PUBLIC INSPECTION COPY

Form **990**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service **Return of Organization Exempt From Income Tax**

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

► Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information. OMB No. 1545-0047

Open to Public Inspection

Α	For the 2	2019 calen	dar year, or tax year begin	ning 4/01	, 20 ⁻	19, and ending	3/	31	,	2020
В	Check if ap	plicable:	С					D Employ	er identi	fication number
	Addres	ss change	American Civil L	iberties U	nion			76-0	0343	140
	Name	change	of Texas Inc.					E Telepho		
	Initial i	return	PO Box 8306	_				713	-942	-8146
		urn/terminated	Houston, TX 7728	8				710	<u> </u>	0110
		ded return						G Gross re	eceints (2,493,822.
	\vdash	ation pending	F Name and address of principa	l officer: D		. Тн	(a) Is this	a group retur		
	Дррпс	ation pending	Same As C Above	Ranjar	na Natarajai	п н	` '	subordinates attach a list.		
_	Tay oyon	npt status:	501(c)(3) X 501(c) (A	u) ◀ (insert	no.) 4947(a)(1)	or 527	If "No,"	" attach a list.	(see ins	tructions)
'	Websit			1) (1115611	110.) 4347(a)(1)					0101
K		organization:	w.aclutx.org				• •	exemption nu		2131 egal domicile: TX
		5	X Corporation Trust	Association O	ther •	L Year of formation	n: 199	T IN S	tate of le	egai domicile: 1X
Pa	rt I	Summar	bo the exacnization's missi	ion or most sign	ificant activities. 7	CIII a E Ma		T		haa
	1 Bri	leny descri	be the organization's missi	on or most signi	ilicant activities. A	CLU OI TE	xas,	Inc. o	pera	ces under a
ခွ	<u>CI</u>	narter	granted by the Ar foremost champion	<u>nerican Civ</u>	VII Libertie	es union_	(Natio	onal Ai	1111	ate, the
ш			on a broad range (
Ver			ox F if the organization							
Governance			oting members of the gover						3	21
•ઇ			dependent voting members						4	21
<u>:e</u>			of individuals employed in						5	0
Activities &	6 To	tal number	of volunteers (estimate if	necessary)					6	18,790
Ac			ed business revenue from F						7a	0.
	b Ne	t unrelated	d business taxable income	from Form 990-7	Γ, line 39		<u> </u>		7b	0.
								rior Year		Current Year
ø.			and grants (Part VIII, line		2,452,5	31.	2,460,192.			
Ĭ		-	vice revenue (Part VIII, line							
Revenue			ncome (Part VIII, column (A	•	•			7,9	90.	33,630.
—			e (Part VIII, column (A), lir						0.1	
			e – add lines 8 through 11					2,460,5		2,493,822.
			imilar amounts paid (Part I		•			29,1	49.	45,687.
		•	to or for members (Part I)	• •	•					
S			er compensation, employee					L,447,8	24.	1,663,634.
nse	16a Pro	ofessional	fundraising fees (Part IX, o	column (A), line	11e)					
Expenses	b To	tal fundrais	sing expenses (Part IX, col	umn (D), line 25	i) ►	223,117.				
ш	17 Oth	her expens	ses (Part IX, column (A), lir	nes 11a-11d, 11f				975,3	95.	518,367.
	18 To	tal expense	es. Add lines 13-17 (must e	equal Part IX, co	olumn (A), line 25)	2	2,452,3		2,227,688.
			expenses. Subtract line 1					8,1		266,134.
je s			· · · · · · · · · · · · · · · · · · ·				Beginnir	ng of Curren		End of Year
Net Assets Fund Balanc	20 To	tal assets	(Part X, line 16)					3,306,1		3,558,057.
Ass I Ba	21 To	tal liabilitie	es (Part X, line 26)					227,9		213,657.
ĕĕ	22 Ne	t assets or	fund balances. Subtract li	ne 21 from line :	20		3	3,078,2		3,344,400.
		Signatur						7,010,2	00.	3,311,100.
		_	eclare that I have examined this retu	ırn including accomp:	anving schedules and st	tatements, and to th	ne hest of m	ny knowledae	and heli	of it is true correct and
com	olete. Declar	ration of prepa	arer (other than officer) is based on	all information of which	ch preparer has any kno	wledge.		.yomougo	and bom	si, it is due, somest, and
		► Ele	ctronically File	d						
Sig	ın	Signatu	re of officer				Da	ate		
He	re	Ran	jana Natarajan				Pres	ident		
			print name and title							
		Print/Type p	oreparer's name	Preparer's signature	•	Date		Check	if	PTIN
Pa	id	Barbar	ra Murphy	Barbara	Murphy	2/19	/21	self-employe	ed	P01386215
	eparer	Firm's name								
Us	e Only	Firm's addre			00			Firm's EIN	76-	-0269860
			Houston, TX	•				Phone no.	(713	

May the IRS discuss this return with the preparer shown above? (see instructions)

No

Par	t III	Statement of Program Service Accomplishments	
		• · · · · · · · · · · · · · · · · · · ·	X
1	_	y describe the organization's mission:	
	<u>See</u>	Schedule 0	
	Did th	e organization undertake any significant program services during the year which were not listed on the prior	
2			
		990 or 990-EZ?	
2			
3		e organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No s," describe these changes on Schedule O.	
4		•	
4	Section	ibe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. on 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, evenue, if any, for each program service reported.	
4 a	(Code	e:) (Expenses \$ 583,770. including grants of \$) (Revenue \$)
	•	igrant Rights - Our legislative advocates worked with the members of the TRUST	.′
		lition and immigrant rights advocates to stop more than 20 anti-immigrant bills	
		ed in the 2019 Texas legislative session. The bills included one to repeal	
		state tuition for DACA recipients and another aiming to make English the official	
	<u> 1 a i i</u>		
4 b	(Code		_)
		ing Rights - In preparation for the 2020 election cycle, we lobbied county	
		ction officials across the state to mitigate the risk from the COVID-19 pandemic.	_
		advocated for increased use of vote-by-mail, voter education around mail-in	
	<u>bal</u>	lots, and for measures to be taken to ensure the safety and health of those who	_
	vot	e in person.	
4 c	(Code	e:) (Expenses \$ 383,418. including grants of \$) (Revenue \$)
		rt Criminal Justice - After many years of advocacy, we finally helped secure	.′
		sage of Texas House Bill 2048, which repealed the Driver Responsibility Program	
		P). Nearly 1.4 million Texans had suspended driver's licenses under the DRP. The	
		icy often led to car searches and arrests when individuals drove with a suspended	
		ense. All Texans with a license suspended due to the DRP had their licenses	<u> </u>
		nstated, and nearly \$2.5 billion in outstanding debt was wiped out. We also worked	1_
		h criminal justice advocates around the state to advocate for reforms in the way	
		ies and counties approach enforcement and prosecution of low-level, non-violent	- —
		enses. The concessions we achieved through grassroots advocacy in Dallas, Houston,	
		Austin will reduce incarceration rates and benefit the Black and Latino	
	COM	munities so often targeted by "tough-on-crime" policies.	_
4 d		program services (Describe on Schedule O.) See Schedule O	
	(Expe	=++++=+	
4 e	Total	program service expenses ► 1,626,758.	_

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Yes	No X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Χ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in 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		Х
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		Х
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		Х
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		Х
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.			
	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i>	11 a	Х	
ŀ	o Did the organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		Х
(Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
(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	11 d	Х	
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Χ
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	11 f		Х
12 8	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		Х
ŀ	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Χ
ŀ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If 'Yes,' complete Schedule F, Parts III and IV</i>	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		Х
20 a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21	X	

Form 990 (2019) American Civil Liberties Union 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 Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
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? <i>If 'Yes,' complete Schedule J</i> .	23	Х	
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		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I.	25b		Х
26	former officer, director, trusteé, key employee, créator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part II</i>	26		Х
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 entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
28	instructions, for applicable filing thresholds, conditions, and exceptions):			
	a 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		X
	b A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV.	28b		X
	c 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		Χ
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		X
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? <i>If 'Yes,' complete Schedule R, Part l</i>	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1.	34	X	
	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If</i> '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? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		X
38	Note: All Form 990 filers are required to complete Schedule O.	38	X	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	. No
1	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		162	140
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1.0	X	
RΛ		1 c	aan (2010

Form 990 (2019) American Civil Liberties Union

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

			Yes	No
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a			
ŀ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
ŀ	olf 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation on Schedule 0</i>	3 b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
ŀ	olf '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).			37
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Λ
		5 c		
	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a	Χ	
	olf 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b	Х	
7	Organizations that may receive deductible contributions under section 170(c).			
ä	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	_		
	services provided to the payor?	7 a		
	p If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
(Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		
(If 'Yes,' indicate the number of Forms 8282 filed during the year			
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		
Ç	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
ł	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	<i>,</i> 11		
	organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:			
	a Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	a Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	10-		
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue gualified health plans in more than one state?	13a		
Ì	Note: See the instructions for additional information the organization must report on Schedule O.			
ł	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			
	Enter the amount of reserves on hand			
14 a	a Did the organization receive any payments for indoor tanning services during the tax year?	14 a		X
ŀ	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
	If 'Yes,' see instructions and file Form 4720, Schedule N.	10		v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If 'Yes,' complete Form 4720, Schedule O.	16		X

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. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year. 21 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..... 21 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Χ 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?..... 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Χ Did the organization become aware during the year of a significant diversion of the organization's assets?..... 5 Χ Did the organization have members or stockholders?....See.Schedule.Q..... 6 Χ 7 a 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? See Schedule 0. 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... 8 a X X **b** Each committee with authority to act on behalf of the governing body?..... 8 b 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 Q..... 9 **Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... 10 a Χ b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done ... See .Schedule .0 Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ 14 Did the organization have a written document retention and destruction policy?..... 14 Χ 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? a The organization's CEO, Executive Director, or top management official.. See . Schedule.. O...... X 15 a **b** Other officers or key employees of the organization...See .Schedule..Q..... 15 b X If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 a 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > None Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records Gibran Sawani 5225 Katy Fwy Ste 350 Houston TX 77007 713-942-8146

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......

X

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

- 1 a 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.

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

Check this box if neither the organization nor any relate	Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.									
		(C)								
(A) Name and title	(B) Average hours per	is	both dir	an c ector	officer truste			(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other
See Schedule O	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	(W-2/1099-MISC)	compensation from the organization and related organizations
(1) Terri Burke	_ <u>13</u> _									
Executive Dir.	27			Χ				75,199.	112,799.	44,442.
(2) Cheryl Newcomb (thru 9/19) Deputy Director	$-\frac{13}{27}$			Χ				62,238.	93,356.	16,514.
_(3) Ranjana Natarajan President	1	Х		Х				0.	0.	0.
(4) Lee Henderson Vice President	1	Х		Х				0.	0.	0.
(5) MaryScott Hagle Treasurer	1	Х		Х				0.	0.	0.
(6) Manpreet Singh (as of 7/19) Secretary	11	X		X				0.	0.	0.
(7) James Aldrete Board Member	11	X		Λ				0.	0.	0.
(8) Steve Amberg	1									_
Board Member (9) Ricardo de Anda	1	X						0.	0.	0.
Board Member (10) Paul Asofsky	1 _ 1	Х						0.	0.	0.
Board Member	1	Χ						0.	0.	0.
(11) Gary Bledsoe Board Member	1	Х						0.	0.	0.
(12) Susie Byrd Board Member	1	Х						0.	0.	0.
(13) Lydia Camarillo Board Member	1	Х						0.	0.	0.
(14) Marilyn Eiland Board Member	11	Х						0.	0.	0.

Part VII	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
		(B)			•	C)							
	(A) Name and title	Average hours per week	box	, unle	ess pe	erson	than is both or/trus	h an tee)	(D) Reportable compensation from	(E) Reportable compensation from		(F) ated am	nount
		(list any hours for related organiza - tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compe the c an	ensation organizat d relate anization	ition ed
	an Goyal	1	,						0				
	rd Member	1 1	Х						0.	0.			0.
	i <u>n Green</u> rd Member	1 1	Х						0.	0.			0.
	rgine Guillory	1							0.	0.			<u> </u>
Boar	rd Member	1	Х						0.	0.			0.
	<u>perto Hinojosa</u> rd Member	<u>1</u>	X						0	0			0
		1	Λ						0.	0.			0.
	ig_Jackson rd Member	<u>+</u>	X						0.	0.			0.
	eena Karmally	1	Λ						0.	0.			
	rd Member	1	Х						0.	0.			0.
	ia Ramos	1	21						0.	<u> </u>			
	rd Member	1	Χ						0.	0.			0.
	c Rhodes	1							<u> </u>				
	rd Member	1	Х						0.	0.			0.
(23) Diar		1											
Boar	rd Member	1	Х						0.	0.			0.
	ciela Sanchez	1											
	rd Member	1	Χ						0.	0.			0.
	t_Schwarz	1											
	rd Member	1	X						0.	0.			0.
	tal						• • •		137,437.	206,155.		60,	956.
	from continuation sheets to Part VII, Section							•	0. 137,437.	0.		<u> </u>	0.
	(add lines 1b and 1c)							ved		206,155.	ancatio	60,3	956.
	he organization • 0	10 11036 1	isteu	abo	ve) i	WIIO	recei	veu	more than \$100,00	o of reportable comp	Jerisatio	11	
												Yes	No
3 Did th on line	e organization list any former officer, directed 1a? If 'Yes,' complete Schedule J for suc	tor, truste <i>h individu</i>	ee, ke ıal	ey e	mpl	oyee	e, or	high	nest compensated	employee	. 3		X
the or	ny individual listed on line 1a, is the sum of ganization and related organizations greate	er than \$1	50,00	00?	If '\	∕es,	' con	ıple	te Schedule J for		4	Х	
5 Did ar	individualny person listed on line 1a receive or accru	e comper	satio	n fr	om	anv	unre	late	ed organization or	individual		X	17
	rvices rendered to the organization? If 'Yes	s, compie	te So	cnec	iuie	J TO	r suc	сп р	erson		. 5		X
1 Comp	Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.												
(A) (B) (C)													
	Name and business address Description of services Compensation												
	number of independent contractors (including b		ited to	o the	se I	liste	d abo	ve)	who received more	than			
\$100,0	000 of compensation from the organization	• 0											

Form 990

Continuation Sheet for Form 990

OMB No. 1545-0047

2019

Department of the Treasury Internal Revenue Service

ame of the Organization Employler Identification number

American Civil Liberties Union 76-0343140 Part VII Continuation: Officers, Directors, Trustees, Key Employees, and **Highest Compensated Employees** (C) (D) (E) (F) Position (check all that apply) Reportable compensation from Reportable compensation from Estimated amount of other Name and title Average Individual to or director Average hours per week (list any hours for related organiza-tions helow Officer Highest compensated Institutional trustee employee Former compensation from the organization and related the organization (W-2/1099-MISC) related organizations (W-2/1099-MISC) y employee organizations l trustee below dotted line) Alyssa Simmons 1 Board Member 1 Χ 0. 0 0. Nicola Fuentes Toubia 1 Board Member Χ 0. 0 0. 1 Frances Valdez 1 Board Member 1 Χ 0. 0. 0. Michael Wyatt 1 Board Member 1 Χ 0. 0 0. Susan Young 1 Board Member 1 Χ 0. 0. 0.

Form 990 (2019) American Civil Liberties Union 76-0343140 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII..... (B) Related or exempt function revenue (D) Revenue excluded from tax under sections 512-514 (C) Unrelated business (A) Total revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1 a **b** Membership dues..... 1 b 2,129,184. c Fundraising events..... 1 c **d** Related organizations 1 d e Government grants (contributions) 1 e f All other contributions, gifts, grants, and

Contribution and Other		similar amounts not incl Noncash contributions ir	uded	above	1f	331,008.				
E O	y	lines 1a-1f			1 g					
a Co	h	Total. Add lines 1a	-1f.				2,460,192.			
e						Business Code				
듄	2a									
Be	b	,								
<u>e</u> .	С									
ěΕ	d			. — — — .						
Ë	е									
Program Service Revenue	f	All other program s	ervi	ce revenu	ле					
P	g	Total. Add lines 2a	-2f .							
	3	Investment income (inclu	ıdina divid	ends. ir	nterest, and				
		other similar amou	nts)				33,630.			33,630.
	4	Income from invest	tmer	nt of tax-e	exempt	bond proceeds ►				
	5	Royalties								
				(i) R	teal	(ii) Personal				
	6 a	Gross rents	6a							
	b	Less: rental expenses	6b							
		Rental income or (loss)								
	d	Net rental income	or (lo	oss)						
	7 a	Gross amount from		(i) Secu	urities	(ii) Other				
		sales of assets	7a							
	b	other than inventory Less: cost or other basis								
		and sales expenses	7b							
			7с							
	d	Net gain or (loss).			<u></u>					
<u>o</u>	8 a	Gross income from fund	raisin	ig events						
Š		(not including \$								
eĸ		of contributions reported		•						
ά		See Part IV, line 18			88					
Other Revenue		Less: direct expens			81					
δ	С	Net income or (loss	s) fro	om fundra	aising e	events				
	9 a	Gross income from gami	ing ac	ctivities.						
	_	See Part IV, line 19			98					
		Less: direct expens			91					
	С	Net income or (loss	s) tro	om gamın	ıg actıv	ities				
	10 a	Gross sales of inventory,	, less							
		returns and allowances			10:					
		Less: cost of goods			101					
	С	Net income or (loss	s) tro	om saies	of inve	Business Code				
SI	11 ^					Business Code				
e e	11 a									
를 될	b	'								
scellaneo Revenue	C	I All other revenue								
Miscellaneous Revenue	_	All other revenue.		٠	[>				
		Total Add lines 11					2 402 222		^	22 622
	12	Total revenue. See	11151	u uctions .			2,493,822.	0.	0.	33,630. Form 990 (2019)
BAA						IEEA	.0109L 07/31/19			1 OHH 330 (2019)

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a re	·			
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	45,687.	45,687.		·
2	Grants and other assistance to domestic individuals. See Part IV, line 22		20,0000		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	149,114.	110,824.	20,830.	17,460.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	1,129,307.	762,354.	224,480.	142,473.
-	Pension plan accruals and contributions	1,129,307.	702,334.	224,400.	142,473.
8	(include section 401(k) and 403(b) employer contributions)	150,805.	103,824.	41,083.	5,898.
9	Other employee benefits	141,720.	97,916.	28,156.	15,648.
10	Payroll taxes	92,688.	63,294.	17,770.	11,624.
11	Fees for services (nonemployees):	<i>J2</i> ,000.	03,234.	17,770.	11,024.
	Management				
	Legal	196.		196.	
	Accounting	8,208.		8,208.	
	Lobbying	270,459.	262,659.	7,800.	
	Professional fundraising services. See Part IV, line 17	270,439.	202,039.	7,000.	
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column				
_	(A) amount, list line 11g expenses on Schedule O.)	17,527.	14,172.	2,547.	808.
12	Advertising and promotion	2,540.	2,225.	315.	
13	Office expenses	19,004.	11,628.	3,789.	3,587.
14	Information technology	20,549.	8,378.	1,252.	10,919.
15	Royalties				
16	Occupancy	130,392.	104,178.	13,242.	12,972.
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,350.	976.	374.	
20	Interest	,			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,333.	2,549.	382.	402.
23	Insurance	15,706.	13,194.	1,940.	572.
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 O.)	.,	., .	,	
a	Dues and subscriptions	21,626.	18,119.	3,507.	
ŀ	Professional development	7,477.	4,781.	1,942.	754.
(
C					
•	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	2,227,688.	1,626,758.	377,813.	223,117.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)			·	

		Check if Schedule O contains a response or note to	any li	ne in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing			1,434,692.	1	48,347.
	2	Savings and temporary cash investments			1,503,630.	2	3,305,895.
	3	Pledges and grants receivable, net			341,736.	3	
	4	Accounts receivable, net			3,000.	4	118.
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantial controlled entity or family member of any of these per	er offic contri rsons .	cer, director, butor, or 35%		5	
	6	Loans and other receivables from other disqualified pe		H-			
		section 4958(f)(1)), and persons described in section				6	
	7	Notes and loans receivable, net				7	
ş	8	Inventories for sale or use				8	
Assets	9	Prepaid expenses and deferred charges			7,378.	9	10,999.
¥	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10 a	29,417.			
	b	Less: accumulated depreciation	10 b	17,453.	11,661.	10 c	11,964.
	11	Investments — publicly traded securities				11	
	12	Investments – other securities. See Part IV, line 11				12	
	13	Investments - program-related. See Part IV, line 11.	_		13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11	-	4,095.	15	180,734.	
	16	Total assets. Add lines 1 through 15 (must equal line		3,306,192.	16	3,558,057.	
	17	Accounts payable and accrued expenses			117,558.	17	213,657.
	18	Grants payable		_		18	
	19	Deferred revenue		<u> </u>		19	
	20	Tax-exempt bond liabilities		<u> </u>		20	
ië.	21	Escrow or custodial account liability. Complete Part I		_		21	
Liabilities	22	Loans and other payables to any current or former off key employee, creator or founder, substantial contribu- controlled entity or family member of any of these per	ncer, a utor, or rsons .	35%		22	
	23	Secured mortgages and notes payable to unrelated th	nird par	rties		23	
	24	Unsecured notes and loans payable to unrelated third	partie	s		24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	es to re plete F	elated third parties, Part X of Schedule D.	110,368.	25	
	26	Total liabilities. Add lines 17 through 25			227,926.	26	213,657.
Jces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	· •	X			
틸	27	Net assets without donor restrictions			3,053,602.	27	3,156,636.
m	28	Net assets with donor restrictions			24,664.	28	187,764.
Net Assets or Fund Balance		Organizations that do not follow FASB ASC 958, che and complete lines 29 through 33.	ck her	e ►			
ō	29	Capital stock or trust principal, or current funds			29		
ste	30	Paid-in or capital surplus, or land, building, or equipm	nent fui	nd		30	
SS	31	Retained earnings, endowment, accumulated income,	or oth	er funds		31	
t A	32	Total net assets or fund balances		_	3,078,266.	32	3,344,400.
ž	33	Total liabilities and net assets/fund balances			3,306,192.	33	3,558,057.

Da	t VI Decemblisher of Net Accets	0010110			-
Pa	Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
	Total revenue (must equal Part VIII, column (A), line 12)	1			
2	Total expenses (must equal Part IX, column (A), line 25)	2	•		322.
3	Revenue less expenses. Subtract line 2 from line 1	3			588.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)).	4			134.
5	Net unrealized gains (losses) on investments.	5	3,0	18,2	266.
5	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O).	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				<u> </u>
	column (B))	10	3,3	44,4	100.
Pa	rt XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				. П
				Yes	
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.				
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	ed on a			
1	b Were the organization's financial statements audited by an independent accountant?		2b	Χ	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separa basis, consolidated basis, or both:	te			
	Separate basis X Consolidated basis Both consolidated and separate basis				
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.				
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3 a		Х
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3 b		
BAA	TEEA0112L 01/21/20		Form	990	(2019)

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization American Civil Liberties Union

PUBLIC DISCLOSURE COPY 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

Employer identification number

2019

	Texas Inc.	76-0343140						
Organization type (chec Filers of:	Section:							
Form 990 or 990-EZ	X 501(c)(4) (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated as	s a private foundation						
Form 990-PF	527 political organization							
	501(c)(3) exempt private foundation	501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a p	private foundation						
	501(c)(3) taxable private foundation							
, ,	is covered by the General Rule or a Special Rule . 11(c)(7), (8), or (10) organization can check boxes for both the Ge	eneral Rule and a Special Rule. See instructions.						
General Rule								
	ation filing Form 990, 990-EZ, or 990-PF that received, during the year om any one contributor. Complete Parts I and II. See instructions for d							
Special Rules								
under sections received from	zation described in section 501(c)(3) filing Form 990 or 990-EZ th 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or any one contributor, during the year, total contributions of the grift VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and I	or 990-EZ), Part II, line 13, 16a, or 16b, and that reater of (1) \$5,000; or (2) 2% of the amount on (i)						
during the year	zation described in section 501(c)(7), (8), or (10) filing Form 990 ar, total contributions of more than \$1,000 <i>exclusively</i> for religious for the prevention of cruelty to children or animals. Complete Par	is, charitable, scientific, literary, or educational						
during the yea \$1,000. If this charitable, etc	zation described in section 501(c)(7), (8), or (10) filing Form 990 ar, contributions <i>exclusively</i> for religious, charitable, etc., purpose box is checked, enter here the total contributions that were recent, purpose. Don't complete any of the parts unless the General Forexclusively religious, charitable, etc., contributions totaling \$5,000.	es, but no such contributions totaled more than eived during the year for an exclusively religious, Rule applies to this organization because						
Caution: An organization	on that isn't covered by the General Rule and/or the Special Rules	s 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).

Schedule B (Form 990, 990-EZ, or 990-PF) (2019) Name of organization American Civil Liberties Union

Employer identification number

76-0343140

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional sp	pace is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>		\$ <u>10,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$2 <u>,129,184.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>5,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$ <u>330,283.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person Payroll Noncash (Complete Part II for noncash contributions.)

1

Name of organization Employer identification number

American Civil Liberties Union

76-0343140

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	N/A		
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		i e	
_		٧	
(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
-			
		\$	

Name of organization American Civil Liberties Union Employer identification number 76-0343140

Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc.,								
	contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional	(Enter this information once. S	ee instruction	is.)					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held					
	<u>N/A</u>								
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	ntionship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held					
	Transferee's name, addres	ift Relationship of transferor to transferee							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held					
	<u> </u>		 	 					
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	ntionship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held					
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	ntionship of transferor to transferee					

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

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

	xy Tax) (see separate instruct Section 501(c)(4), (5), or (6) o	tions), then organizations: Complete Part III.			
		ivil Liberties Union		Employer identific	ation number
	of Texas I	nc.		76-034314	
	-	rganization is exempt under section		_	zation.
1		organization's direct and indirect political con of 'political campaign activities')	campaign activities in	Part IV.	
2	Political campaign activity ex	xpenditures (see instructions)		▶\$	3
3	Volunteer hours for political	campaign activities (see instructions)			
Par	t I-B Complete if the o	rganization is exempt under section	on 501(c)(3).		
1	Enter the amount of any exc	ise tax incurred by the organization under	section 4955	▶\$	3
2	Enter the amount of any exc	cise tax incurred by organization managers	under section 4955.	▶\$	5
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No
4 a	Was a correction made?				Yes No
	If 'Yes,' describe in Part IV.				
Par	t I-C Complete if the or	rganization is exempt under section	on 501(c), excep	t section 501(c)(3).	•
	-	pended by the filing organization for section	• • •		
2	Enter the amount of the filing 527 exempt function activities	g organization's funds contributed to other	organizations for sec	tion ▶\$	3
3	Total exempt function expen line 17b	ditures. Add lines 1 and 2. Enter here and	on Form 1120-POL,	▶\$	S
4	Did the filing organization file	e Form 1120-POL for this year?			Yes X No
5	amount of political contribution	and employer identification number (EIN) s. For each organization listed, enter the all so received that were promptly and directly delal action committee (PAC). If additional spa	ivered to a separate po	olitical organization, such	ı as a separate
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
<i>(</i> 6)					

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

Schedule C (Form 990 or 990-EZ) 2019

Part II-A Complete if section 501(the organizatior (h)).	is exempt under se	ection 501(c)(3) and	l filed Form 5768 (el	ection under
	• • • • • • • • • • • • • • • • • • • •	s to an affiliated group (an	d list in Part IV each affili	ated group member's name	2,
	•	I share of excess lobbying			
B Check ► if the fili	ng organization ched	cked box A and 'limited co	ontrol' provisions apply.		
(The term	Limits on Lobby expenditures' mea	ing Expenditures ns amounts paid or incu	rred.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expendit	ures to influence pul	olic opinion (grassroots lo	obbying)		
b Total lobbying expendit	ures to influence a le	egislative body (direct lob	bying)		
c Total lobbying expendit	•	•			
d Other exempt purpose	•				
e Total exempt purpose e	expenditures (add lin	es 1c and 1d)			_
f Lobbying nontaxable ar both columns		ount from the following to			
If the amount on line 1e, col	lumn (a) or (b) is:	The lobbying nontaxable	e amount is:		
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1		\$100,000 plus 15% of the exces			
Over \$1,000,000 but not over \$		\$175,000 plus 10% of the exces			
Over \$1,500,000 but not over \$		\$225,000 plus 5% of the excess	over \$1,500,000.		
Over \$17,000,000 q Grassroots nontaxable		\$1,000,000.			
h Subtract line 1g from lin	•	·			
i Subtract line 1f from lin					
j If there is an amount other	er than zero on either	line 1h or line 1i, did the or	rganization file Form 4720		□Yes □No
-					
(Som	ne organizations tha	4-Year Averaging Period t made a section 501(h) o ow. See the separate ins	election do not have to	complete all of the five prough 2f.)	
	Lobb	ying Expenditures During	g 4-Year Averaging Per	iod	
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2 a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					
BAA				Schedule C (Form	1 990 or 990-EZ) 2019

76-0343140

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

For each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		1)	(b)
		No	Amount
 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? 			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501((c)(5)	, or	

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

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

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

- 1	Dues, assessments and similar amounts from members.		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
;	a Current year	2a	ı
- 1	Carryover from last year.	2 b	
	Total	2 c	:
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	0.
5	Taxable amount of lobbying and political expenditures (see instructions)	5	0.

Part IV | Supplemental Information

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

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization American Civil Liberties Union of Texas Inc. 76-0343140 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered 'Yes' on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year..... Aggregate value of contributions to (during year). Aggregate value of grants from (during year)...... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds No are the organization's property, subject to the organization's exclusive legal control?... Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring No impermissible private benefit? Yes **Conservation Easements.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements. 2 a **b** Total acreage restricted by conservation easements. 2 b c Number of conservation easements on a certified historic structure included in (a)..... d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register..... Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No and enforcement of the conservation easements it holds?.... Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?..... In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements 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 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1. (ii) Assets included in Form 990, Part X..... If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1.....

b Assets included in Form 990, Part X.....

Part III Organizations Maintaining Col	iections of Art, HISTO	oricai i reasures, or	Other Similar Ass	ets (continuea)
3 Using the organization's acquisition, accession, items (check all that apply):	and other records, check a	ny of the following that m	ake significant use of its	collection
a Public exhibition	d Loan o	or exchange program		
b Scholarly research	e Other			
c Preservation for future generations	<u>—</u>			
Provide a description of the organization's colle Part XIII.	ctions and explain how they	further the organization's	s exempt purpose in	
5 During the year, did the organization solicit to be sold to raise funds rather than to be m	aintained as part of the o	rganization's collection?	?	Yes No
Escrow and Custodial Arrange line 9, or reported an amount o	ements. Complete if t in Form 990, Part X,	he organization and line 21.	swered 'Yes' on Fo	rm 990, Part IV,
1a Is the organization an agent, trustee, custod on Form 990, Part X?	lian or other intermediary	for contributions or othe	er assets not included	Yes No
b If 'Yes,' explain the arrangement in Part XIII	and complete the following	ng table:		
				Amount
c Beginning balance			1с	
d Additions during the year			1 d	
e Distributions during the year			1 e	
f Ending balance			1f	
2 a Did the organization include an amount on F	form 990, Part X, line 21,	for escrow or custodial	account liability?	Yes No
b If 'Yes,' explain the arrangement in Part XIII	. Check here if the explar	nation has been provide	d on Part XIII	<u> </u>
Part V Endowment Funds. Complete	f the organization an	<u>iswered 'Yes' on Fo</u>	<u>rm 990, Part IV, Iir</u>	<u>ne 10.</u>
(a) Curre	ent year (b) Prior year	r (c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance				
b Contributions				
c Net investment earnings, gains, and losses				
d Grants or scholarships				
e Other expenditures for facilities and programs				
f Administrative expenses				
g End of year balance				
2 Provide the estimated percentage of the cur	•	e 1g, column (a)) held	as:	
a Board designated or quasi-endowment ►	 %			
b Permanent endowment ►	%			
c Term endowment ►%				
The percentages on lines 2a, 2b, and 2c should	equal 100%.			
3a Are there endowment funds not in the possession organization by:	on of the organization that a	are held and administered	for the	Yes No
(i) Unrelated organizations				. 3a(i)
(ii) Related organizations				3a(ii)
b If 'Yes' on line 3a(ii), are the related organiz				3b
4 Describe in Part XIII the intended uses of th	·			
Part VI Land, Buildings, and Equipme				
Complete if the organization an		m 990, Part IV, line	11a. See Form 99	0, Part X, line 10.
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land				
b Buildings				
c Leasehold improvements		770.	539.	231.
d Equipment		28,647.	16,914.	11,733.
e Other		20,011	10,014,	11,100.
Total. Add lines 1a through 1e. (Column (d) must		column (B), line 10c.)	>	11,964.
RAA		(=/,		ule D (Form 990) 2019

Schedule D (Form 990) 2019

(a) Description of security or category (including name of security)	(b) Book value	0, Part IV, line 11b. See Form (c) Method of valuation: Cost or end	
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) (B) (C) (D) (E)			
 (C)			
(D)			
(E)			
(F)			
(G)			
<u>· · · </u>			
<u>`</u> ()			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) •			
Part VIII Investments — Program Related.		N/A	
Complete if the organization answered	'Yes' on Form 99		990, Part X, line 13
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or er	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) 🕨			
	'Yes' on Form 99	0, Part IV, line 11d. See Form	990, Part X, line 15
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) • Part IX Other Assets. Complete if the organization answered (a) Des	'Yes' on Form 99	0, Part IV, line 11d. See Form	990, Part X, line 15 (b) Book value
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Dec. (1) Due from ACLU Fdn of Texas		0, Part IV, line 11d. See Form	(b) Book value 176, 639
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Description (1) Due from ACLU Fdn of Texas (2) Security deposit		0, Part IV, line 11d. See Form	(b) Book value
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Description (B) line 13.) Part IX (B) line 13.) . Part IX (B) line 13.) Part IX (B) line 13.) . Part IX (B) lin		0, Part IV, line 11d. See Form	(b) Book value 176, 639
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Description (B) line 13.) Part IX Other Assets. (a) Description (B) line 13.) Part IX (b) must equal Form 990, Part X, column (B) line 13.) Part IX (a) Description (B) line 13.) Part IX (b) must equal Form 990, Part X, column (B) line 13.) Part IX (a) Description (B) line 13.) . Part IX (a) Description (B) line 13.) . Part IX (b) Line IX (c) Description (B) line 13.) . Part IX (a) Description (B) line 13.) . Part IX (a) Description (B) line 13.) . Part IX (b) Line IX (c) Description (B) line 13.) . Part IX (a) Description (B) line 13.) . Part IX (a) Description (B) line 13.) . Part IX (b) Line IX (c) Description (B) line 13.) . Part IX (d) Description (B) line 13.) . Part IX (e) Description (B) line 13 Part IX (e) Description (B) lin		0, Part IV, line 11d. See Form	(b) Book value 176, 639
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Description (C) Security deposit (3) (4) (5)		0, Part IV, line 11d. See Form	(b) Book value 176, 639
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Description (C) Security deposit (3) (4) (5) (6)		0, Part IV, line 11d. See Form	(b) Book value 176, 639
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Description (C) Security deposit (3) (4) (5) (6) (7)		0, Part IV, line 11d. See Form	(b) Book value 176, 639
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Description (C) Due from ACLU Fdn of Texas (2) Security deposit (3) (4) (5) (6) (7) (8)		0, Part IV, line 11d. See Form	(b) Book value 176, 639
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Description (C) Security deposit (3) (4) (5) (6) (7) (8) (9)		0, Part IV, line 11d. See Form	(b) Book value 176, 639
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Description (C) Security deposit (3) (4) (5) (6) (7) (8) (9) (10)	scription		(b) Book value 176, 639 4,095
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Description (a) Description (b) Texas (2) Security deposit (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (b) must equal Form 990, Part X, column (b)	scription		(b) Book value 176, 639 4,095
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Description (B) Description (Column (B) Line 13.) Part IX Other Assets. Complete if the organization answered (B) Description (Column (B) Line 13.) Part IX Other Assets. Capture (B) Line 13.) Part IX Other Assets. Capture (B) Line 13.) Part IX Other Liabilities.	Scription 3) line 15.)		(b) Book value 176, 639 4,095
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Description (B) Due from ACLU Fdn of Texas (2) Security deposit (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) Part X Other Liabilities. Complete if the organization answered 'Yes' on F	3) line 15.)orm 990, Part IV, line 1		(b) Book value 176, 639 4,095 180,734
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Description (a) Description (B) Description (B) Ine 13.) Part IX Other Assets. Complete if the organization answered (a) Description (B) Ine 13.) Part IX Other Liabilities. Complete if the organization answered 'Yes' on Fig. 1.	Scription 3) line 15.)		(b) Book value 176, 639 4,095
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Description (b) Due from ACLU Fdn of Texas (2) Security deposit (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) Part X Other Liabilities. Complete if the organization answered 'Yes' on F1. (a) Description (Column (b) Federal income taxes	3) line 15.)orm 990, Part IV, line 1		(b) Book value 176, 639 4,095 180,734
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Description (b) Due from ACLU Fdn of Texas (2) Security deposit (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) Part X Other Liabilities. Complete if the organization answered 'Yes' on F1. (1) Federal income taxes (2)	3) line 15.)orm 990, Part IV, line 1		(b) Book value 176, 639 4,095 180,734
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Description (B) De	3) line 15.)orm 990, Part IV, line 1		(b) Book value 176, 639 4,095 180,734
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Description (B) De	3) line 15.)orm 990, Part IV, line 1		(b) Book value 176, 639 4, 095 180, 734
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Description (B) De	3) line 15.)orm 990, Part IV, line 1		(b) Book value 176, 639 4,095 180,734
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Description (B) De	3) line 15.)orm 990, Part IV, line 1		(b) Book value 176, 639 4, 095 180, 734
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Description (B) De	3) line 15.)orm 990, Part IV, line 1		(b) Book value 176, 639 4, 095 180, 734
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Description (B) De	3) line 15.)orm 990, Part IV, line 1		(b) Book value 176, 639 4, 095 180, 734
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Description (B) De	3) line 15.)orm 990, Part IV, line 1		(b) Book value 176, 639 4, 095 180, 734
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Description (B) De	3) line 15.)orm 990, Part IV, line 1		(b) Book value 176, 639 4,095 180,734
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets. Complete if the organization answered (a) Description (B) must equal Form 990, Part X, column (B) line 13.) Part IX Other Liabilities. Complete if the organization answered (Part X) Other Liabilities. Complete if the organization answered 'Yes' on Factor (B) Description (B) (Column (B) must equal Form 990, Part X, column (B) Part X Other Liabilities. Complete if the organization answered 'Yes' on Factor (B) Description (B) (Column (B) Part X) (Column (B) Part X) (Column (B) Part X (Column (B) Part X) Other Liabilities. Complete if the organization answered 'Yes' on Factor (B) Description (B	Scription 3) line 15.) orm 990, Part IV, line 1 iption of liability	11e or 11f. See Form 990, Part X, line 2	(b) Book value 176, 639 4,095 180,734

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue p	per Return. N/A
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
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a Net unrealized gains (losses) on investments	
b Donated services and use of facilities	
c Recoveries of prior year grants	
d Other (Describe in Part XIII.) 2d	
e Add lines 2a through 2d.	2e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIII.) 4b	
c Add lines 4a and 4b.	4c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Return. N/A
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	
1 Total expenses and losses per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a Donated services and use of facilities	
b Prior year adjustments	
c Other losses	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d.	2e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIII.) 4b	
c Add lines 4a and 4b.	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).	5
Part XIII Supplemental Information.	

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part XI, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

BAA Schedule D (Form 990) 2019

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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

OMB No. 1545-0047

2019

Open to Public Inspection

American Civil of Texas Inc.	Liberties Un	nion				76-034314	
Part I General Information on Gra	ants and Assista	ance				1	
Does the organization maintain records to the selection criteria used to award the	e grants or assistand	e?					X Yes No
2 Describe in Part IV the organization's pro					See Pa		
Part II Grants and Other Assistan							
Form 990, Part IV, line 21,	for any recipient	that received r	more than \$5,000. F	Part II can be dupli	cated if additional	space is neede	d.
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Transgender Education Network PO Box 41363							
Austin, TX 78704	26-3243093	501(c)(3)	45,000.	0.			General support
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
2 Enter total number of section 501(c)(3							1
3 Enter total number of other organization	ons listed in the line	1 table	<u></u>			· · · · · · · · · · · · · · · · · · ·	0

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV | Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S.

Grants and forecasts for future spending are periodically monitored to ensure compliance and timely expenditure by the grantee. Each grantee is required to keep financial records and furnish their financial statements to the ACLU of Texas at the end of the grant period.

SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service **Compensation Information**

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

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

► Attach to Form 990.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization American Civil Liberties Union of Texas Inc.

Part I Questions Regarding Compensation

Employer identification number 76-0343140

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

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

Schedule J (Form 990) 2019

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

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

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

		(B) Breakdown	of W-2 and/or 1099-MIS	SC compensation	(0) 5 1: 1	(D) NI	(E) T + + ((E) O
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns(B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
Terri Burke	(i)	75,199.	0.	0.	16,764.	1,013.	92,976.	0.
1 Executive Dir.	(ii)	112,799.	0.	0.	25,146.	1,519.	139,464.	0.
Cheryl Newcomb (thru 9/19)	(i)	62,238.	0.	0.	2,248.	4,358.	68,844.	0.
2 Deputy Director	(ii)	93,356.	0.	0.	3,371.	6,537.	103,264.	0.
	(i)							
3	(ii)				T		T	
	(i)							
4	(ii)		[Γ	
	(i)						L	
5	(ii)							
	(i)						L	
6	(ii)							
	(i)		L		L		L	
7	(ii)							
	(i)				L		L	
8	(ii)							
	(i)						L	
9	(ii)							
	(i)						L	
10	(ii)							
	(i)						L	
11	(ii)							
	(i)						L	
12	(ii)							
	(i)				 		 	
13	(ii)							
	(i)						L	
14	(ii)							
	(i)		 		L		_	
15	(ii)							
	(i)		 		L		 	
16	(ii)							

BAA

TEEA4102L 8/2/19

Schedule J (Form 990) 2019

Part III Supplemental Information

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

Part I, Line 3 - Methods Used By Related Org. To Establish CEO/Exec. Dir. Compensation

Due to the close operating relationship between the ACLU of Texas and the ACLU Foundation of Texas (a related entity reported on Schedule R), all compensation for shared employees is determined by the ACLU Foundation of Texas. The ACLU Foundation of Texas utilizes a Personnel Committee, compensation surveys, and board approval to establish reasonable compensation for the Executive Director.

The ACLU of Texas pays a portion of the Executive Director's compensation based on records of actual time devoted to each organization.

Part I, Line 4 - Received Severance, Supplemental NQ Retirement, Equity-Based Compensation

Cheryl Newcomb received severance pay of \$22,068.

TEEA4103L 8/2/19

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

American Civil Liberties Union of $\underline{\text{Texas Inc.}}$

Employer identification number

76-0343140

Form 990, Part III, Line 1 - Organization Mission

The American Civil Liberties Union of Texas is the unyielding guardian and promoter of freedom, and justice for, and equality and dignity of, all people particularly for those who are still fighting to secure the full exercise of their civil rights and liberties.

We continue to advocate to defend and preserve the individual rights and liberties guaranteed to every person in this country by the Constitution and laws of the United States. Our staff works every day to protect marginalized people, immigrants, refugees, LGBTQ+ people, families, and vulnerable communities disproportionately harmed by our criminal legal system.

Form 990, Part III, Line 4d - Other Program Services Description

Reproductive Freedom - We worked with our coalition partners to challenge more than 35 anti-abortion bills that were filed in the 2019 Texas legislative session. As a member of the Trust-Respect-Access coalition, we lobbied the Austin City council to pass a "practical support for abortion" budget amendment. As a result, the Austin City Council budgeted \$150,000 to support pregnant people who have limited access but are seeking abortion. We also swung into high gear to fight the "Sanctuary Cities for the Unborn" movement - a local strategy by anti-abortion extremists to pressure Texas municipalities to adopt ordinances that would criminalize abortion. We developed and published an advocacy toolkit to help Texans fight the abortion ban movement in their own backyards.

LGBTQ+ - Along with coalition partners, we mobilized supporters and coordinated grassroots lobbying to stop more than 20 pieces of legislation harmful to LGBTQ

Employer identification number 76-0343140

Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder

The organization has members who pay annual dues. A Texas resident who is a member in good standing with the National ACLU organization is thereby a member of ACLU of Texas. Subject to rules established by the National ACLU, a member who has left the state of Texas but wishes to retain membership in ACLU of Texas may do so.

Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Body

Members elect the local Board of Directors annually for staggered, three-year terms with one third of the positions to be filled each year. Up to twenty-four Directors are elected by the membership and up to six may be elected by the Board of Directors. All members of the Board of Directors are elected at-large. Directors elected by the members are elected by mail ballot pursuant to such rules as the Board of Directors may adopt. At its next meeting following the election, the Board of Directors canvasses the results of the election and, if necessary to provide an adequate level of diversity, may elect to the board up to six additional Directors as soon as practicable after each election cycle.

Form 990, Part VI, Line 11b - Form 990 Review Process

The Board President, Treasurer, and attorney Board Member initially review Form 990 with the Executive Director and the Finance Manager. The returns are then shared with the full Board for review prior to filing with the IRS.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

Board members sign a conflict of interest form each year disclosing potential conflicts. In addition to signing the disclosure statement, the Board also inquires whether any conflicts exist before voting on any matter involving the organization's assets.

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

Due to the close operating relationship between the ACLU of Texas and the ACLU Foundation of Texas (a related entity reported on Schedule R), all compensation for

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management (continued)

shared employees is determined by the ACLU Foundation of Texas. The Executive Director's compensation is determined by the ACLU Foundation's Board of Directors. The Personnel Committee makes a compensation recommendation to the Board based on an annual salary survey of 53 ACLU organizations plus a survey of Executive Director salaries of similar organizations in similar locations. The Board then discusses the recommended compensation, deliberates and votes on approval.

Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

Compensation for all other employees is determined internally by the Executive Director and the Human Resources Director after a review of comparable Texas organizations and 53 ACLU affiliates nationwide.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

The conflict of interest policy and financial statements are available for review upon request.

Form 990, Part VII - Compensation Explanation

Terri Burke

Terri Burke is employed and compensated by the ACLU Foundation of Texas. The ACLU of Texas Inc. pays a portion of her salary based on records of actual time devoted to each organization.

Cheryl Newcomb (thru 9/19)

Cheryl Newcomb was employed and compensated by the ACLU Foundation of Texas. The ACLU of Texas Inc. paid a portion of her salary based on records of actual time devoted to each organization.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990.

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

2010

2019

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

American Civil Liberties Union of Texas Inc.

Employer identification number 76-0343140

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Sec 512 controlle	(b)(13) d entity?
						Yes	No
(1) ACLU Foundation of Texas Inc.							
PO Box 8306	Protect &						
Houston, TX 77288	facilitate civil						
76-0343171	rights	TX	501(c)(3)	7	N/A		X
(2)							
(3)							
(4)							

Part III	Identification of Related Organizations Taxable as a Partnership	. Complete if the organization answered 'Yes' on Form 990, Part IV, line 34,
	because it had one or more related organizations treated as a pa	Thership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections	minant income ted, unrelated, unded from tax Share of total Share of end-of-yea assets		lominant income ated, unrelated, eluded from tax nder sections		(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form	General or managing partner?		(k) Percentage ownership
		country)		512-514)			Yes	No	K-1 (Form 1065)	Yes	No			
<u>(1)</u>	_													
	-													
	-													
(2)														
(2)	-													
	-													
	-													
(3)														

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered 'Yes' on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	Sec 512 controlled) (b)(13) d entity?
		country)	entity	or trust)				Yes	No
(1)									
	Ī								
	Ī								
(2)									
	Ī								
	Ī								
(3)									
	†								
	†								
	1			I		1			

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

X

Yes No

1 a

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

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

b Gift, grant, or capital contribution to related organization(s)			1b		X
c Gift, grant, or capital contribution from related organization(s)			1 с		Х
d Loans or loan guarantees to or for related organization(s)			1 d		Х
e Loans or loan guarantees by related organization(s)			1e		Х
f Dividends from related organization(s)			1f		Х
g Sale of assets to related organization(s)			1g		Х
h Purchase of assets from related organization(s)			1h		Х
i Exchange of assets with related organization(s)			1i		Х
j Lease of facilities, equipment, or other assets to related organization(s)			1j		Х
k Lease of facilities, equipment, or other assets from related organization(s)			1k		Х
I Performance of services or membership or fundraising solicitations for related organization(s)					X
m Performance of services or membership or fundraising solicitations by related organization(s)					X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				X	- 71
Sharing of paid employees with related organization(s)				X	
• Onlining of paid employees with related organization(s)				Λ	
p Reimbursement paid to related organization(s) for expenses			1p	Х	
q Reimbursement paid by related organization(s) for expenses.				Λ	37
q Reinibursement paid by related organization(s) for expenses.			1q		X
Other transfer of each or menority to related expension(a)			1		3.7
r Other transfer of cash or property to related organization(s).					X
s Other transfer of cash or property from related organization(s)			1s		X
2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including cover				I.	
(a) Name of related organization	(b) Transaction	(c) Amount involved	(c) Method of (i) detern	nining
	type (a-s)		amount	involv	red
1) ACLU Foundation of Texas Inc.	p	1,810,780.	Cash		
·		, ,			
2)					
7					
2)					
3)					
4)					
5)					
6)					
AA TEEA5003L 06/27/19	1	Schedu	ıle R (Forn	1 990)	2019
			,	/	

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

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

(a) Name, address, and EIN of entity		(d) Predominant income (related, unre- lated, excluded from tax under sections 512-514)	Are all	e) partners ction (c)(3) zations?	(g) Share of end-of-year assets	tion	h) ropor- nate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana parti	ral or aging ner?	(k) Percentage ownership
		sections 512-514)	Yes	No		Yes	No	(1 11)	Yes	No	1
<u>(1)</u>											
<u>(2)</u>											
(3)											
<u>(4)</u>	-										
	1										
(5)	-										
	-										
<u>(6)</u>											
<u></u>	-										
	1										
(8)											

BAA TEEA5004L 06/27/19 Schedule **R** (Form 990) 2019

Provide additional information for responses to questions on Schedule R. See instructions.

2019

Late Return Attachment

American Civil Liberties Union of Texas Inc.

76-0343140

Page 1

Form 990 - Reasonable Cause From Late Penalties

The 2019 Form 990 for the American Civil Liberties Union of Texas, Inc. is being
filed after the extended due date due to the unforeseen electricity outage in
Houston TX on February 15, 2021 caused by winter storm Uri. We request waiver of the
late filing penalties. The delay was caused by circumstances beyond our control.