and if the organization meets the				-		,						
	organization meets the facts-and-circ												
<u>18</u>	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	and see instructions	······· P						

Schedule A (Form 990 or 990-EZ) 2020

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

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

Se	ction A. Public Support	siow, picase com	piete i dit ii.)				
	endar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Gifts, grants, contributions, and		` ,	` ,	<u> </u>	` `	` ` `
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that					1	
J	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
4	ization's benefit and either paid to or expended on its behalf						
_						+	
5	The value of services or facilities furnished by a governmental unit to						
_	the organization without charge					+	
	Total. Add lines 1 through 5			-	-		
/ 6	a Amounts included on lines 1, 2, and 3 received from disqualified persons						
ŀ	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
(Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
Cale	endar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
ŀ	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)				<u> </u>		
14	First 5 years. If the Form 990 is for the	e organization's f	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizat	ion,
_	check this box and stop here						>
	ction C. Computation of Publ					1 1	
	Public support percentage for 2020 (I					15	%
	Public support percentage from 2019					16	%
Se	ction D. Computation of Inves		<u>~</u> _				
17	Investment income percentage for 20					17	%
18	Investment income percentage from 2					18	%
19	a 33 1/3% support tests - 2020. If the						17 is not
ŀ	more than 33 1/3%, check this box at 33 1/3% support tests - 2019. If the						▶Ш and
•	line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation. If the organizatio						

032023 01-25-21

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
3с		
_		
4a		
4b		
4c		
5a		
Ja		
5b		
5c		
6		
7		
8		
0-		
9a		
9b		
9с		
10a		
46:		
10b		

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

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Orgai	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on	Nov. 20, 1970 (explain in I	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	t complete	e Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ılly integrat	ed Type III supporting org	anization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2020

Par	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)								
Secti	ection D - Distributions Current Year								
1	Amounts paid to supported organizations to accomplish exe		1						
2	Amounts paid to perform activity that directly furthers exempt								
	organizations, in excess of income from activity		2						
3	Administrative expenses paid to accomplish exempt purpos	es of supported organizatior	ns	3					
4	Amounts paid to acquire exempt-use assets			4					
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5					
6	Other distributions (describe in Part VI). See instructions.			6					
7	Total annual distributions. Add lines 1 through 6.			7					
8	Distributions to attentive supported organizations to which t	he organization is responsive	e l						
	(provide details in Part VI). See instructions.			8					
9	Distributable amount for 2020 from Section C, line 6			9					
10	Line 8 amount divided by line 9 amount			10					
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020		(iii) Distributable Amount for 2020				
1	Distributable amount for 2020 from Section C, line 6								
2	Underdistributions, if any, for years prior to 2020 (reason-								
	able cause required - explain in Part VI). See instructions.								
3	Excess distributions carryover, if any, to 2020								
а	From 2015								
b	From 2016								
С	From 2017								
d	From 2018								
е	From 2019								
f	Total of lines 3a through 3e								
g	Applied to underdistributions of prior years								
h	Applied to 2020 distributable amount								
i_	Carryover from 2015 not applied (see instructions)								
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.								
4	Distributions for 2020 from Section D,								
	line 7: \$								
а	Applied to underdistributions of prior years								
b	Applied to 2020 distributable amount								
c	Remainder. Subtract lines 4a and 4b from line 4.								
5	Remaining underdistributions for years prior to 2020, if								
	any. Subtract lines 3g and 4a from line 2. For result greater								
	than zero, explain in Part VI. See instructions.								
6	Remaining underdistributions for 2020. Subtract lines 3h								
	and 4b from line 1. For result greater than zero, explain in								
	Part VI. See instructions.								
7	Excess distributions carryover to 2021. Add lines 3j								
	and 4c.								

Schedule A (Form 990 or 990-EZ) 2020

8 Breakdown of line 7:
 a Excess from 2016
 b Excess from 2017
 c Excess from 2018
 d Excess from 2019
 e Excess from 2020

Part VI	Supplemental Information Devide the evaluations required by Dart II, line 10: Dart II, line 17: or 17h; Dart III, line 19:
i dit vi	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12;
	Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V,
	line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V,
	Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
	(See instructions.)
_	

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

2020

Name of the organization

THE EQUAL RIGHTS CENTER

52-1297949

Organization type (check one):

Filers of: Section:

Form 990 or 990-EZ X 501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ______ 🕨 \$ _

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Name of organization

Employer identification number

THE EQUAL RIGHTS CENTER

52-1297949

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 20,625.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for

Name of organization Employer identification number

THE EQUAL RIGHTS CENTER

52-1297949

Part II	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	

Employer identification number

Name of organization

	UAL RIGHTS CENTER			52-1297949
t III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional) through (e) and the following line encharitable, etc., contributions of \$1,000 or	ry For organizations	
lo. n t l	(b) Purpose of gift	(c) Use of gift	(d) Descrip	otion of how gift is held
-		(e) Transfer of gif		
	Transferee's name, address, a	nd ZIP + 4	Relationship of trans	feror to transferee
). 	(b) Purpose of gift	(c) Use of gift	(d) Descri	otion of how gift is held
	Transferee's name, address, a	(e) Transfer of gif	Relationship of trans	feror to transferee
). 	(b) Purpose of gift	(c) Use of gift	(d) Descri	otion of how gift is held
-	Transferee's name, address, a	(e) Transfer of gif	t Relationship of trans	eferor to transferee
).).				
D. 1 1	(b) Purpose of gift	(c) Use of gift	(d) Descri	otion of how gift is held
	Transferee's name, address, a	l (e) Transfer of gif nd ZIP + 4	t Relationship of trans	feror to transferee

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

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) organiza	tions: Complete Part III.			
Name	e of organization				Em	ployer identification number
			AL RIGHTS CENTER			52-1297949
Pai	rt I-A Complete if	the org	janization is exempt unde	er section 501(c)	or is a section 527	organization.
2	Political campaign activity	y expendit	ration's direct and indirect politica ures gn activities		>	\$
Pai	rt I-B Complete if	the org	janization is exempt unde	er section 501(c)(3).	
1	Enter the amount of any	excise tax	incurred by the organization und	er section 4955	>	\$
2	Enter the amount of any	excise tax	incurred by organization manage	rs under section 4955		\$
3	If the organization incurre	ed a sectio	n 4955 tax, did it file Form 4720 f	or this year?		Yes No
4a	Was a correction made?					Yes No
	If "Yes," describe in Part					
Pai	rt I-C Complete if	the org	janization is exempt unde	er section 501(c),	<u> </u>	
	•	•	d by the filing organization for sec	•		\$
		0 0	ization's funds contributed to oth	· ·		
						\$
			a. Add lines 1 and 2. Enter here ar			•
4	line 1/b		4400 DOI for this was 2			Yes No
			1120-POL for this year?nployer identification number (EIN			
	made payments. For each contributions received the	h organiza at were pr	tion listed, enter the amount paid omptly and directly delivered to a additional space is needed, provi	from the filing organiz separate political orga	ation's funds. Also enter anization, such as a sepa	the amount of political
	·	<i>i</i> (1 AO). 11	•		1	(a) Amount of molitical
	(a) Name		(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	contributions received and

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

Schedule C (Form 990 or 990-EZ) 2020

LHA

032041 12-02-20

Sche	edule C (F	orm 990 or 990-EZ) 2020						297949 Page 2
Pai	rt II-A	Complete if the org	ganization is ex	empt und	er sectio	n 501(c)(3) and fil	led Form 5768 (el	ection under
A CI	heck >	if the filing organiza	ation belongs to an a	-		Part IV each affiliated	I group member's nam	e, address, EIN,
B CI	heck >	_ ' '	ation checked box A	· .	,	visions apply.		
		Limi	its on Lobbying Ex _l ditures" means am	penditures			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lob	bying expenditures to infl	uence public opinio	n (grassroots	lobbying)		0.	
b	Total lob	bying expenditures to infl	uence a legislative b	ody (direct lo	obbying)		0.	
С	Total lob	bying expenditures (add I	ines 1a and 1b)				0.	
d	Other ex	kempt purpose expenditur	es				1,312,104.	
е	Total ex	empt purpose expenditure	es (add lines 1c and	1d)			1,312,104.	
f	Lobbyin	g nontaxable amount. Ent	er the amount from	the following	table in bot	h columns.	206,210.	
	If the am	ount on line 1e, column (a) (or (b) is: The I	obbying non	taxable am	ount is:		
	Not ove	r \$500,000	20%	of the amoun	t on line 1e.			
	Over \$5	00,000 but not over \$1,00	0,000 \$100	000 plus 15%	6 of the exc	ess over \$500,000.		
	Over \$1	,000,000 but not over \$1,5	500,000 \$175	\$175,000 plus 10% of the excess over \$1,000,000.				
	Over \$1	,500,000 but not over \$17	,000,000 \$225	\$225,000 plus 5% of the excess over \$1,500,000.				
	Over \$1	7,000,000	\$1,00	0,000.				
·						•		
g	Grassro	ots nontaxable amount (er	nter 25% of line 1f)				51,553.	
h	Subtrac	t line 1g from line 1a. If zer	o or less, enter -0-				0.	
i	Subtrac	t line 1f from line 1c. If zer	o or less, enter -0				0.	
j	If there	s an amount other than ze	ero on either line 1h	or line 1i, did	the organiz	ation file Form 4720		
	reportin	g section 4911 tax for this	year?					Yes No
4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)								
			Lobbying Exp	enditures D	uring 4-Yea	ar Averaging Period		
		Calendar year al year beginning in)	(a) 2017	(b)	2018	(c) 2019	(d) 2020	(e) Total

Lobbying Expenditures During 4-Year Averaging Period								
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total			
2a Lobbying nontaxable amount	201,834.	199,922.	206,443.	206,210.	814,409.			
b Lobbying ceiling amount (150% of line 2a, column(e))					1,221,614.			
c Total lobbying expenditures		143.			143.			
d Grassroots nontaxable amount	50,459.	49,981.	51,611.	51,553.	203,604.			
e Grassroots ceiling amount (150% of line 2d, column (e))					305,406.			
f Grassroots lobbying expenditures					200 200 571 2000			

Schedule C (Form 990 or 990-EZ) 2020

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)).

1 Du loc	bbying activity.	(a)		(b)		
loc or		Yes	N	lo	Amo	ount
or	uring the year, did the filing organization attempt to influence foreign, national, state, or					
	cal legislation, including any attempt to influence public opinion on a legislative matter					
a Vo	referendum, through the use of:					
	olunteers?					
b Pa	aid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
с Ме	edia advertisements?					
	ailings to members, legislators, or the public?					
	ublications, or published or broadcast statements?					
	rants to other organizations for lobbying purposes?					
	rect contact with legislators, their staffs, government officials, or a legislative body?					
	allies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	ther activities?					
	otal. Add lines 1c through 1i					
	d the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
	"Yes," enter the amount of any tax incurred under section 4912					
	"Yes," enter the amount of any tax incurred by organization managers under section 4912					
	the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	II-A Complete if the organization is exempt under section 501(c)(4), secti	on 501(c)	1(5).	or se	ction	
	501(c)(6).	(-,	,,-,,			
					Yes	N
1 W	ere substantially all (90% or more) dues received nondeductible by members?			1		
	ere substantially all (90% or more) dues received nondeductible by members?			2		
2 Did 3 Did	d the organization make only in-house lobbying expenditures of \$2,000 or less? d the organization agree to carry over lobbying and political campaign activity expenditures from to the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	ne prior yea	ar?)(5), (2 3 or se		ne 3, i
2 Did 3 Did Part II	d the organization make only in-house lobbying expenditures of \$2,000 or less? d the organization agree to carry over lobbying and political campaign activity expenditures from telestical complete if the organization is exempt under section 501(c)(4), section	ne prior yea on 501(c) "No" OF	ar?)(5), (2 3 or se		ne 3, i
2 Did 3 Did Part II 1 Du	d the organization make only in-house lobbying expenditures of \$2,000 or less? d the organization agree to carry over lobbying and political campaign activity expenditures from to the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	ne prior yea on 501(c) "No" OF	ar?)(5), (2 3 or se Part		ne 3, i
2 Did 3 Did 2 art II 1 Du 2 Se	d the organization make only in-house lobbying expenditures of \$2,000 or less? d the organization agree to carry over lobbying and political campaign activity expenditures from to the organization agree if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Just 1 and 2 are answered answered answered answered section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	ne prior yea on 501(c) "No" OF	ar?)(5), (2 3 or se Part		ne 3, i
2 Did 3 Did 2 art II 1 Du 2 Se ex	d the organization make only in-house lobbying expenditures of \$2,000 or less? d the organization agree to carry over lobbying and political campaign activity expenditures from to the organization agree to carry over lobbying and political campaign activity expenditures from to the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Les, assessments and similar amounts from members ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures).	ne prior yea on 501(c) "No" OF	ar?)(5), (3)	2 3 or se Part		ne 3,
Did Did Did Did Did Did Did Did Did Did	d the organization make only in-house lobbying expenditures of \$2,000 or less? d the organization agree to carry over lobbying and political campaign activity expenditures from to the organization agree to carry over lobbying and political campaign activity expenditures from to the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Les, assessments and similar amounts from members ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Lurrent year	ne prior yea on 501(c) "No" OF	ar?)(5), (3)	2 3 or se Part		ne 3, i
2 Did 3 Did cart II 1 Du 2 See ex a Cu b Ca	d the organization make only in-house lobbying expenditures of \$2,000 or less? d the organization agree to carry over lobbying and political campaign activity expenditures from to the organization agree to carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Les, assessments and similar amounts from members section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Lurrent year arryover from last year	ne prior yea on 501(c) "No" OF	ar? (5), (5), (7)	2 3 or se Part		ne 3,
2 Did 3 Did 2 To 1 Du 2 See ex a Cu b Ca	d the organization make only in-house lobbying expenditures of \$2,000 or less? d the organization agree to carry over lobbying and political campaign activity expenditures from to the organization agree to carry over lobbying and political campaign activity expenditures from to the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Les, assessments and similar amounts from members ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Lurrent year	ne prior yea on 501(c) "No" OF	ar?)(5), (R (b)	2 3 or se Part 1		ne 3, i
2 Did 3 Did 2 Part II 1 Du 2 Se ex a Cu b Ca c To 3 Ag	d the organization make only in-house lobbying expenditures of \$2,000 or less? d the organization agree to carry over lobbying and political campaign activity expenditures from to the organization agree to carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Les, assessments and similar amounts from members election 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Lurrent year earryover from last year otal	ne prior yea on 501(c) "No" OF	ar?)(5), (R (b)	2 3 or se Part 1 2a 2b 2c		ne 3, i
2 Did 2 Did 2 See 2 See 2 Cu 3 Ag 4 If r	d the organization make only in-house lobbying expenditures of \$2,000 or less? d the organization agree to carry over lobbying and political campaign activity expenditures from to the organization agree to carry over lobbying and political campaign activity expenditures from to the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Les, assessments and similar amounts from members exection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Lurrent year earryover from last year organization for the organization of the organization of the organization of the organization is exempt under section 162(e) dues organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	ne prior yea on 501(c) "No" OF	ar?)(5), (R (b)	2 3 or se Part 1 2a 2b 2c		ne 3, i
2 Did 3 Did 2 Part II 1 Du 2 See ex a Cu b Ca c To 3 Ag 4 If r	d the organization make only in-house lobbying expenditures of \$2,000 or less? d the organization agree to carry over lobbying and political campaign activity expenditures from to the organization agree to carry over lobbying and political campaign activity expenditures from to the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Les, assessments and similar amounts from members exercion 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Lurrent year earry over from last year organization amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenses for the organization agreement of the content of the section 162(e) dues notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenses for the organization agreement of the section 162(e) dues notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenses for the organization agreement of the organization and the amount on line 2c exceeds the amount on line 2.	ne prior yea on 501(c) "No" OF	ar?)(5), (R (b)	2 3 or se Part 1 2a 2b 2c		ne 3, i
2 Did 3 Did 2 Did 1 Du 2 See ex a Cu b Ca c To 3 Ag 4 If r do ex	d the organization make only in-house lobbying expenditures of \$2,000 or less? d the organization agree to carry over lobbying and political campaign activity expenditures from to the organization agree to carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Les, assessments and similar amounts from members ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Lurrent year earryover from last year earryover from last year earryover from last year earryover section 162(e) dues expenditures were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenses the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures of nondeduct	ne prior yea on 501(c) "No" OF cal cess political	ar?)(5), (R (b)	2 3 or se Part 1 2a 2b 2c 3		ne 3, i

Schedule C (Form 990 or 990-EZ) 2020

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

THE EQUAL RIGHTS CENTER

Employer identification number 52-1297949

Pai	t I Organizations Maintaining Donor Advise		s or Accounts Complete if the				
ı aı			3 Of Accounts. Complete if the				
	organization answered "Yes" on Form 990, Part IV, lin	(a) Donor advised funds	(b) Funds and other accounts				
_	Tatal mounth on at and of coon	(a) Borior advised failes	(b) I dilas 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		16.1				
5	Did the organization inform all donors and donor advisors in	_					
_	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 of	or donor advisor, or for any other purpose					
Do							
Pai		·	Part IV, line 7.				
1	Purpose(s) of conservation easements held by the organizati						
	Preservation of land for public use (for example, recrea		f a historically important land area				
	Protection of natural habitat	Preservation o	f a certified historic structure				
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualit	fied 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 str	ucture included in (a)	2c				
d	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic struc	ture				
	listed in the National Register		2d				
3	Number of conservation easements modified, transferred, re-	leased, extinguished, or terminated by th	ne organization during the tax				
	year ▶						
4	Number of states where property subject to conservation ea	sement is located >					
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	<u></u>				
	violations, and enforcement of the conservation easements it	t holds?	Yes				
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	dling of violations, and enforcing conserv	ation easements during the year				
	> \$						
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 17	O(h)(4)(B)(i)				
	and section 170(h)(4)(B)(ii)?		Yes No				
9	In Part XIII, describe how the organization reports conservati	on easements in its revenue and expens	e statement and				
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial staten	nents that describes the				
	organization's accounting for conservation easements.						
Pai	Part III Organizations Maintaining Collections of Art, Historical Treasures, or 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 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 items.						
b							
	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		> \$				
	(ii) Assets included in Form 990, Part X						
2	If the organization received or held works of art, historical tre						
	the following amounts required to be reported under FASB A						
а	Revenue included on Form 990, Part VIII, line 1	_	> \$				
	Assets included in Form 990, Part X						

032051 12-01-20

Schedule D (Form 990) 2020

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

Pai	t III Organizations Maintaining C	ollections of A	rt, Hist	torical Tr	easures, o	r Other	Simila	r Asse	ts (contir	nued)	
3	3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its										
	collection items (check all that apply):										
а	Public exhibition	c	ı 🖳 ı	Loan or exc	hange progra	m					
b	Scholarly research	e	• 🔲	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	in how th	ney further t	he organizatio	on's exemp	pt purpos	se in Par	XIII.		
5	During the year, did the organization solicit o	r receive donations	of art, hi	storical trea	sures, or othe	er similar a	ssets		_		
	to be sold to raise funds rather than to be ma								Yes		No
Pai	t IV Escrow and Custodial Arrange reported an amount on Form 990, Par	•	ete if the	organizatio	n answered "	Yes" on F	orm 990,	Part IV,	line 9, or	•	
1a	Is the organization an agent, trustee, custodi on Form 990, Part X?		-						Yes		No
b	If "Yes," explain the arrangement in Part XIII										
									Amoun	t	
С	Beginning balance						1c		Amount		
	Additions during the year										
	Distributions during the year										
f	Ending balance						1f				
2a	Did the organization include an amount on Fo								Yes		No
	If "Yes," explain the arrangement in Part XIII.					•			_]
Pai											
	'	(a) Current year	(b) P	rior year	(c) Two years	s back (d) Three yea	ars back	(e) Four	years	back
1a	Beginning of year balance	•		•	, , , , ,					-	
b	Contributions										
С	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 year end baland	ce (line 1	g, column (a	a)) held as:						
а	Board designated or quasi-endowment	•	%								
b	Permanent endowment	%									
		 %									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.									
За	Are there endowment funds not in the posse	· ·	ation tha	at are held a	nd administer	red for the	e organiza	ition			
	by:	J					Ü		[Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								\ \\\		
b	If "Yes" on line 3a(ii), are the related organiza										
4	Describe in Part XIII the intended uses of the									•	
Pai	t VI Land, Buildings, and Equipm										
	Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.										
	Description of property	(a) Cost or o			or other		umulated		(d) Boo	k value	
	basis (investment) basis (other) depreciation										
	Land	·	•								
	Buildings										
	Leasehold improvements			1	0,272.		2,83	1.		7,4	41.
d	Equipment				8,431.	3	33,30			5,1	
e	Other										

Schedule D (Form 990) 2020

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

12,569.

Schedule D (Form 990) 2020 THE EQUAL R	IGHTS CENTER	52	-1297949 Page
Part VII Investments - Other Securities.			
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 en	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F) (G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	on Form 990 Part IV line	e 11c. See Form 990. Part X. line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" o		e 11d. See Form 990, Part X, line 15.	1 635
(a) [Description		(b) Book value
<u>(1)</u>			
(2)			
(3)			
(4)			
(5)			
<u>(6)</u>			
(7) (8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line			
Part X Other Liabilities.	. 10.)		
Complete if the organization answered "Yes"	on Form 990. Part IV. line	e 11e or 11f. See Form 990. Part X. line 25	5.
1. (a) Description of liability	<u> </u>		(b) Book value
(1) Federal income taxes			
(2) DEFERRED RENT LIABILITY			87,160
(3)			
(4)			
(5)			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X Schedule D (Form 990) 2020

(6) (7) (8)

87,160.

Sche	edule D (Form 990) 2020 THE EQUAL RIGHTS CENTER			52-	1297949 Page
Pai	rt XI Reconciliation of Revenue per Audited Financial Stateme	ents With			
	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	1,555,103
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b			611,503.		
С					
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d			2e	611,503
3	Subtract line 2e from line 1			3	943,600
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а		4a			
b	Other (Describe in Part XIII.)				
	Add lines 4a and 4b			4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	943,600
	rt XII Reconciliation of Expenses per Audited Financial Statem				-
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		• •		
1	Total expenses and losses per audited financial statements			1	1,923,607
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			•	
a		2a	611,503.		
b					
C					
	Other losses Other (Describe in Part XIII.)				
				2e	611,503
3				3	1,312,104
4	Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:				1,012,101
		1401			
	Investment expenses not included on Form 990, Part VIII, line 7b				
	Other (Describe in Part XIII.)			40	0
	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i>)			4c 5	1,312,104
	rt XIII Supplemental Information.			5	1,312,104
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part	: IV lines 1h	and Ohi Dort V. line	4. Dort	V line Q. Dort VI
				4, Part	A, line 2, Part AI,
ines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add	itional infor	mation.		
ם א ד	RT X, LINE 2:				
FAI	XI A, DINE 2:				
₽∩I	R THE YEARS ENDED DECEMBER 31, 2020 AND 20	10 🕫	אר שאק הסכוו	MEN	חבר דתכ
·OI	THE TEARS ENDED DECEMBER 31, 2020 AND 20	19, EF	C HAS DOCU	MEN	IED IIS
~^1	NOTHEDANTON OF FACE ACC 740 10 INCOME MAY	EC MI		c c	HTDANCE EOD
COI	NSIDERATION OF FASB ASC 740-10, INCOME TAX	ES, II	AT PROVIDE	5 G	UIDANCE FOR
REI	PORTING UNCERTAINTY IN INCOME TAXES AND HA	S DETE	ERMINED THA	T N	O MATERIAL
UNC	CERTAIN TAX POSITIONS QUALIFY FOR EITHER R	ECOGNI	TION OR DI	SCL	OSURE IN
ΓHI	E FINANCIAL STATEMENTS.				

Schedule D (Form 990) 2020

SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ Go to www.irs.gov/Form990 for the latest information. Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

THE EQUAL RIGHTS CENTER

Employer identification number 52-1297949

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

OF THE YEAR, INCLUDING MATERIALS ABOUT FAIR HOUSING AND COVID-19.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS PREPARED BY THE OUTSIDE ACCOUNTANTS OF THE ORGANIZATION. MANAGEMENT REVIEWS THE FORM 990, AND THEN IT IS PRESENTED TO THE BOARD FOR REVIEW AND APPROVAL.

FORM 990, PART VI, SECTION B, LINE 12C:

DIRECTORS AND EMPLOYEES ARE ASKED TO VOLUNTARILY DISCLOSE ANY APPEARANCE OF CONFLICTS. WHEN THERE IS A POTENTIAL CONFLICT OF INTEREST, THE AFFECTED DIRECTOR RECUSES HIMSELF FROM DELIBERATIONS CONCERNING THE MATTER AND THE REMAINING BOARD MEMBERS DECIDE WHAT IS IN THE BEST INTEREST OF THE ORGANIZATION WITH RESPECT TO THE TRANSACTION IN OUESTION.

FORM 990, PART VI, SECTION B, LINE 15A:

THE COMPENSATION OF THE EXECUTIVE DIRECTOR IS REVIEWED BY THE ERC'S BOARD OF DIRECTORS WITH ANY ADJUSTMENTS CONSIDERED AND APPROVED BY THE ERC BOARD. THE MOST RECENT REVIEW OF THE EXECUTIVE DIRECTOR'S COMPENSATION WAS IN APRIL 2020.

THE COMPENSATION OF ALL ERC STAFF, EXCLUDING THE EXECUTIVE DIRECTOR, IS SET BY THE EXECUTIVE DIRECTOR IN CONSULTATION WITH THE ERC BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION C, LINE 19:

AUDITED FINANCIAL INFORMATION IS AVAILABLE IN THE ORGANIZATION'S ANNUAL LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) 2020

032211 11-20-20

Name of the organization THE EQUAL RIGHTS CENTER	Employer identification number 52-1297949
REPORT WHICH IS AVAILABLE ON ITS OWN WEBSITE AND UPON REQ	UEST. THE
ORGANIZATION'S FORM 990 IS AVAILABLE ON ITS WEBSITE AND	UPON REQUEST.
GOVERNING DOCUMENTS AND THE CONFLICT OF INTEREST POLICY O	F THE ORGANIZATION
ARE AVAILABLE UPON REQUEST.	
FORM 990, PART X, LINE 24:	
ON MAY 8, 2020 ERC RECEIVED LOAN PROCEEDS IN THE AMOUNT O	F \$173,491
UNDER THE PAYCHECK PROTECTION PROGRAM. THE PROMISSORY NOT	E CALLS FOR
MONTHLY PRINCIPAL AND INTEREST PAYMENTS AMORTIZED OVER TH	E TERM OF THE
PROMISSORY NOTE WITH A DEFERRAL OF PAYMENTS FOR THE FIRST	SIX MONTHS.
UNDER THE CORONAVIRUS AID, RELIEF, AND ECONOMIC SECURITY	ACT (CARES
ACT), THE PROMISSORY NOTE MAY BE FORGIVEN BY THE SMALL BU	SINESS
ADMINISTRATION IN WHOLE OR IN PART. ERC USED THE LOAN PRO	CEEDS FOR
PURPOSES CONSISTENT WITH THE PAYCHECK PROTECTION PROGRAM	AND APPLIED
FOR FORGIVENESS AFTER COMPLETING THE 24-WEEK PERIOD STIPU	LATED BY THE
TERMS OF THE LOAN.	
THE LOAN WAS FULLY FORGIVEN ON AUGUST 16, 2021, UPON WHIC	H ERC RECORDED
REVENUE FROM DEBT EXTINGUISHMENT DURING THE PERIOD THAT F	ORGIVENESS WAS
APPROVED.	