

Form **990**

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2015
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2015 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization ERASE RACISM, INC. Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 6800 JERICHO TURNPIKE 109W City or town, state or province, country, and ZIP or foreign postal code SYOSSET, NY 11791-4401 F Name and address of principal officer: V. ELAINE GROSS 6800 JERICHO TURNPIKE, SUITE 109W, SYOSSET,	D Employer identification number 65-1218069 E Telephone number 516-921-4863 G Gross receipts \$ 740,174. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ WWW.ERASERACISMN.Y.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 2003 M State of legal domicile: NY

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: ERASE RACISM USES EDUCATION, RESEARCH, ADVOCACY AND SUPPORT TO ELIMINATE INSTITUTIONAL RACISM ON 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 12 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 11 5 Total number of individuals employed in calendar year 2015 (Part V, line 2a) 5 0 6 Total number of volunteers (estimate if necessary) 6 20 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. 7b Net unrelated business taxable income from Form 990-T, line 34 7b 0.																									
Revenue		<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">Prior Year</th> <th style="text-align: center;">Current Year</th> </tr> </thead> <tbody> <tr> <td>8 Contributions and grants (Part VIII, line 1h)</td> <td style="text-align: right;">542,476.</td> <td style="text-align: right;">673,965.</td> </tr> <tr> <td>9 Program service revenue (Part VIII, line 2g)</td> <td style="text-align: right;">11,630.</td> <td style="text-align: right;">7,086.</td> </tr> <tr> <td>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td> <td style="text-align: right;">1,150.</td> <td style="text-align: right;">1,407.</td> </tr> <tr> <td>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td> <td style="text-align: right;">40,000.</td> <td style="text-align: right;">4,732.</td> </tr> <tr> <td>12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td> <td style="text-align: right;">595,256.</td> <td style="text-align: right;">687,190.</td> </tr> </tbody> </table>		Prior Year	Current Year	8 Contributions and grants (Part VIII, line 1h)	542,476.	673,965.	9 Program service revenue (Part VIII, line 2g)	11,630.	7,086.	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,150.	1,407.	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	40,000.	4,732.	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	595,256.	687,190.						
	Prior Year	Current Year																								
8 Contributions and grants (Part VIII, line 1h)	542,476.	673,965.																								
9 Program service revenue (Part VIII, line 2g)	11,630.	7,086.																								
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,150.	1,407.																								
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	40,000.	4,732.																								
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	595,256.	687,190.																								
Expenses		<table border="1" style="width:100%; border-collapse: collapse;"> <tbody> <tr> <td>13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)</td> <td style="text-align: right;">0.</td> <td style="text-align: right;">0.</td> </tr> <tr> <td>14 Benefits paid to or for members (Part IX, column (A), line 4)</td> <td style="text-align: right;">0.</td> <td style="text-align: right;">0.</td> </tr> <tr> <td>15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)</td> <td style="text-align: right;">0.</td> <td style="text-align: right;">0.</td> </tr> <tr> <td>16a Professional fundraising fees (Part IX, column (A), line 11e)</td> <td style="text-align: right;">0.</td> <td style="text-align: right;">0.</td> </tr> <tr> <td>b Total fundraising expenses (Part IX, column (D), line 25) ▶ 37,233.</td> <td></td> <td></td> </tr> <tr> <td>17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)</td> <td style="text-align: right;">527,868.</td> <td style="text-align: right;">610,612.</td> </tr> <tr> <td>18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)</td> <td style="text-align: right;">527,868.</td> <td style="text-align: right;">610,612.</td> </tr> <tr> <td>19 Revenue less expenses. Subtract line 18 from line 12</td> <td style="text-align: right;">67,388.</td> <td style="text-align: right;">76,578.</td> </tr> </tbody> </table>	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 37,233.			17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	527,868.	610,612.	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	527,868.	610,612.	19 Revenue less expenses. Subtract line 18 from line 12	67,388.	76,578.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.																								
14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.																								
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.																								
16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.																								
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 37,233.																										
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	527,868.	610,612.																								
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	527,868.	610,612.																								
19 Revenue less expenses. Subtract line 18 from line 12	67,388.	76,578.																								
Net Assets or Fund Balances		<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">Beginning of Current Year</th> <th style="text-align: center;">End of Year</th> </tr> </thead> <tbody> <tr> <td>20 Total assets (Part X, line 16)</td> <td style="text-align: right;">227,292.</td> <td style="text-align: right;">307,361.</td> </tr> <tr> <td>21 Total liabilities (Part X, line 26)</td> <td style="text-align: right;">36,809.</td> <td style="text-align: right;">40,300.</td> </tr> <tr> <td>22 Net assets or fund balances. Subtract line 21 from line 20</td> <td style="text-align: right;">190,483.</td> <td style="text-align: right;">267,061.</td> </tr> </tbody> </table>		Beginning of Current Year	End of Year	20 Total assets (Part X, line 16)	227,292.	307,361.	21 Total liabilities (Part X, line 26)	36,809.	40,300.	22 Net assets or fund balances. Subtract line 21 from line 20	190,483.	267,061.												
	Beginning of Current Year	End of Year																								
20 Total assets (Part X, line 16)	227,292.	307,361.																								
21 Total liabilities (Part X, line 26)	36,809.	40,300.																								
22 Net assets or fund balances. Subtract line 21 from line 20	190,483.	267,061.																								

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer V. ELAINE GROSS, PRESIDENT Type or print name and title	Date _____
Paid Preparer Use Only	Print/Type preparer's name MATT BURKE	Preparer's signature _____
	Date 06/06/16	Check <input type="checkbox"/> if self-employed PTIN P00760659
	Firm's name ▶ CERINI & ASSOCIATES, LLP	Firm's EIN ▶ 11-3066459
	Firm's address ▶ 3340 VETERANS MEMORIAL HIGHWAY BOHEMIA, NY 11716	Phone no. 631-582-1600

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: TO EXPOSE FORMS OF RACIAL DISCRIMINATION AND ADVOCATE FOR LAWS AND POLICIES THAT HELP ELIMINATE RACIAL DISPARITIES, PARTICULARLY IN THE AREAS OF HOUSING, COMMUNITY DEVELOPMENT, PUBLIC EDUCATION AND HEALTH.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 218,757. including grants of \$) (Revenue \$ 250,000.) HOUSING: TO IDENTIFY AND ADDRESS VARIOUS CAUSES OF RESIDENTIAL SEGREGATION THAT UNFAIRLY LIMITS ACCESS TO HOUSING OF ONE'S CHOOSING AND THAT ONE CAN AFFORD AND WHICH ALSO LIMITS ACCESS TO QUALITY SCHOOLS AND OTHER OPPORTUNITIES. THIS IS ACHIEVED THROUGH RESEARCH AND POLICY ADVOCACY IN AREAS SUCH AS FAIR HOUSING LAWS AND ENFORCEMENT, INCLUSIONARY ZONING PRACTICES, AND AFFORDABLE HOUSING POLICIES AND DEVELOPMENTS.

4b (Code:) (Expenses \$ 155,273. including grants of \$) (Revenue \$) PARTNER: TO ENCOURAGE SUPPORT FOR POLICIES AND PRACTICES THAT CREATE RACIALLY INTEGRATED AND EQUITABLE COMMUNITIES BY MOBILIZING LONG ISLANDERS TO ADVANCE THIS GOAL. THIS IS ACHIEVED BY EDUCATING INDIVIDUALS FROM DIVERSE BACKGROUNDS AND LOCALES, PRIMARILY VIA SOCIAL NETWORKING AND EVENTS, AND BY INFLUENCING REGIONAL LEADERSHIP THROUGH ORGANIZATIONAL ALLIANCES.

4c (Code:) (Expenses \$ 80,534. including grants of \$) (Revenue \$) EDUCATION: THE GOAL OF THE INITIATIVE IS TO CREATE A STRATEGIC DIALOGUE FOR CREATING MORE RACIALLY AND ETHNICALLY DIVERSE, HIGH PERFORMING PUBLIC SCHOOLS ON LONG ISLAND TO ENSURE THAT ALL STUDENTS HAVE ACCESS TO A RIGOROUS COURSE OF STUDY IN RACIALLY INTEGRATED SCHOOLS AND CLASSROOMS. EDUCATION EQUITY STRATEGIES AIMED AT PROVIDING ALL STUDENTS ON LONG ISLAND WITH A QUALITY EDUCATION INCLUDE REORGANIZATION WITHIN DIVERSE SCHOOL DISTRICTS SO THAT SCHOOLS AND CLASSROOMS ARE RACIALLY INTEGRATED, CREATION OF OPPORTUNITIES FOR INTEGRATED LEARNING ENVIRONMENTS ACROSS DISTRICTS, RESTRUCTURING ACROSS DISTRICTS TO ENSURE RACIAL DIVERSITY WITHIN DISTRICTS, AND ALIGNING EXPECTATIONS FOR STUDENT LEARNING AND TEACHER TRAINING. WE WILL ALSO IMPLEMENT A CAMPAIGN TO PROMOTE THE BENEFITS OF RACIAL INTEGRATION IN SCHOOLS.

4d Other program services (Describe in Schedule O.) (Expenses \$ 80,485. including grants of \$) (Revenue \$)

4e Total program service expenses 535,049.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
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? <i>If "Yes," complete Schedule C, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
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>	X	
b 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? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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 I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		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 "Yes," complete Schedule R, Part V, line 2</i>		
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>		X
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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		
Note. All Form 990 filers are required to complete Schedule O	X	

Part 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

Input box for Schedule O

Table with columns for question numbers (1a-14b), descriptions, and Yes/No columns. Includes questions about Form 1096, Form W-2G, Form W-3, and various tax compliance issues.

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 in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 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?; 16b 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?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed NY
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 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. [X] Own website [X] Another's website [X] Upon request [] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: V. ELAINE GROSS - 516-921-4863 6800 JERICHO TURNPIKE, SUITE 109W, SYOSSET, NY 11791

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ELAINE GROSS PRESIDENT	35.00	X		X				121,935.	0.	17,706.
(2) FREDERICK K. BREWINGTON BOARD MEMBER	2.00	X						0.	0.	0.
(3) PROF. HOWARD A. GLICKSTEIN CO-CHAIR	4.00	X		X				0.	0.	0.
(4) WILLIAM J. JENNINGS TREASURER	2.00	X		X				0.	0.	0.
(5) SISTER ELIZABETH HILL SECRETARY	0.50	X		X				0.	0.	0.
(6) DR. LORNA E. LEWIS BOARD MEMBER	1.00	X						0.	0.	0.
(7) CHRISTINA VARGAS CO-CHAIR	1.00	X		X				0.	0.	0.
(8) DEBORAH POST BOARD MEMBER	1.00	X						0.	0.	0.
(9) SCOTT A. WILLIAMS ASSOCIATE VP	0.50	X		X				0.	0.	0.
(10) MARGE ROGATZ CO-CHAIR	8.00	X		X				0.	0.	0.
(11) EDWARD PICHARDO ASSISTANT SECRETARY	1.00	X		X				0.	0.	0.
(12) MARTIN SCHWARTZ ASSISTANT TREASURER	1.00	X		X				0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Sub-total							121,935.	0.	17,706.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							121,935.	0.	17,706.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

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) Name and business address	(B) Description of services	(C) Compensation
THE ALCOTT GROUP 71 EXECUTIVE BLVD., FARMINGDALE, NY 11735	PROFESSIONAL EMPLOYER ORGANIZATIO	466,452.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **1**

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	202,887.				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	471,078.				
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f		673,965.				
	Program Service Revenue	2 a CONSULTING FEES	Business Code				
		812900	6,761.	6,761.			
b REGISTRATION FEES		812900	325.	325.			
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f		7,086.					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		1,407.			1,407.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)					
		d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)					
		d Net gain or (loss)					
	8 a Gross income from fundraising events (not including \$ 202,887. of contributions reported on line 1c). See Part IV, line 18	a		52,984.			
		b Less: direct expenses	b	52,984.			
		c Net income or (loss) from fundraising events		0.			
	9 a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses		b					
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11 a OTHER REVENUE		812900	4,732.	4,732.			
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d		4,732.				
12 Total revenue. See instructions.		687,190.	11,818.	0.	1,407.		

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 response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 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				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	36,817.	24,310.	12,110.	397.
12 Advertising and promotion				
13 Office expenses	19,884.	12,584.	4,062.	3,238.
14 Information technology				
15 Royalties				
16 Occupancy	24,858.	18,378.	4,538.	1,942.
17 Travel	10,665.	10,035.	124.	506.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	5,488.	4,461.	976.	51.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	2,957.	2,685.		272.
23 Insurance	9,711.	7,684.	1,229.	798.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a STAFF LEASING EXPENSE	466,452.	428,153.	11,028.	27,271.
b MISCELLANEOUS	15,604.	8,952.	3,962.	2,690.
c EQUIPMENT AND MAINTENAN	9,160.	8,791.	301.	68.
d PRINTING & PRODUCTION	9,016.	9,016.		
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	610,612.	535,049.	38,330.	37,233.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	201,183.	1	226,434.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	4,785.	3	54,996.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	10,388.	9	14,745.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 33,314.		
	b Less: accumulated depreciation	10b 29,097.	3,967.	10c 4,217.
	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	6,969.	15	6,969.
16 Total assets. Add lines 1 through 15 (must equal line 34)	227,292.	16	307,361.	
Liabilities	17 Accounts payable and accrued expenses	36,809.	17	40,300.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	36,809.	26	40,300.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	175,288.	27	216,876.
	28 Temporarily restricted net assets	15,195.	28	50,185.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	190,483.	33	267,061.
34 Total liabilities and net assets/fund balances	227,292.	34	307,361.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	687,190.
2	Total expenses (must equal Part IX, column (A), line 25)	2	610,612.
3	Revenue less expenses. Subtract line 2 from line 1	3	76,578.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	190,483.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	267,061.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
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? _____ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____		X
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 in Schedule O and describe any steps taken to undergo such audits _____		

Form 990 (2015)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization ERASE RACISM, INC.	Employer identification number 65-1218069
---	---

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	337,069.	456,170.	476,855.	542,476.	673,965.	2486535.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	337,069.	456,170.	476,855.	542,476.	673,965.	2486535.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						814,777.
6 Public support. Subtract line 5 from line 4.						1671758.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	337,069.	456,170.	476,855.	542,476.	673,965.	2486535.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources					0.	
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	556.	4,725.	2,626.	41,150.	6,139.	55,196.
11 Total support. Add lines 7 through 10						2541731.
12 Gross receipts from related activities, etc. (see instructions)					12	71,746.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	65.77 %
15 Public support percentage from 2014 Schedule A, Part II, line 14	15	67.17 %
16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2015. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	Yes	No
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		(A) Prior Year	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2015:			
a			
b			
c			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2015 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2016. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c Excess from 2013			
d Excess from 2014			
e Excess from 2015			

Schedule A (Form 990 or 990-EZ) 2015

Part VI

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

Multiple horizontal lines for supplemental information.

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Name of the organization

ERASE RACISM, INC.

Employer identification number

65-1218069

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not 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 does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization ERASE RACISM, INC.	Employer identification number 65-1218069
---	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	COMMUNITY ADVOCATES PO BOX 424 ROSLYN HEIGHTS, NY 11577	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	JOAN R SALTZMAN 10 SHEPHERDS LANE SANDS POINT, NY 11050	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	MARTIN SCHWARTZ 60 ORCHARD FARM RD PORT WASHINGTON, NY 11050	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	FORD FOUNDATION 320 EAST 43RD STREET NEW YORK, NY 10017	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	RAUCH FOUNDATION 229 SEVENTH ST SUITE 306 GARDEN CITY, NY 11530	\$ 185,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization ERASE RACISM, INC.	Employer identification number 65-1218069
---	---

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____

Name of organization ERASE RACISM, INC.	Employer identification number 65-1218069
---	---

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. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	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

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	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

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	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

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ **Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.**

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization ERASE RACISM, INC. **Employer identification number** 65-1218069

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the 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	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense 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.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (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 Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on 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 explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a 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 current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment _____ %
- b Permanent endowment _____ %
- c Temporarily restricted endowment _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		33,314.	29,097.	4,217.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				4,217.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

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

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

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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	687,190.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	687,190.
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	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	687,190.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

1	Total expenses and losses per audited financial statements		1	610,612.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	610,612.
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	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	610,612.

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 X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

ERASE EVALUATED ITS ACTIVITIES FOR UNCERTAIN TAX POSITIONS AND HAS DETERMINED THAT THERE WERE NO UNCERTAIN TAX POSITIONS FOR 2015 AND 2014.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities
Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization **ERASE RACISM, INC.** Employer identification number **65-1218069**

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a Mail solicitations
b Internet and email solicitations
c Phone solicitations
d In-person solicitations
e Solicitation of non-government grants
f Solicitation of government grants
g Special fundraising events
- 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total						

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

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		EVENT 1		NONE	
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	255,871.			255,871.
	2 Less: Contributions	202,887.			202,887.
	3 Gross income (line 1 minus line 2)	52,984.			52,984.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes	16,986.			16,986.
	6 Rent/facility costs	26,984.			26,984.
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	9,014.			9,014.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				52,984.
11 Net income summary. Subtract line 10 from line 3, column (d)				0.	

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____
a Is the organization licensed to conduct gaming activities in each of these states? Yes No
b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

Part IV Supplemental Information *(continued)*

Multiple horizontal lines for supplemental information.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public
Inspection

Name of the organization

ERASE RACISM, INC.

Employer identification number

65-1218069

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

LONG ISLAND. ERASE RACISM EDUCATES AND PROMOTES A DIALOGUE AMONG
COMMUNITY LEADERS ABOUT THE HISTORY, CONTINUING EXISTENCE, AND
OPERATIONAL REALITIES OF INSTITUTIONAL RACISM ON LONG ISLAND. ERASE
RACISM IDENTIFIES SPECIFIC MANIFESTATIONS OF INSTITUTIONAL RACISM,
INITIALLY IN HOUSING, PUBLIC EDUCATION, ECONOMIC DEVELOPMENT, AND
HEALTH. ERASE RACISM INITIATES AND FACILITATES DISCOURSE, APPROACHES,
AND TOOLS TO UNDO THE STRUCTURES, POLICIES, PRACTICES, AND
RELATIONSHIPS THAT PERPETUTATE INSTITUTIONAL RACISM AND RESULT IN
DISCRIMINATION, SEGREGATION, AND INEQUITIES BASED ON RACE.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

PLEASE SEE FINANCIAL STATEMENTS

EXPENSES \$ 80,485. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

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

THE ORGANIZATION WILL DISTRIBUTE THE DRAFT OF FORM 990 TO THE BOARD FOR ITS
REVIEW AND APPROVAL. BOARD MEMBERS WILL RESPOND BACK WITH ANY QUESTIONS OR
COMMENTS WHICH WILL THEN BE CONSIDERED IN THE FINAL FILED COPY.

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

THE ORGANIZATION DISTRIBUTES THE CONFLICT OF INTEREST POLICIES TO THE BOARD
OF DIRECTORS ANNUALLY TO SIGN.

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

THE CO-CHAIRS OF THE BOARD OF DIRECTORS PERFORM AN ANNUAL REVIEW OF THE

Name of the organization ERASE RACISM, INC.	Employer identification number 65-1218069
--	--

PRESIDENT'S COMPENSATION AND DELIBERATE ON ANY COMPENSATION INCREASES. THE PRESIDENT DOES THE REVIEW OF OTHER STAFF MEMBER SALARIES AND SALARY INCREASES.

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

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE ALL AVAILABLE UPON REQUEST AT THE ORGANIZATION'S OFFICE DURING BUSINESS HOURS, AS WELL AS ON GUIDESTAR.COM.

FORM 990, PART VII, SECTION A

ERASE HAS AN AGREEMENT WITH THE ALCOTT GROUP FOR ITS LEASED EMPLOYEES. ALL SALARIES, BENEFITS, TAXES, ETC. ARE PAID BY ALCOTT AND AN INVOICE IS SENT TO ERASE FOR ALL COSTS PLUS THEIR PROCESSING FEE. ALCOTT PROVIDES A DETAIL SCHEDULE OF HOURS, AMOUNTS, AND NAMES.

FORM 990, PART VII, SECTION B

COMPENSATION PAID TO THE ALCOTT GROUP PRIMARILY REPRESENTS STAFF SALARIES FOR LEASED EMPLOYEES.

ERASE RACISM, INC.
6800 JERICHO TURNPIKE, NO. 109W
SYOSSET, NY 11791-4401

NYS OFFICE OF ATTORNEY GENERAL
CHARITIES BUREAU REGISTRATION SECTION
120 BROADWAY
NEW YORK, NY 10271

FORM CHAR500

526340
04-01-15

11060606 130600 ERASE01

1
2015.03050 ERASE RACISM, INC.

ERASE011

CERINI & ASSOCIATES, LLP
3340 VETERANS MEMORIAL HWY
BOHEMIA, NY 11716

631-582-1600

JUNE 6, 2016

ERASE RACISM, INC.
6800 JERICHO TURNPIKE NO. 109W
SYOSSET, NY 11791-4401

ERASE RACISM, INC.:

WE HAVE PREPARED AND ENCLOSED YOUR 2015 NEW YORK FORM
CHAR500, ANNUAL FILING REPORT. THE REPORT SHOULD BE SIGNED,
DATED, AND MAILED AS INDICATED.

NEW YORK FORM CHAR500:

THE NEW YORK FORM CHAR500 SHOULD BE MAILED AS SOON AS
POSSIBLE TO:

NYS OFFICE OF ATTORNEY GENERAL
CHARITIES BUREAU REGISTRATION SECTION
120 BROADWAY
NEW YORK, NY 10271

ENCLOSE A CHECK OR MONEY ORDER FOR \$125.00, PAYABLE TO
DEPARTMENT OF LAW.

THE REPORT SHOULD BE SIGNED AND DATED BY THE AUTHORIZED
INDIVIDUAL(S).

A COPY OF THE RETURN IS ENCLOSED FOR YOUR FILES. WE SUGGEST
THAT YOU RETAIN THIS COPY INDEFINITELY.

VERY TRULY YOURS,

MATT BURKE

CHAR500

NYS Annual Filing for Charitable Organizations
www.CharitiesNYS.com

Send with fee and attachments to:
NYS Office of the Attorney General
Charities Bureau Registration Section
120 Broadway
New York, NY 10271

2015
Open to Public
Inspection

1. General Information

For Fiscal Year Beginning (mm/dd/yyyy) 01/01/2015 and Ending (mm/dd/yyyy) 12/31/2015		
Check if Applicable: <input type="checkbox"/> Address Change <input type="checkbox"/> Name Change <input type="checkbox"/> Initial Filing <input type="checkbox"/> Final Filing <input type="checkbox"/> Amended Filing <input type="checkbox"/> Reg ID Pending	Name of Organization: ERASE RACISM, INC.	Employer Identification Number (EIN): 65-1218069
	Mailing Address: 6800 JERICHO TURNPIKE, NO. 109W	NY Registration Number: 20-90-00
	City / State / ZIP: SYOSSET, NY 11791-4401	Telephone: 516 921-4863
	Website: WWW.ERASERACISMNY.ORG	Email:
Check your organization's registration category: <input type="checkbox"/> 7A only <input type="checkbox"/> EPTL only <input checked="" type="checkbox"/> DUAL (7A & EPTL) <input type="checkbox"/> EXEMPT Confirm your Registration Category in the Charities Registry at www.CharitiesNYS.com		

2. Certification

See instructions for certification requirements. Improper certification is a violation of law that may be subject to penalties.

We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report.

President or Authorized Officer: **V. ELAINE GROSS**
Signature _____ Print Name and Title _____ Date _____
PRESIDENT

Chief Financial Officer or Treasurer: _____
Signature _____ Print Name and Title _____ Date _____

3. Annual Reporting Exemption

Check the exemption(s) that apply to your filing. If your organization is claiming an exemption under one category (7A or EPTL only filers) or both categories (DUAL filers) that apply to your registration, complete only parts 1, 2, and 3, and submit the certified Char500. No fee, schedules, or additional attachments are required. If you cannot claim an exemption or are a DUAL filer that claims only one exemption, you must file applicable schedules and attachments and pay applicable fees.

3a. 7A filing exemption: Total contributions from NY State including residents, foundations, government agencies, etc, did not exceed \$25,000 and the organization did not engage a professional fund raiser (PFR) or fund raising counsel (FRC) to solicit contributions during the fiscal year. Or the organization qualifies for another 7A exemption (see instructions).

3b. EPTL filing exemption: Gross receipts did not exceed \$25,000 and the market value of assets did not exceed \$25,000 at any time during the fiscal year.

4. Schedules and Attachments

See the following page for a checklist of schedules and attachments to complete your filing.

Yes No 4a. Did your organization use a professional fund raiser, fund raising counsel or commercial co-venturer for fund raising activity in NY State? If yes, complete Schedule 4a.

Yes No 4b. Did the organization receive government grants? If yes, complete Schedule 4b.

5. Fee

See the checklist on the next page to calculate your fee(s). Indicate fee(s) you are submitting here:	7A filing fee: \$ <u>25.</u>	EPTL filing fee: \$ <u>100.</u>	Total fee: \$ <u>125.</u>	Make a single-check or money order payable to: "Department of Law"
---	---------------------------------	------------------------------------	------------------------------	--

CHAR500

Annual Filing Checklist

Simply submit the certified CHAR500 with no fee, schedule, or additional attachments IF:

- Your organization is registered as 7A only and you marked the 7A filing exemption in Part 3.
- Your organization is registered as EPTL only and marked the EPTL filing exemption in Part 3.
- Your organization is registered as DUAL and you marked both the 7A and EPTL filing exemption in Part 3.

Checklist of Schedules and Attachments

Check the schedules you must submit with your CHAR500 as described in Part 4:

- If you answered "yes" in Part 4a, submit Schedule 4a: Professional Fund Raisers (PFR), Fund Raising Counsel (FRC), Commercial Co-Venturers (CCV)
- If you answered "yes" in Part 4b, submit Schedule 4b: Government Grants

Check the financial attachments you must submit with your CHAR500:

- IRS Form 990, 990-EZ, or 990-PF, and 990-T if applicable
- All additional IRS Form 990 Schedules, including Schedule B (Schedule of Contributors).
- Our organization was eligible for and filed an IRS 990-N e-postcard. We have included an IRS Form 990-EZ for state purposes only.

If you are a 7A only or DUAL filer, submit the applicable independent Certified Public Accountant's Review or Audit Report:

- Review Report if you received total revenue and support greater than \$250,000 and up to \$500,000.
- Audit Report if you received total revenue and support greater than \$500,000
- No Review Report or Audit Report is required because total revenue and support is less than \$250,000
- We are a DUAL filer and checked box 3a, no Review Report or Audit Report is required

Calculate Your Fee

For 7A and DUAL filers, calculate the 7A fee:

- \$0, if you checked the 7A exemption in Part 3a
- \$25, if you did not check the 7A exemption in Part 3a

For EPTL and DUAL filers, calculate the EPTL fee:

- \$0, if you checked the EPTL exemption in Part 3b
- \$25, if the NET WORTH is less than \$50,000
- \$50, if the NET WORTH is \$50,000 or more but less than \$250,000
- \$100, if the NET WORTH is \$250,000 or more but less than \$1,000,000
- \$250, if the NET WORTH is \$1,000,000 or more but less than \$10,000,000
- \$750, if the NET WORTH is \$10,000,000 or more but less than \$50,000,000
- \$1500, if the NET WORTH is \$50,000,000 or more

Send Your Filing

Send your CHAR500, all schedules and attachments, and total fee to:

NYS Office of the Attorney General
 Charities Bureau Registration Section
 120 Broadway
 New York, NY 10271

Is my Registration Category 7A, EPTL, DUAL or EXEMPT?

Organizations are assigned a Registration Category upon registration with the NY Charities Bureau:

7A filers are registered to solicit contributions in New York under Article 7-A of the Executive Law ("7A")

EPTL filers are registered under the Estates, Powers & Trusts Law ("EPTL") because they hold assets and/or conduct activities for charitable purposes in NY.

DUAL filers are registered under both 7A and EPTL.

EXEMPT filers have registered with the NY Charities Bureau and meet conditions in **Schedule E - Registration Exemption for Charitable Organizations**. These organizations are not required to file annual financial reports but may do so voluntarily.

Confirm your Registration Category and learn more about NY law at www.CharitiesNYS.com

Where do I find my organization's NET WORTH?

NET WORTH for fee purposes is calculated on:

- IRS Form 990 Part I, line 22
- IRS Form 990 EZ Part I, line 21
- IRS Form 990 PF, calculate the difference between Total Assets at Fair Market Value (Part II, line 16(c)) and Total Liabilities (Part II, line 23(b)).

E·R·A·S·E



EDUCATION
RESEARCH
ADVOCACY &
SUPPORT TO
ELIMINATE
RACISM

*FINANCIAL STATEMENTS
AND INDEPENDENT AUDITORS' REPORT*

FOR THE YEARS ENDED DECEMBER 31, 2015 AND 2014

Connected
to your business
goals
success



CERINI
&
ASSOCIATES^{LLP}
CERTIFIED PUBLIC ACCOUNTANTS

**FINANCIAL STATEMENTS
AND INDEPENDENT AUDITORS' REPORT
FOR THE YEARS ENDED DECEMBER 31, 2015 AND 2014
TABLE OF CONTENTS**

Independent Auditors' Report 1

Audited Financial Statements

Statements of Financial Position..... 3
Statement of Activities for the year ended December 31, 2015..... 4
Statement of Activities for the year ended December 31, 2014..... 5
Statement of Functional Expenses for the year ended December 31, 2015 6
Statement of Functional Expenses for the year ended December 31, 2014 7
Statements of Cash Flows..... 8
Notes to Financial Statements..... 9



Independent Auditors' Report

To the Board of Directors
ERASE Racism, Inc.
Syosset, New York 11791-4401

Report on the Financial Statements

We have audited the accompanying financial statements of ERASE Racism, Inc. ("ERASE," a not-for-profit corporation), which comprise the statements of financial position as of December 31, 2015 and 2014, and the related statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to ERASE's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of ERASE's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of ERASE as of December 31, 2015 and 2014, and the changes in its net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Cerini & Associates LLP

March 25, 2016
Bohemia, New York

ERASE RACISM, INC.

**STATEMENTS OF FINANCIAL POSITION
DECEMBER 31,**

2015

2014

ASSETS

Current Assets:

Cash and cash equivalents.....	\$ 176,249	\$ 185,988
Restricted cash and cash equivalents (Note 7).....	50,185	15,195
Contributions and grants receivable (Note 4).....	54,996	4,785
Prepaid expenses and other current assets.....	14,745	10,388

TOTAL CURRENT ASSETS 296,175 216,356

Property and equipment, net of accumulated depreciation	4,217	3,967
Security deposit.....	6,969	6,969

TOTAL ASSETS \$ 307,361 \$ 227,292

LIABILITIES AND NET ASSETS

Current Liabilities:

Accounts payable and accrued expenses	\$ 40,300	\$ 36,809
---	-----------	-----------

TOTAL LIABILITIES 40,300 36,809

Commitments and contingencies (Notes 2, 3, 5, and 7)

Net Assets:

Unrestricted.....	216,876	175,288
Temporarily restricted (Note 7).....	50,185	15,195

TOTAL NET ASSETS 267,061 190,483

TOTAL LIABILITIES AND NET ASSETS \$ 307,361 \$ 227,292

**STATEMENT OF ACTIVITIES
FOR THE YEAR ENDED DECEMBER 31, 2015**

	<u>Unrestricted</u>	<u>Temporarily Restricted</u>	<u>Total</u>
SUPPORT AND REVENUE (Note 2) :			
Contributions and grants (Notes 4 and 7).....	\$ 433,988	\$ 37,090	\$ 471,078
Registration fees.....	325	-	325
Consulting fees.....	6,761	-	6,761
Other income.....	6,139	-	6,139
Net assets released from restrictions (Note 7).....	2,100	(2,100)	-
Gross proceeds from special events.....	255,871	-	255,871
Less: direct benefits to donors.....	(52,984)	-	(52,984)
Net proceeds from special events.....	<u>202,887</u>	<u>-</u>	<u>202,887</u>
Total Support and Revenue	652,200	34,990	687,190
EXPENSES:			
Program services:			
Housing.....	218,757	-	218,757
Education.....	80,534	-	80,534
Healthcare.....	466	-	466
Public education/seminars.....	21,555	-	21,555
Partner.....	155,273	-	155,273
Racism research.....	56,934	-	56,934
Youth.....	1,530	-	1,530
Total Program Services	535,049	-	535,049
Supporting services:			
Management and general.....	38,330	-	38,330
Development.....	37,233	-	37,233
Total Supporting Services	<u>75,563</u>	<u>-</u>	<u>75,563</u>
Total Expenses	<u>610,612</u>	<u>-</u>	<u>610,612</u>
Change in net assets.....	41,588	34,990	76,578
Net assets, beginning of year.....	<u>175,288</u>	<u>15,195</u>	<u>190,483</u>
Net assets, end of year.....	<u>\$ 216,876</u>	<u>\$ 50,185</u>	<u>\$ 267,061</u>

**STATEMENT OF ACTIVITIES
FOR THE YEAR ENDED DECEMBER 31, 2014**

	<u>Unrestricted</u>	<u>Temporarily Restricted</u>	<u>Total</u>
SUPPORT AND REVENUE (Note 2) :			
Contributions and grants (Note 7).....	\$ 363,220	\$ 2,300	\$ 365,520
Registration fees.....	10,130	-	10,130
Consulting fees.....	1,500	-	1,500
Other income (Note 6).....	41,150	-	41,150
Net assets released from restrictions (Note 7).....	32,113	(32,113)	-
Gross proceeds from special events.....	224,471	-	224,471
Less: direct benefits to donors.....	(47,515)	-	(47,515)
Net proceeds from special events.....	<u>176,956</u>	<u>-</u>	<u>176,956</u>
Total Support and Revenue	625,069	(29,813)	595,256
EXPENSES :			
Program services:			
Housing.....	253,843	-	253,843
Education.....	18,223	-	18,223
Healthcare.....	690	-	690
Public education/seminars.....	18,784	-	18,784
Partner.....	64,601	-	64,601
Racism research.....	64,861	-	64,861
Youth.....	2,324	-	2,324
Total Program Services	423,326	-	423,326
Supporting services:			
Management and general.....	70,597	-	70,597
Development.....	33,945	-	33,945
Total Supporting Services	<u>104,542</u>	<u>-</u>	<u>104,542</u>
Total Expenses	<u>527,868</u>	<u>-</u>	<u>527,868</u>
Change in net assets.....	97,201	(29,813)	67,388
Net assets, beginning of year.....	<u>78,087</u>	<u>45,008</u>	<u>123,095</u>
Net assets, end of year.....	<u>\$ 175,288</u>	<u>\$ 15,195</u>	<u>\$ 190,483</u>

**STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED DECEMBER 31, 2015**

	Program Services							Supporting Services		Total Expenses	
	Housing	Education	Healthcare	Public Education / Seminars	Partner	Racism Research	Youth	Total Program	Management and General		Development
Staff leasing expense	\$ 183,549	\$ 61,368	\$ 449	\$ 12,945	\$ 128,267	\$ 40,340	\$ 1,235	\$ 428,153	\$ 11,028	\$ 27,271	\$ 466,452
Professional fees	4,641	9,108	17	3,146	5,802	1,547	49	24,310	12,110	397	36,817
Telecommunications	1,917	577	-	236	2,002	2,830	19	7,581	1,221	337	9,139
Equipment and maintenance	651	459	-	33	669	6,971	8	8,791	301	68	9,160
Supplies	445	99	-	28	263	288	-	1,123	2,065	823	4,011
Conferences	220	546	-	1,902	1,793	-	-	4,461	976	51	5,488
Travel and entertainment	3,120	2,483	-	2,042	2,249	106	35	10,035	124	506	10,665
Postage and delivery	2,711	10	-	-	939	220	-	3,880	776	2,078	6,734
Occupancy (Note 3)	5,384	2,757	-	367	4,846	1,003	92	14,449	3,902	1,466	19,817
Utilities	1,456	751	-	102	1,319	274	27	3,929	636	476	5,041
Printing and production	6,223	426	-	492	850	1,025	-	9,016	-	-	9,016
Insurance	3,198	1,301	-	195	2,425	517	48	7,684	1,229	798	9,711
Miscellaneous	4,239	139	-	-	2,948	1,626	-	8,952	3,962	2,690	15,604
Depreciation	1,003	510	-	67	901	187	17	2,685	-	272	2,957
	<u>\$ 218,757</u>	<u>\$ 80,534</u>	<u>\$ 466</u>	<u>\$ 21,555</u>	<u>\$ 155,273</u>	<u>\$ 56,934</u>	<u>\$ 1,530</u>	<u>\$ 535,049</u>	<u>\$ 38,330</u>	<u>\$ 37,233</u>	<u>\$ 610,612</u>

**STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED DECEMBER 31, 2014**

	Program Services							Supporting Services		Total Expenses	
	Housing	Education	Healthcare	Public Education / Seminars	Partner	Racism Research	Youth	Total Program	Management and General		Development
Staff leasing expense	\$ 204,792	\$ 8,057	\$ 667	\$ 7,032	\$ 48,060	\$ 48,041	\$ 458	\$ 317,107	\$ 39,496	\$ 24,191	\$ 380,794
Professional fees	11,524	9,388	7	6,847	7,193	1,445	1,848	38,252	11,988	373	50,613
Telecommunications	2,828	54	-	40	533	304	-	3,759	1,241	231	5,231
Equipment and maintenance	1,063	37	-	26	355	5,200	-	6,681	293	153	7,127
Supplies	46	-	-	30	54	334	-	464	3,047	659	4,170
Conferences	370	-	-	1,480	605	-	-	2,455	761	55	3,271
Travel and entertainment	2,194	45	16	2,529	221	573	3	5,581	222	341	6,144
Postage and delivery	2,984	25	-	7	760	117	2	3,895	734	1,986	6,615
Occupancy (Note 3)	8,877	311	-	223	2,948	1,734	-	14,093	3,883	1,293	19,269
Utilities	2,365	81	-	60	779	454	-	3,739	636	348	4,723
Printing and production	5,504	-	-	354	279	651	13	6,801	-	522	7,323
Insurance	4,493	161	-	102	1,378	901	-	7,035	984	824	8,843
Miscellaneous	5,006	-	-	-	834	4,751	-	10,591	3,152	2,705	16,448
Depreciation	1,797	64	-	54	602	356	-	2,873	4,160	264	7,297
	<u>\$ 253,843</u>	<u>\$ 18,223</u>	<u>\$ 690</u>	<u>\$ 18,784</u>	<u>\$ 64,601</u>	<u>\$ 64,861</u>	<u>\$ 2,324</u>	<u>\$ 423,326</u>	<u>\$ 70,597</u>	<u>\$ 33,945</u>	<u>\$ 527,868</u>

ERASE RACISM, INC.

**STATEMENTS OF CASH FLOWS
FOR THE YEARS ENDED DECEMBER 31,**

2015

2014

CASH FLOWS FROM OPERATING ACTIVITIES:

Change in net assets.....	\$ 76,578	\$ 67,388
<u>Adjustment to reconcile change in net assets to net cash (used in)/provided by operating activities:</u>		
Depreciation expense.....	2,957	7,297
<u>Changes in operating assets and liabilities:</u>		
Restricted cash and cash equivalents.....	(34,990)	29,813
Contributions and grants receivable.....	(50,211)	155
Prepaid expenses and other current assets.....	(4,357)	(5,319)
Accounts payable and accrued expenses.....	3,491	8,029
Deferred revenue.....	-	(2,250)
Net cash (used in)/ provided by operating activities	(6,532)	105,113

CASH FLOWS USED IN INVESTING ACTIVITIES:

Purchases of property and equipment.....	<u>(3,207)</u>	<u>(1,645)</u>
Net change in cash and cash equivalents	(9,739)	103,468
Cash and cash equivalents, beginning of year.....	<u>185,988</u>	<u>82,520</u>
Cash and cash equivalents, end of year.....	<u><u>\$ 176,249</u></u>	<u><u>\$ 185,988</u></u>

**NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2015 AND 2014**

NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

This summary of significant accounting policies of ERASE Racism, Inc. (hereinafter "ERASE") is presented to assist in understanding ERASE's financial statements. The financial statements and notes are representations of ERASE's management, who is responsible for the integrity and objectivity of the financial statements. These accounting policies conform to accounting principles generally accepted in the United States of America and have been consistently applied in the preparation of the financial statements.

Organization: ERASE was founded in 2001 as an initiative of The Long Island Community Foundation ("LICF"), a division of The New York Community Trust ("NYCT"). It operates as an education and networking hub for leaders from nonprofits; local government; businesses; community groups; and health, education, welfare, and philanthropic organizations who are motivated to rid the region of institutional racism. In December of 2003, ERASE was incorporated in New York State. During 2004, ERASE obtained its tax-exempt status and separated from NYCT.

ERASE is a regional organization that leads public policy advocacy campaigns and related educational and programmatic initiatives to promote racial equity in areas such as housing, public school education, and healthcare, primarily on Long Island. Because of ERASE's work, racism—long a taboo subject—has become part of the regular discourse of public officials and other regional leaders. Consequently, ERASE's call to address racial inequity is now given serious consideration by regional leaders.

ERASE primarily receives its support from foundation and corporate grants and contributions, as well as an annual event, for the support of its efforts to engage individuals and organizations in educational and problem solving activities designed to increase public awareness of the history and effects of institutional racism in the region and to promote policies and practices that address the disparities and inequities resulting from institutional racism. Individual contributions and program fees provide additional support.

Cash and Cash Equivalents: All short-term investments with original maturities of three months or less are accounted for as cash equivalents and include checking, savings, and money market accounts.

Income Tax Status: ERASE is exempt from federal income tax under Internal Revenue Code Section 501(c)(3), is publicly supported, as described in Section 509(a), and does not conduct unrelated business activities.

ERASE evaluated its activities for uncertain tax positions and has determined that there were no uncertain tax positions for 2015 and 2014.

Tax returns for the years ended December 31, 2012, 2013, 2014, and 2015 are open for examination by federal, state, and local authorities. ERASE has determined that it has registered in all states where it is required to be registered.

NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2015 AND 2014

NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

Basis of Accounting: The financial statements have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America.

Revenue Recognition: ERASE recognizes revenue from grants and contributions in the period these grants are pledged. Revenue received under these grants and contributions is usually unrestricted as to use. All other contributions are recognized as revenue upon the receipt of cash.

Financial Statement Presentation: ERASE is required to report information regarding its financial position and activities according to three classes of net assets; unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

Unrestricted - Net assets that are not subject to donor-imposed stipulations.

Temporarily Restricted - Net assets subject to donor-imposed stipulations that may or will be met, either by action of ERASE and/or the passage of time.

Permanently Restricted - Net assets subject to donor-imposed stipulations that they be maintained permanently by ERASE. Generally, the donors of these assets would permit ERASE to use all or part of the income earned on any related investments for general purposes. ERASE did not have any permanently restricted net assets as of December 31, 2015 and 2014.

Contributions: Contributions are recognized when the donor makes a promise to give that is, in substance, unconditional. Contributions that are restricted by the donor are reported as increases in unrestricted net assets if the restrictions expire in the year in which the contributions are recognized. All other donor-restricted contributions are reported as increases in temporarily restricted net assets. When a restriction expires, temporarily restricted net assets are reclassified to unrestricted net assets.

Use of Estimates: The presentation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from these estimates.

Property and Equipment: Property and equipment are stated at cost. Those assets acquired by donation are carried at fair market value established at the date of acquisition. Maintenance and repairs are charged to expense and betterments in excess of \$1,000 are capitalized.

Depreciation expense is computed using the straight-line method over each asset's estimated useful life as follows:

	<u>Years</u>
Furniture and fixtures	7
Office equipment	3-5
Computer equipment.....	3

**NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2015 AND 2014**

NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

A half-year of depreciation is generally provided for in the years of acquisition and disposal.

Functional Allocation of Expenses: The costs of providing the various programs and other activities have been summarized on a functional basis in the statements of activities and functional expenses. Expenses have been allocated between program services and support services based on an analysis of personnel time for related activities. Management and general expenses include those expenses that are not directly identifiable with any other specific function but provide for the overall support and direction of ERASE.

Grants and Contributions Receivable: Grants and contributions receivable include unconditional promises to give. Management deems all grants and contributions receivable at December 31, 2015 and 2014 fully collectible. As such, no reserve for doubtful accounts has been established.

Leased Employees: ERASE has a year-to-year contract with Alcott Staff Leasing, Inc. ("Alcott"), a professional employer organization for leased employees. Alcott provides comprehensive human resource services to ERASE and is responsible for personnel, administrative, and benefits management functions, as well as payroll processing. Since Alcott is the employer of record for all employees assigned to ERASE, they are included in the Alcott quarterly Internal Revenue Service ("IRS") Form 941, New York State Form NYS-45, and statutory New York State disability and workers compensation filings. Alcott carries a surety bond of \$1 million, and in addition to an annual financial statement audit, undergoes quarterly agreed-upon procedures engagements intended to provide substantial assurance that all appropriate payroll taxes are paid and filed when due.

Donated Services: Certain individuals with specific expertise have provided services to ERASE on a pro-bono basis, which they would have paid for, had they not been donated. Such amounts have been recorded as both donated income and related expense. ERASE did not receive any donated services during 2015 or 2014. In addition, many individuals expend a significant level of time performing a variety of program functions and other tasks for ERASE, which do not require specific expertise. As such, these amounts are not reflected as donated services in the accompanying financial statements.

Events Occurring After Report Date: ERASE has evaluated events and transactions that occurred between January 1, 2016 and March 25, 2016, which is the date the financial statements were available to be issued, for possible disclosure and recognition in the financial statements. During 2016, ERASE is expected to receive two contributions totaling \$300,000 from two donors.

NOTE 2 - CONCENTRATIONS OF CREDIT RISK AND SUPPORT

Approximately 62% and 47% of total revenue in 2015 and 2014, respectively, was from three donors.

**NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2015 AND 2014**

NOTE 3 - LEASED FACILITIES

On January 6, 2011, ERASE entered into a lease for its current facilities in Syosset, New York. On January 31, 2013, the lease expiration date, the contract was amended to extend the lease term to January 1, 2015 with a monthly rent payment of \$1,795.50 during the first twelve-month period and \$1,849.37 for the remainder of the lease term. On November 19, 2014, the lease was again extended for a two-year period with an increase of the monthly rent payment to \$1,933.82 during the first twelve-month period and \$1,979.86 for the remainder of the lease term.

In addition to the rental agreement, ERASE also entered into a storage lease agreement on August 28, 2012 for use of storage space at its current location with monthly payments of \$120. The storage lease will expire upon the expiration of the office lease.

ERASE is also a lessee under a non-cancelable equipment lease requiring a monthly payment of \$130, through September 2015, and a monthly payment of \$128 thereafter, through September 2018.

Future obligations under these leases are as follows for the years ending December 31,:

	<u>Rent</u>	<u>Storage</u>	<u>Equipment</u>	<u>Total</u>
2016.....	\$ 23,712	\$ 1,440	\$ 1,536	\$ 26,688
2017.....	1,980	120	1,536	3,636
2018.....	-	-	1,152	1,152
	<u>\$ 25,692</u>	<u>\$ 1,560</u>	<u>\$ 4,224</u>	<u>\$ 31,476</u>

NOTE 4 - OPERATIONS

The overall mission that has guided ERASE’s work from its inception continued in 2015. This mission is to expose forms of racial discrimination and advocate for the engagement of the public in changing laws and policies to help eliminate racial disparities, particularly in the areas of housing, community development, and public education.

Accomplishments during 2015

Inclusive Housing and Community Organizing Program

ERASE continued to investigate policies and practices that result in racial inequities and took actions to address them, for example:

- On April 30, 2015, ERASE filed a federal housing discrimination lawsuit in the Southern District Court of New York against the owner, the management company, and the superintendent of an apartment complex in Commack, New York. Co-plaintiffs included the Fair Housing Justice Center. An investigation provided the basis for a lawsuit alleging that the superintendent discouraged African Americans from renting apartments by misrepresenting availability of

**NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2015 AND 2014**

NOTE 4 - OPERATIONS (continued)

apartments and/or misrepresenting the dates apartments were available to rent, in violation of the federal Fair Housing Act and the Suffolk County Human Rights Law.

- ERASE continued to seek a resolution to the Administrative Complaint it filed in 2014 with the U. S. Department of Housing and Urban Development (“HUD”). The complaint alleges that Nassau County discriminates on the basis of race and color, and perpetuates racial segregation in the administration of its housing and community development programs. HUD found that the complaint had merit and opened an investigation. In 2015, Nassau County, HUD and ERASE entered into a conciliation process, which is ongoing, to determine whether a settlement agreement can be reached between the parties.
- ERASE continued to analyze and submit comments in response to New York State’s amendments to the Action Plan for Community Development Block Grant Disaster Recovery (“CDBG-DR”) program. A significant amount of CDBG-DR funds were received by the State for remediation after Superstorm Sandy damage in 2012. ERASE raised its concerns to New York State about the program components and oversight and distribution of Superstorm Sandy disaster relief funds and concluded that its concerns were not being adequately acknowledged or addressed. Subsequently, ERASE submitted a FOIL Request to the State for information which would allow it to ascertain how funds had been used and whether the State had abided by HUD mandates in its expenditure and allocation of CDBG-DR funds. In late 2015, after continued prompting from ERASE, the Governor’s Office of Storm Recovery provided records in batches.
- ERASE completed its assessment of Superstorm Sandy damage sustained in the public housing units of the Channel Park Homes, a historically African American community in the City of Long Beach, and the remediation efforts that followed. The study results were compiled from a door-to-door survey of residents. ERASE plans to release a report of the study findings in early 2016. The report will be used as an advocacy tool to raise awareness about the injustices uncovered through the study and to facilitate demands that proper remediation is completed.
- ERASE alerted and mobilized residents in the North Park community about the City of Long Beach’s effort to update its Local Waterfront Revitalization Plan and Comprehensive Plan (“the Plans”). Many residents of North Park did not know about the updates to these Plans and were not notified about the City community planning meetings to gather community input about the Plans. ERASE helped to educate and engage the North Park residents by: (1) holding meetings to discuss items that the residents wanted to be included in the Plans and (2) developing a brochure, with assistance from a professor at the Harvard University School of Design, containing elements of what the residents envisioned for their community. Over 60 North Park residents attended the City’s meetings and used the brochure as an advocacy tool to provide their input on the Plans. The City has not yet released its draft Plans.

**NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2015 AND 2014**

NOTE 4 - OPERATIONS (continued)

- In April 2015, Suffolk County invited ERASE to review its draft Comprehensive Master Plan 2035, a document to guide the County's land-use and development decisions. ERASE provided initial feedback and later, during the public comment period, submitted formal comments on the plan and the need for more affordable multi-family housing in high opportunity communities. Many of ERASE's comments were incorporated into the final plan, which was passed by the Suffolk County Legislature and formally adopted by the County.
- ERASE completed an analysis of the nation's largest affordable housing program—the Federal Low-Income Housing Tax Credit—as administered by New York State (“the State”). It found that on Long Island, the Tax Credits were managed in a way that actually created more racial segregation, concentrated poverty, and denied the people who needed this housing the opportunity to live in neighborhoods with good resources. In September 2015, ERASE launched an online petition requesting that residents join ERASE in asking the State to alter the way it administers the program so that it helps to integrate our communities and open up opportunities for low-income residents. In 2015, 336 people signed the petition.

Education Equity Initiative

The objective of ERASE's Education Equity Initiative is to create racially and ethnically diverse, high performing public schools throughout the region. A sampling of actions creating public school education equity included:

- In January 2015, ERASE released the report, “Heading in the Wrong Direction: Growing School Segregation on Long Island,” which found that Long Island continues to be one of the most racially segregated regions in the country. The study highlighted that the majority of the region's Black and Latino students are relegated to low-performing and high need schools.
- In August 2015, an extensive analysis was conducted of current and potential federal, state, and local policies and laws that can either perpetuate racial segregation or contribute to racial integration in public schools. This will serve as a blueprint for the Education Equity Initiative.
- In September 2015, all program staff members and the President attended the National Coalition on School Diversity conference in Washington D.C., which focused on innovative programs addressing racial/ethnic, socioeconomic and linguistic integration in schools. Information from this conference will inform ERASE's work.
- On January 23, 2015, ERASE hosted a forum at the Newsday Headquarters in Melville, New York on public school education equity on Long Island, where it released its study along with a companion study by the Long Island Index. The forum brought together 65 school administrators and education advocates to explore issues affecting the quality of education on Long Island, including school segregation. Many attendees joined the Education Equity Working Group.

**NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2015 AND 2014**

NOTE 4 - OPERATIONS (continued)

- In June 2015, ERASE was awarded with a one-year \$100,000 grant to support its Education Equity work. Half of this payment was received during 2015. The remaining \$50,000 is included as a contribution receivable as of December 31, 2015 on the accompany statements of financial position. In September 2015, ERASE hired a full-time Education Equity Campaign Manager.
- On November 17, 2015, a meeting of the full ERASE Education Equity Working Group (“Working Group”) was held. Over 30 members participated, including school superintendents, principals, assistant principals, school board leaders, parents, academics, and representatives from nonprofit and advocacy organizations.
- Working Group subcommittees were created to advance the agenda in some key areas: (1) “Professional development and recruitment/retention of teachers of color” to address the need for teachers to be skilled in dealing with a growing diverse student population on Long Island, New York in terms of race, ethnicity, religion, and socioeconomic status, as well as the need for an increased number of teachers and administrators of color, and (2) “Campaign on the benefits of diverse educational settings” to address the need for information on the benefits of racially integrated learning environments and examples of such programs on Long Island and elsewhere and their impact on students.

Community Education and Mobilizing the Partnership for Racial Equity

ERASE utilized research, publications, and community engagement to reveal how racial disparities continue to deeply affect people of color and the region as a whole. Its Race and Racism Dialogues have created an environment where talking about racism is no longer taboo and myths can be dispelled. ERASE has established itself as an expert on issues related to structural racism on Long Island and elsewhere, which is evidenced by numerous speaking engagements and interviews. A sampling of actions that educated, engaged, and organized members of the ERASE Racism Partnership for Racial Equity and the general public around issues of structural racism in 2015 include:

- The creation of a new internet crowdsourcing game, C.U.R.E.-Cards Uplifting Racial Equity (<http://playcure.org>) created by two interns from the Massachusetts Institute of Technology. Content was supplied by ERASE. The game will be used as a tool to increase awareness about racial equity in Long Island.
- ERASE and several faith-based community leaders from across Long Island organized a youth retreat at Camp DeWolfe in Wading River, New York in October 2015. The retreat helped equip young people of different faith traditions and ethical communities with skills in building a more inclusive, diverse, and equitable future for Long Island.

**NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2015 AND 2014**

NOTE 4 - OPERATIONS (continued)

- ERASE's Unraveling Racism Training was held in December in Riverhead. A group of 32 participants were trained, including educators, police officers, and librarians.
- ERASE, as a member of the Long Island Progressive Network, was a leader in the planning of the inaugural conference, Progressive Vision for Long Island: Organizing for Success, held at Stony Brook University. The goal of the conference was to explore how campaigns and issues intersect and lay out a progressive vision for Long Island.
- On October, 31, 2015, ERASE's President was presented with the President's Award from the National Association of Negro Business and Professional Woman's Clubs, Inc. Central Nassau Club. On May 5, 2015, the President was a finalist for the Imagine Awards - Business Exchange Leadership Excellence Award.
- ERASE educated the public through numerous workshops, speeches, conference presentations, and media outreach. These include, but are not limited to, a round table discussion about the "Black Middle Class" in preparation for an upcoming documentary. ERASE's President was a panelist for "The Long Island Press Club" and spoke on a local television station's topic titled "Diverse Long Island." She was a presenter at the 2015 Long Island Jobs for Justice Conference and on April 18, 2015, she made a presentation on public school education for the Long Island Area Council of Unitarian Universalist. ERASE's President also made several presentations at local colleges, including Suffolk Community College, Molloy College Doctoral Program in Education and its Energeia Partnership, and Adelphi University.
- ERASE held two focus groups in 2015 with faith-based leaders to identify areas of mutual concern and points of action regarding racial equity on Long Island. The first focus group was held in Nassau County on September 3, 2015 and the second focus group was held on October 22, 2015 in Suffolk County. The results of the focus group discussions will be included in a report to be released in 2016 and will inform ERASE's work to effectively engage faith-based communities.

NOTE 5 - LINE OF CREDIT

Erase has a line of credit ("LOC") with Bethpage Federal Credit Union which allows borrowings of up to \$45,000, and charges an interest rate of 4.75%. There was no borrowing against this LOC at December 31, 2015 and 2014. The LOC is renewed annually.

**NOTES TO FINANCIAL STATEMENTS
FOR THE YEARS ENDED DECEMBER 31, 2015 AND 2014**

NOTE 6 - OTHER INCOME

In prior years, ERASE, the Fair Housing Justice Center (FHJC), a regional fair housing organization based in New York City, and three African American testers filed a lawsuit in a federal district court alleging that the owners and managers of an apartment building in the Village of Mineola discriminated against African American renters. This followed a 2012 investigation which was jointly funded and sponsored by ERASE and the FHJC. The suit alleged that the defendants' conduct constituted racial discrimination in violation of the Federal Fair Housing Act. The suit also alleged racial discrimination in violation of the Nassau County Human Rights Law.

During 2014, the case was settled for \$165,000, which was divided amongst the various parties collaborating on the case. The \$40,000 settlement payment received by ERASE was used for normal business operations.

NOTE 7 - TEMPORARILY RESTRICTED NET ASSETS

Assets were restricted for the following purposes as of December 31,:

	<u>2015</u>	<u>2014</u>
Fair Housing Project - Citi Group.....	\$ -	\$ 2,100
Various Contributions - Special Lawyer's Fund.....	13,095	13,095
Education - Rauch Foundation.....	37,090	-
Total temporarily restricted net assets.....	\$ 50,185	\$ 15,195

Temporarily restricted net assets changed as follows during the years ended December 31,:

	<u>2015</u>	<u>2014</u>
Restricted at beginning of year.....	\$ 15,195	\$ 45,008
Restricted contributions (net).....	37,090	2,300
Assets released from restriction:		
Originated in 2013.....	-	(32,113)
Originated in 2014.....	(2,100)	-
Restricted at end of year.....	\$ 50,185	\$ 15,195

Donor-restricted contributions whose restrictions are met in the same reporting period are reported as unrestricted support. During the years ended December 31, 2015 and 2014, ERASE received \$326,610 and \$200,000, respectively, in contributions whose restrictions had been met within the year of contribution and have been reflected as unrestricted in the accompanying statements of activities.

Cash and cash equivalents have been restricted in accordance with temporarily restricted net assets held at year-end. At December 31, 2015 and 2014, restricted net assets of \$50,185 and \$15,195 consisted entirely of restricted cash and cash equivalents, respectively.