Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047

2017

Open to Public Inspection

A For the 2017 calendar year, or tax year beginning 06/01/17 , and ending 05/31/18

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Final return/terminated ☐ Amended return ☐ Application pending

C Name of organization: PRO-LIFE ACTION LEAGUE, INC.

Doing business as

Number and street (or P.O. box if mail is not delivered to street address): 6160 NORTH CICERO AVENUE, SUITE 600 | Room/suite

City or town, state or province, country, and ZIP or foreign postal code: CHICAGO IL 60646

D Employer identification number: 36-3081086

E Telephone number: 773-777-2900

G Gross receipts $ 834,192

F Name and address of principal officer: ANN SCHEIDLER

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ PROLIFEACTION.ORG

H(c) Group exemption number ▶

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1980

M State of legal domicile: IL

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:

DISSEMINATION OF PRO-LIFE INFORMATION

2 Check this box ▶ ☐ 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	9
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	7
5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	13
6 Total number of volunteers (estimate if necessary)	6	0
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 34	7b	0

	Prior Year	Current Year
Revenue		
8 Contributions and grants (Part VIII, line 1h)	766,216	803,530
9 Program service revenue (Part VIII, line 2g)		0
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	117	11,694
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	76,227	7,906
12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	842,560	823,130
Expenses		
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	464,245	457,881
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 72,065		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	465,131	436,384
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	929,376	894,265
19 Revenue less expenses. Subtract line 18 from line 12	-86,816	-71,135

Net Assets or Fund Balances	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	195,515	123,905
21 Total liabilities (Part X, line 26)	1,190	715
22 Net assets or fund balances. Subtract line 21 from line 20	194,325	123,190

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 | Date

JOSEPH M. SCHEIDLER EXECUTIVE

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
VINCENT M. MAROTTA, CPA		11/29/18		P00227337

Firm's name ▶ VINCENT M. MAROTTA & ASSOCIATES, LTD. | Firm's EIN ▶ 36-4215777

Firm's address ▶ 22 CALENDAR COURT, SUITE F LAGRANGE, IL 60525 | Phone no. 708-848-9100

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:

DISSEMINATION OF PRO-LIFE INFORMATION

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

If "Yes," describe these new services on Schedule O.

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

If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses $ 677,607 including grants of $) (Revenue $)

DISSEMINATION OF PRO-LIFE INFORMATION

4b (Code:) (Expenses $ including grants of $) (Revenue $)

4c (Code:) (Expenses $ including grants of $) (Revenue $)

4d Other program services (Describe in Schedule O.)

(Expenses $ 8,753 including grants of $) (Revenue $)

4e Total program service expenses ▶ 686,360

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		X
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		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? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O.	38		X

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 ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	13			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)					
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		X
b	If "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		X
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter:					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter:					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

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

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

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c		X
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ IL

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 [ ] Another's website [ ] Upon request [ ] Other *(explain in Schedule O)*

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶

PRO-LIFE ACTION LEAGUE 6160 NORTH CICERO AVENUE
CHICAGO IL 60646 773-777-2900

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 dotted line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
(1) JASON ELDER BOARD MEMBER	0.00 0.00	X						0	0	0
(2) CHRISTOPHER CARNEY BOARD MEMBER	0.00 0.00	X						0	0	0
(3) CHRIS IVERSON BOARD MEMBER	0.00 0.00	X						0	0	0
(4) MARK VOISSEM BOARD MEMBER	0.00 0.00	X						0	0	0
(5) HENRY DAVISON BOARD MEMBER	0.00 0.00	X						0	0	0
(6) EUGENE CARTER BOARD MEMBER	0.00 0.00	X						0	0	0
(7) ANN SCHEIDLER SECRETARY	40.00 0.00			X				48,403	0	5,297
(8) JOSEPH M. SCHEIDLER EXECUTIVE	40.00 0.00			X				38,715	0	285
(9) ERIC J. SCHEIDLER EXECUTIVE DIRECTOR	40.00 0.00					X		117,630	0	2,970
(10)										
(11)										

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 dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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

		(D)	(E)	(F)
1b	**Sub-total** ▶	204,748		8,552
c	**Total from continuation sheets to Part VII, Section A** ▶			
d	**Total (add lines 1b and 1c)** ▶	204,748		8,552

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? *If "Yes," complete Schedule J for such individual*	3		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? *If "Yes," complete Schedule J for such individual*	4		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? *If "Yes," complete Schedule J for such person*	5		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

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 ▶ 0

Form 990 (2017) PRO-LIFE ACTION LEAGUE, INC. 36-3081086 Page 9

Part VIII Statement of Revenue

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

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	803,530				
	g	Noncash contributions included in lines 1a-1f:	$	6,100				
	h	**Total.** Add lines 1a–1f			803,530			
Program Service Revenue			Busn. Code					
	2a							
	b							
	c							
	d							
	e							
	f	All other program service revenue						
	g	**Total.** Add lines 2a–2f						
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			8,900			8,900
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
			(i) Real	(ii) Personal				
	6a	Gross rents						
	b	Less: rental exps.						
	c	Rental inc. or (loss)						
	d	Net rental income or (loss)						
			(i) Securities	(ii) Other				
	7a	Gross amount from sales of assets other than inventory	11,339					
	b	Less: cost or other basis & sales exps.	8,545					
	c	Gain or (loss)	2,794					
	d	Net gain or (loss)			2,794	2,794		
	8a	Gross income from fundraising events (not including $ .... of contributions reported on line 1c). See Part IV, line 18	a					
	b	Less: direct expenses	b					
	c	Net income or (loss) from fundraising events						
	9a	Gross income from gaming activities. See Part IV, line 19	a					
	b	Less: direct expenses	b					
	c	Net income or (loss) from gaming activities						
	10a	Gross sales of inventory, less returns and allowances	a	10,423				
	b	Less: cost of goods sold	b	2,517				
	c	Net income or (loss) from sales of inventory			7,906			7,906
		Miscellaneous Revenue	Busn. Code					
	11a							
	b							
	c							
	d	All other revenue						
	e	**Total.** Add lines 11a–11d						
	12	**Total revenue.** See instructions.			823,130	2,794	0	16,806

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	92,700	82,700	6,500	3,500
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	332,986	263,906	56,080	13,000
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	32,195	27,366	4,829	
11 Fees for services (non-employees):				
a Management				
b Legal	170	170		
c Accounting	12,755		12,755	
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 Schedule O.)				
12 Advertising and promotion	1,485	1,485		
13 Office expenses	3,119	3,119		
14 Information technology				
15 Royalties				
16 Occupancy	79,601	55,446	23,363	792
17 Travel	6,987	6,987		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	14,760	14,760		
20 Interest	919		919	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	8,753	8,753		
23 Insurance	108,670	91,691	16,979	
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 PRINTING & PUBLICATIONS	69,376	31,567	6,242	31,567
b POSTAGE AND SHIPPING	25,385	14,328		11,057
c MEDIA SUPPORT	19,170	19,170		
d TELEPHONE EXPENSE	13,875	13,875		
e All other expenses	71,359	51,037	8,173	12,149
25 **Total functional expenses.** Add lines 1 through 24e	894,265	686,360	135,840	72,065
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	60,544	1	94,734
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 144,072			
	b	Less: accumulated depreciation — 10b: 122,375	19,079	10c	21,697
	11	Investments—publicly traded securities	2,286	11	229
	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	113,606	15	7,245
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	195,515	16	123,905
Liabilities	17	Accounts payable and accrued expenses		17	
	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	1,190	25	715
	26	**Total liabilities.** Add lines 17 through 25	1,190	26	715
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☒ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	194,325	27	123,190
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ 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	194,325	33	123,190
	34	Total liabilities and net assets/fund balances	195,515	34	123,905

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	823,130
2	Total expenses (must equal Part IX, column (A), line 25)	2	894,265
3	Revenue less expenses. Subtract line 2 from line 1	3	-71,135
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	194,325
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	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	123,190

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☒ Cash ☐ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		
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.	3b		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization: PRO-LIFE ACTION LEAGUE, INC.

Employer identification number: 36-3081086

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 12, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

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 agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:

10 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

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 1–10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
(A)						
(B)						
(C)						
(D)						
(E)						
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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	914,422	839,620	1,028,432	766,216	803,530	4,352,220
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	914,422	839,620	1,028,432	766,216	803,530	4,352,220
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)						
6 **Public support.** Subtract line 5 from line 4.						4,352,220

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4	914,422	839,620	1,028,432	766,216	803,530	4,352,220
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	9,430	239	603	284	8,900	19,456
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	15,071	11,946	18,190	78,801	10,423	134,431
11 **Total support.** Add lines 7 through 10						4,506,107

12 Gross receipts from related activities, etc. (see instructions) | 12 |

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** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) | 14 | 96.58 %

15 Public support percentage from 2016 Schedule A, Part II, line 14 | 15 | 96.81 %

16a **33 1/3% support test—2017.** 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 ▶ ☒

b **33 1/3% support test—2016.** 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 ▶ ☐

17a **10%-facts-and-circumstances test—2017.** 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 ▶ ☐

b **10%-facts-and-circumstances test—2016.** 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 ▶ ☐

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 ▶ ☐

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(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 2017 (line 8, column (f) divided by line 13, column (f)) 15 %

16 Public support percentage from 2016 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2017** (line 10c, column (f) divided by line 13, column (f)) 17 %

18 Investment income percentage from **2016** Schedule A, Part III, line 17 18 %

19a **33 1/3% support tests—2017.** 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—2016.** 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 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d 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? *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.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in **Part VI** when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *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).*	5a		
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?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in **Part VI.***	6		
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? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in **Part VI.***	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in **Part VI.***	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in **Part VI.***	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	10b		

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?	11a		
b	A family member of a person described in (a) above?	11b		
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.***	11c		

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.*	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* ***Part VI*** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*	2		

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).*	1		

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?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* ***Part VI*** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	2		
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.*	3		

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 ☐ The organization satisfied the Activities Test. *Complete* ***line 2*** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* ***line 3*** *below.*

c ☐ The organization supported a governmental entity. *Describe in* ***Part VI*** *how you supported a government entity (see instructions).*

			Yes	No
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.*	2a		
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.*	2b		
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.***	3a		
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.*	3b		

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 (explain in Part VI). **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			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 ☐ 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 2017 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-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required-explain in **Part VI**). See instructions.			
3	Excess distributions carryover, if any, to 2017:			
a				
b	From 2013			
c	From 2014			
d	From 2015			
e	From 2016			
f	**Total** of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			
i	Carryover from 2012 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2017 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in **Part VI**. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in **Part VI**. See instructions.			
7	**Excess distributions carryover to 2018.** Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2013			
b	Excess from 2014			
c	Excess from 2015			
d	Excess from 2016			
e	Excess from 2017			

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.)

PART II, LINE 10 - OTHER INCOME DETAIL

OTHER INCOME $ 124,008

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047
2017
Open to Public Inspection

Name of the organization: PRO-LIFE ACTION LEAGUE, INC.

Employer identification number: 36-3081086

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? ☐ Yes ☐ 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? ☐ Yes ☐ 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)
- ☐ Protection of natural habitat
- ☐ Preservation of open space
- ☐ Preservation of a historically important land area
- ☐ Preservation of a certified historic structure

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 7/25/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization 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? ☐ Yes ☐ No

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)? ☐ Yes ☐ No

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				
e Other		144,072	122,375	21,697
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶				21,697

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. *(Column (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. *(Column (b) must equal Form 990, Part X, col. (B) line 13.)* ▶		

Part IX Other Assets.

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

(a) Description	(b) Book value
(1) SECURITY DEPOSIT	7,245
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 15.)* ▶	7,245

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) EMPLOYEE 401K PAYABLE	710
(3) ROUNDING	5
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶	715

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	
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	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

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

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part 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 XIII Supplemental Information *(continued)*

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

OMB No. 1545-0047
2017
Open to Public Inspection

Name of the organization	Employer identification number
PRO-LIFE ACTION LEAGUE, INC.	36-3081086

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT

DISSEMINATION OF PRO-LIFE INFORMATION

FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFICERS

JOSEPH SCHEIDLER

PRESIDENT

"FAMILY RELATIONSHIP"

ANN SCHEIDLER

VICE-PRES

"FAMILY RELATIONSHIP"

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

NO REVIEW WAS OR WILL BE CONDUCTED.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

PART VI, SECTION B. POLICIES - 15.

A.THE BOARD OF DIRECTORS ASSIGNED TO ANN SCHEIDLER THE DUTY OF CHECKING VIA 990 TAX RETURNS THE SALARY OF CEOS OF FOUR OTHER SIMILAR-SIZED NONPROFIT ORGANIZATIONS, AND TO REPORT HER FINDINGS TO THE BOARD. THE BOARD ALSO DISCUSSED THE PERFORMANCE OF THE EXECUTIVE DIRECTOR AND THE RESPONSIBILITIES OF HIS POSITION. A DECISION AS TO THE COMPENSATION FOR THE EXECUTIVE DIRECTOR WAS THEN BASED ON ALL THE ABOVE FACTORS, AS WELL AS TAKING INTO CONSIDERATION A GENERAL COST-OF-LIVING INCREASE.

Name of the organization	Employer identification number
PRO-LIFE ACTION LEAGUE, INC.	36-3081086

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

PART VI, SECTION B. POLICIES - 15.

B.THE EXECUTIVE DIRECTOR AND THE BOARD OF DIRECTORS DETERMINED THE SALARY FOR THE KEY EMPLOYEES, BASED ON THE FINANCIAL REPORTS OF THE ORGANIZATION AND THE INDUSTRY STANDARD FOR SIMILAR POSITIONS IN NONPROFIT ORGANIZATIONS.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

NO DOCUMENTS AVAILABLE TO THE PUBLIC

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)
▶ Attach to your tax return.
▶ Go to *www.irs.gov/Form4562* for instructions and the latest information.

OMB No. 1545-0172
2017
Attachment Sequence No. **179**

Name(s) shown on return: PRO-LIFE ACTION LEAGUE, INC.
Identifying number: 36-3081086

Business or activity to which this form relates: INDIRECT DEPRECIATION

Part I Election To Expense Certain Property Under Section 179
Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	510,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,030,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	

6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2016 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2018. Add lines 9 and 10, less line 12 ▶	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	1,799

Part III MACRS Depreciation (Don't include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2017	17	1,386
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ ☐		

Section B—Assets Placed in Service During 2017 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only–see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		10,392	5.0	HY	200DB	2,078
c 7-year property		979	7.0	HY	200DB	140
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2017 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	3,350
22	**Total.** Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	8,753
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

PRO-LIFE ACTION LEAGUE, INC. 36-3081086

Form 4562 (2017) Page 2

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? X Yes ☐ No — 24b If "Yes," is the evidence written? X Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)						25		
26 Property used more than 50% in a qualified business use:								
2011 CHEV VAN	11/25/15	100.00 %	17,790	17,790	5.0	200DBHY	3,350	
		%						
27 Property used 50% or less in a qualified business use:								
		%				S/L-		
		%				S/L-		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1						28	3,350	
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1							29	

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
30 Total business/investment miles driven during the year (don't include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **aren't** more than 5% owners or related persons (see instructions).

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		X
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		X
39 Do you treat all use of vehicles by employees as personal use?		X
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		X
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)		X

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2017 tax year (see instructions):					
43 Amortization of costs that began before your 2017 tax year				43	
44 **Total.** Add amounts in column (f). See the instructions for where to report				44	

Year Ended: May 31, 2018 36-3081086

Pro-Life Action League, Inc.
6160 North Cicero Avenue, Suite 600
Chicago, IL 60646

Electing out of Bonus Depreciation Allowance for All Eligible Depreciable Property

The above named taxpayer elects out of the first-year bonus depreciation allowance under IRC Section 168(k)(7) for all eligible depreciable property placed in service during the tax year.

Federal Asset Report
Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
5-year GDS Property:												
123	Computer	6/20/17	819				819	5	HY	200DB	0	164
124	Computer	7/21/17	409				409	5	HY	200DB	0	82
125	Computer	8/09/17	7,442				7,442	5	HY	200DB	0	1,488
127	Computer	11/20/17	522				522	5	HY	200DB	0	104
128	Computer	12/14/17	1,200				1,200	5	HY	200DB	0	240
			10,392				10,392				0	2,078
7-year GDS Property:												
126	Furniture	9/11/17	979				979	7	HY	200DB	0	140
			979				979				0	140
Prior MACRS:												
9	File Cabinets	12/07/89	462				462	7	HY	200DB	462	0
12	Furniture - Desk	3/19/90	320				320	7	HY	200DB	320	0
26	Furniture	4/05/98	488				488	7	HY	200DB	488	0
27	Chairs	5/28/98	1,940				1,940	7	HY	200DB	1,940	0
28	Furniture - Credenza	9/28/98	575				575	7	HY	200DB	575	0
29	3 Single Sided Roll up-banner System Exhil	4/20/01	3,003				3,003	7	MQ	200DB	3,003	0
50	Fax Machine - Cannon	3/03/98	2,433				2,433	5	HY	200DB	2,433	0
59	Furniture - Gently Used	9/17/02	679			X	475	7	HY	200DB	679	0
70	Camera Equipment - Helix	4/21/05	1,495				1,495	5	MQ	200DB	1,495	0
77	Projector - Tiger Direct (2 projectors)	10/13/06	1,578				1,578	5	HY	200DB	1,578	0
78	ABM Office Copier - CS5050	1/25/07	7,933				7,933	5	HY	200DB	7,933	0
83	Furniture & Fixtures - 2 chairs & 3 tables	1/15/08	946			X	473	7	HY	200DB	946	0
84	Furniture & Fixtures - 3 Desk Chairs	2/12/08	678			X	339	7	HY	200DB	678	0
85	Furniture & Fixtures -	3/11/08	1,645			X	823	7	HY	200DB	1,645	0
86	BookCase - 57th ST	6/09/08	1,590			X	795	7	HY	200DB	1,590	0
87	Furniture & Tables - Walter E Smith	6/27/08	1,866			X	933	7	HY	200DB	1,866	0
89	Camera	10/09/08	666			X	333	5	HY	200DB	666	0
96	Fixtures - Office Blinds	2/22/10	1,987			X	993	7	HY	200DB	1,987	0
98	Telephone System - Avaya	10/14/09	3,022			X	1,511	5	HY	200DB	3,022	0
100	Cameras - 1 Flip Cameras	4/28/11	375				375	5	HY	200DB	375	0
101	Computer - Server	2/12/11	1,701				1,701	5	HY	200DB	1,701	0
106	Computer Equipment - Apple I Pad & Acce	3/12/12	1,095			X	547	5	MQ	200DB	1,095	0
107	Computers - Apple Store I Mac Pro	6/01/12	8,687			X	4,343	5	HY	200DB	8,437	250
109	Equipment - PA Systems	9/11/12	500			X	250	5	HY	200DB	486	14
111	Computer Equipment - Canon 7D	2/15/13	1,500			X	750	5	HY	200DB	1,457	43
112	Computer - Audio Tech - Band H	4/30/13	1,127			X	563	5	HY	200DB	1,095	32
113	Computer - Apple I I Mac Pro	2/19/13	1,804			X	902	5	HY	200DB	1,752	52
115	Computers - Micro	6/19/13	2,447			X	1,223	5	HY	200DB	2,236	141
116	Camera & Phone	10/21/14	724				724	7	MQ	200DB	420	87
117	Computer	3/18/15	802				802	5	MQ	200DB	528	110
119	Computer - Apple Mac	12/10/15	3,126			X	1,563	5	HY	200DB	2,375	301
121	Computer - Lenovo	8/03/16	1,215			X	607	5	HY	200DB	729	194
122	Computer - Lenovo	1/17/17	1,016			X	508	5	HY	200DB	610	162
			59,425				41,760				56,602	1,386
ACRS:												
1	Furniture & Fixtures	6/01/84	7,316				7,316	5	HY	PRE	5,037	0
	Total ACRS Depreciation		7,316				7,316				5,037	0
Other Depreciation:												
91	Software - Adobe Suites	9/22/08	2,236			X	1,118	3	MO	Amort	2,236	0
104	Computer Software	6/22/10	33,966				33,966	3	MO	Amort	33,966	0
108	Computer Software - Adobe Systems	6/01/12	2,973			X	1,487	3	MO	Amort	2,973	0
118	Software - Metasoft Systems	5/29/15	8,995				8,995	5	MO	Amort	3,748	1,799
	Total Other Depreciation		48,170				45,566				42,923	1,799
	Total ACRS and Other Depreciation		55,486				52,882				47,960	1,799

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
Listed Property:												
120	2011 Chev Van	11/25/15	17,790				17,790	5	HY	200DB	9,060	3,350
			17,790				17,790				9,060	3,350
	Grand Totals		144,072				123,803				113,622	8,753
	Less: Dispositions and Transfers		0				0				0	0
	Less: Start-up/Org Expense		0				0				0	0
	Net Grand Totals		144,072				123,803				113,622	8,753

PRO01 Pro-Life Action League, Inc.
36-3081086
FYE: 5/31/2018 Mth: 5/31/2018

IL Asset Report
Form 990, Page 1

11/29/2018 1:01 PM

Asset	Description	Date In Service	Cost	Basis for Depr	IL Prior	IL Current	Federal Current	Difference Fed - IL
5-year GDS Property:								
123	Computer	6/20/17	819	819	0	164	164	0
124	Computer	7/21/17	409	409	0	82	82	0
125	Computer	8/09/17	7,442	7,442	0	1,488	1,488	0
127	Computer	11/20/17	522	522	0	104	104	0
128	Computer	12/14/17	1,200	1,200	0	240	240	0
			10,392	10,392	0	2,078	2,078	0
7-year GDS Property:								
126	Furniture	9/11/17	979	979	0	140	140	0
			979	979	0	140	140	0
Prior MACRS:								
9	File Cabinets	12/07/89	462	462	462	0	0	0
12	Furniture - Desk	3/19/90	320	320	320	0	0	0
26	Furniture	4/05/98	488	488	488	0	0	0
27	Chairs	5/28/98	1,940	1,940	1,940	0	0	0
28	Furniture - Credenza	9/28/98	575	575	575	0	0	0
29	3 Single Sided Roll up-banner System Exhil	4/20/01	3,003	3,003	3,003	0	0	0
50	Fax Machine - Cannon	3/03/98	2,433	2,433	2,433	0	0	0
59	Furniture - Gently Used	9/17/02	679	475	679	0	0	0
70	Camera Equipment - Helix	4/21/05	1,495	1,495	1,495	0	0	0
77	Projector - Tiger Direct (2 projectors)	10/13/06	1,578	1,578	1,578	0	0	0
78	ABM Office Copier - CS5050	1/25/07	7,933	7,933	7,933	0	0	0
83	Furniture & Fixtures - 2 chairs & 3 tables	1/15/08	946	473	946	0	0	0
84	Furniture & Fixtures - 3 Desk Chairs	2/12/08	678	339	678	0	0	0
85	Furniture & Fixtures -	3/11/08	1,645	823	1,645	0	0	0
86	BookCase - 57th ST	6/09/08	1,590	795	1,590	0	0	0
87	Furniture & Tables - Walter E Smith	6/27/08	1,866	933	1,866	0	0	0
89	Camera	10/09/08	666	333	666	0	0	0
96	Fixtures - Office Blinds	2/22/10	1,987	993	1,987	0	0	0
98	Telephone System - Avaya	10/14/09	3,022	1,511	3,022	0	0	0
100	Cameras - 1 Flip Cameras	4/28/11	375	375	375	0	0	0
101	Computer - Server	2/12/11	1,701	1,701	1,701	0	0	0
106	Computer Equipment - Apple I Pad & Acce	3/12/12	1,095	547	1,095	0	0	0
107	Computers - Apple Store I Mac Pro	6/01/12	8,687	4,343	8,437	250	250	0
109	Equipment - PA Systems	9/11/12	500	250	486	14	14	0
111	Computer Equipment - Canon 7D	2/15/13	1,500	750	1,457	43	43	0
112	Computer - Audio Tech - Band H	4/30/13	1,127	563	1,095	32	32	0
113	Computer - Apple I I Mac Pro	2/19/13	1,804	902	1,752	52	52	0
115	Computers - Micro	6/19/13	2,447	1,223	2,236	141	141	0
116	Camera & Phone	10/21/14	724	724	420	87	87	0
117	Computer	3/18/15	802	802	528	110	110	0
119	Computer - Apple Mac	12/10/15	3,126	1,563	2,375	301	301	0
121	Computer - Lenovo	8/03/16	1,215	607	729	194	194	0
122	Computer - Lenovo	1/17/17	1,016	508	610	162	162	0
			59,425	41,760	56,602	1,386	1,386	0
ACRS:								
1	Furniture & Fixtures	6/01/84	7,316	7,316	5,037	0	0	0
	Total ACRS Depreciation		7,316	7,316	5,037	0	0	0
Other Depreciation:								
91	Software - Adobe Suites	9/22/08	2,236	1,118	2,236	0	0	0
104	Computer Software	6/22/10	33,966	33,966	33,966	0	0	0
108	Computer Software - Adobe Systems	6/01/12	2,973	1,487	2,973	0	0	0
118	Software - Metasoft Systems	5/29/15	8,995	8,995	3,748	1,799	1,799	0
	Total Other Depreciation		48,170	45,566	42,923	1,799	1,799	0
	Total ACRS and Other Depreciation		55,486	52,882	47,960	1,799	1,799	0

IL Asset Report
Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	IL Prior	IL Current	Federal Current	Difference Fed - IL
Listed Property:								
120	2011 Chev Van	11/25/15	17,790	17,790	9,060	3,350	3,350	0
			17,790	17,790	9,060	3,350	3,350	0
	Grand Totals		144,072	123,803	113,622	8,753	8,753	0
	Less: Dispositions		0	0	0	0	0	0
	Less: Start-up/Org Expense		0	0	0	0	0	0
	Net Grand Totals		144,072	123,803	113,622	8,753	8,753	0

PRO01 Pro-Life Action League, Inc.
36-3081086
FYE: 5/31/2018 Mth: 5/31/2018

AMT Asset Report
Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
5-year GDS Property:												
123	Computer	6/20/17	819				819	5	HY	200DB	0	164
124	Computer	7/21/17	409				409	5	HY	200DB	0	82
125	Computer	8/09/17	7,442				7,442	5	HY	200DB	0	1,488
127	Computer	11/20/17	522				522	5	HY	200DB	0	104
128	Computer	12/14/17	1,200				1,200	5	HY	200DB	0	240
			10,392				10,392				0	2,078
7-year GDS Property:												
126	Furniture	9/11/17	979				979	7	HY	200DB	0	140
			979				979				0	140
Prior MACRS:												
9	File Cabinets	12/07/89	462				462	7	HY	150DB	462	0
12	Furniture - Desk	3/19/90	320				320	7	HY	150DB	320	0
26	Furniture	4/05/98	488				488	7	HY	150DB	488	0
27	Chairs	5/28/98	1,940				1,940	7	HY	150DB	1,940	0
28	Furniture - Credenza	9/28/98	575				575	7	HY	150DB	575	0
29	3 Single Sided Roll up-banner System Exhil	4/20/01	3,003				3,003	7	MQ	150DB	3,003	0
50	Fax Machine - Cannon	3/03/98	2,433				2,433	5	HY	150DB	2,433	0
59	Furniture - Gently Used	9/17/02	679			X	475	7	HY	200DB	679	0
70	Camera Equipment - Helix	4/21/05	1,495				1,495	5	MQ	150DB	1,495	0
77	Projector - Tiger Direct (2 projectors)	10/13/06	1,578				1,578	5	HY	150DB	1,578	0
78	ABM Office Copier - CS5050	1/25/07	7,933				7,933	5	HY	150DB	7,933	0
83	Furniture & Fixtures - 2 chairs & 3 tables	1/15/08	946			X	473	7	HY	200DB	946	0
84	Furniture & Fixtures - 3 Desk Chairs	2/12/08	678			X	339	7	HY	200DB	678	0
85	Furniture & Fixtures -	3/11/08	1,645			X	823	7	HY	200DB	1,645	0
86	BookCase - 57th ST	6/09/08	1,590			X	795	7	HY	200DB	1,590	0
87	Furniture & Tables - Walter E Smith	6/27/08	1,866			X	933	7	HY	200DB	1,866	0
89	Camera	10/09/08	666			X	333	5	HY	200DB	666	0
96	Fixtures - Office Blinds	2/22/10	1,987			X	993	7	HY	150DB	1,987	0
98	Telephone System - Avaya	10/14/09	3,022			X	1,511	5	HY	200DB	3,022	0
100	Cameras - 1 Flip Cameras	4/28/11	375				375	5	HY	200DB	375	0
101	Computer - Server	2/12/11	1,701				1,701	5	HY	200DB	1,701	0
106	Computer Equipment - Apple I Pad & Acce	3/12/12	1,095			X	547	5	MQ	200DB	1,095	0
107	Computers - Apple Store I Mac Pro	6/01/12	8,687			X	4,343	5	HY	200DB	8,437	250
109	Equipment - PA Systems	9/11/12	500			X	250	5	HY	200DB	486	14
111	Computer Equipment - Canon 7D	2/15/13	1,500			X	750	5	HY	200DB	1,457	43
112	Computer - Audio Tech - Band H	4/30/13	1,127			X	563	5	HY	200DB	1,095	32
113	Computer - Apple I I Mac Pro	2/19/13	1,804			X	902	5	HY	200DB	1,752	52
115	Computers - Micro	6/19/13	2,447			X	1,223	5	HY	200DB	2,236	141
116	Camera & Phone	10/21/14	724				724	7	MQ	200DB	420	87
117	Computer	3/18/15	802				802	5	MQ	150DB	424	132
119	Computer - Apple Mac	12/10/15	3,126			X	1,563	5	HY	200DB	2,375	301
121	Computer - Lenovo	8/03/16	1,215			X	607	5	HY	200DB	729	194
122	Computer - Lenovo	1/17/17	1,016			X	508	5	HY	200DB	610	162
			59,425				41,760				56,498	1,408
ACRS:												
1	Furniture & Fixtures	6/01/84	7,316				7,316	5	HY	PRE	5,037	0
	Total ACRS Depreciation		7,316				7,316				5,037	0
	Total ACRS and Other Depreciation		7,316				7,316				5,037	0
Listed Property:												
120	2011 Chev Van	11/25/15	17,790				17,790	5	HY	150DB	7,205	3,175
			17,790				17,790				7,205	3,175

AMT Asset Report
Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
	Grand Totals		95,902				78,237				68,740	6,801
	Less: Dispositions and Transfers		0				0				0	0
	Net Grand Totals		95,902				78,237				68,740	6,801

Bonus Depreciation Report

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
Activity: Form 990, Page 1								
91	Software - Adobe Suites	9/22/08	2,236		0	0	1,118	1,118
108	Computer Software - Adobe Systems	6/01/12	2,973		0	0	1,486	1,487
59	Furniture - Gently Used	9/17/02	679		0	0	204	475
83	Furniture & Fixtures - 2 chairs & 3 tables	1/15/08	946		0	0	473	473
84	Furniture & Fixtures - 3 Desk Chairs	2/12/08	678		0	0	339	339
85	Furniture & Fixtures -	3/11/08	1,645		0	0	822	823
86	BookCase - 57th ST	6/09/08	1,590		0	0	795	795
87	Furniture & Tables - Walter E Smith	6/27/08	1,866		0	0	933	933
89	Camera	10/09/08	666		0	0	333	333
96	Fixtures - Office Blinds	2/22/10	1,987		0	0	994	993
98	Telephone System - Avaya	10/14/09	3,022		0	0	1,511	1,511
106	Computer Equipment - Apple I Pad & Access	3/12/12	1,095		0	0	548	547
107	Computers - Apple Store I Mac Pro	6/01/12	8,687		0	0	4,344	4,343
109	Equipment - PA Systems	9/11/12	500		0	0	250	250
111	Computer Equipment - Canon 7D	2/15/13	1,500		0	0	750	750
112	Computer - Audio Tech - Band H	4/30/13	1,127		0	0	564	563
113	Computer - Apple I I Mac Pro	2/19/13	1,804		0	0	902	902
115	Computers - Micro	6/19/13	2,447		0	0	1,224	1,223
119	Computer - Apple Mac	12/10/15	3,126		0	0	1,563	1,563
121	Computer - Lenovo	8/03/16	1,215		0	0	608	607
122	Computer - Lenovo	1/17/17	1,016		0	0	508	508
		Form 990, Page 1	40,805		0	0	20,269	20,536
		Grand Total	40,805		0	0	20,269	20,536

Depreciation Adjustment Report
All Business Activities

MACRS Adjustments:

Form	Unit	Asset	Description	Tax	AMT	AMT Adjustments/ Preferences
Page 1	1	9	File Cabinets	0	0	0
Page 1	1	12	Furniture - Desk	0	0	0
Page 1	1	26	Furniture	0	0	0
Page 1	1	27	Chairs	0	0	0
Page 1	1	28	Furniture - Credenza	0	0	0
Page 1	1	29	3 Single Sided Roll up-banner System Exhibit	0	0	0
Page 1	1	50	Fax Machine - Cannon	0	0	0
Page 1	1	59	Furniture - Gently Used	0	0	0
Page 1	1	70	Camera Equipment - Helix	0	0	0
Page 1	1	77	Projector - Tiger Direct (2 projectors)	0	0	0
Page 1	1	78	ABM Office Copier - CS5050	0	0	0
Page 1	1	83	Furniture & Fixtures - 2 chairs & 3 tables	0	0	0
Page 1	1	84	Furniture & Fixtures - 3 Desk Chairs	0	0	0
Page 1	1	85	Furniture & Fixtures -	0	0	0
Page 1	1	86	BookCase - 57th ST	0	0	0
Page 1	1	87	Furniture & Tables - Walter E Smith	0	0	0
Page 1	1	89	Camera	0	0	0
Page 1	1	96	Fixtures - Office Blinds	0	0	0
Page 1	1	98	Telephone System - Avaya	0	0	0
Page 1	1	100	Cameras - 1 Flip Cameras	0	0	0
Page 1	1	101	Computer - Server	0	0	0
Page 1	1	106	Computer Equipment - Apple I Pad & Accessori	0	0	0
Page 1	1	107	Computers - Apple Store I Mac Pro	250	250	0
Page 1	1	109	Equipment - PA Systems	14	14	0
Page 1	1	111	Computer Equipment - Canon 7D	43	43	0
Page 1	1	112	Computer - Audio Tech - Band H	32	32	0
Page 1	1	113	Computer - Apple I I Mac Pro	52	52	0
Page 1	1	115	Computers - Micro	141	141	0
Page 1	1	116	Camera & Phone	87	87	0
Page 1	1	117	Computer	110	132	-22
Page 1	1	119	Computer - Apple Mac	301	301	0
Page 1	1	120	2011 Chev Van	3,350	3,175	175
Page 1	1	121	Computer - Lenovo	194	194	0
Page 1	1	122	Computer - Lenovo	162	162	0
Page 1	1	123	Computer	164	164	0
Page 1	1	124	Computer	82	82	0
Page 1	1	125	Computer	1,488	1,488	0
Page 1	1	126	Furniture	140	140	0
Page 1	1	127	Computer	104	104	0
Page 1	1	128	Computer	240	240	0
				6,954	6,801	153

PRO01 Pro-Life Action League, Inc. 11/29/2018 1:01 PM

36-3081086 **Future Depreciation Report FYE: 5/31/19**

FYE: 5/31/2018 Mth: 5/31/2018 **Form 990, Page 1**

Asset	Description	Date In Service	Cost	Tax	AMT
Prior MACRS:					
9	File Cabinets	12/07/89	462	0	0
12	Furniture - Desk	3/19/90	320	0	0
26	Furniture	4/05/98	488	0	0
27	Chairs	5/28/98	1,940	0	0
28	Furniture - Credenza	9/28/98	575	0	0
29	3 Single Sided Roll up-banner System Exhibit	4/20/01	3,003	0	0
50	Fax Machine - Cannon	3/03/98	2,433	0	0
59	Furniture - Gently Used	9/17/02	679	0	0
70	Camera Equipment - Helix	4/21/05	1,495	0	0
77	Projector - Tiger Direct (2 projectors)	10/13/06	1,578	0	0
78	ABM Office Copier - CS5050	1/25/07	7,933	0	0
83	Furniture & Fixtures - 2 chairs & 3 tables	1/15/08	946	0	0
84	Furniture & Fixtures - 3 Desk Chairs	2/12/08	678	0	0
85	Furniture & Fixtures -	3/11/08	1,645	0	0
86	BookCase - 57th ST	6/09/08	1,590	0	0
87	Furniture & Tables - Walter E Smith	6/27/08	1,866	0	0
89	Camera	10/09/08	666	0	0
96	Fixtures - Office Blinds	2/22/10	1,987	0	0
98	Telephone System - Avaya	10/14/09	3,022	0	0
100	Cameras - 1 Flip Cameras	4/28/11	375	0	0
101	Computer - Server	2/12/11	1,701	0	0
106	Computer Equipment - Apple I Pad & Accessori	3/12/12	1,095	0	0
107	Computers - Apple Store I Mac Pro	6/01/12	8,687	0	0
109	Equipment - PA Systems	9/11/12	500	0	0
111	Computer Equipment - Canon 7D	2/15/13	1,500	0	0
112	Computer - Audio Tech - Band H	4/30/13	1,127	0	0
113	Computer - Apple I I Mac Pro	2/19/13	1,804	0	0
115	Computers - Micro	6/19/13	2,447	70	70
116	Camera & Phone	10/21/14	724	64	64
117	Computer	3/18/15	802	88	131
119	Computer - Apple Mac	12/10/15	3,126	180	180
121	Computer - Lenovo	8/03/16	1,215	117	117
122	Computer - Lenovo	1/17/17	1,016	98	98
123	Computer	6/20/17	819	262	262
124	Computer	7/21/17	409	131	131
125	Computer	8/09/17	7,442	2,382	2,382
126	Furniture	9/11/17	979	240	240
127	Computer	11/20/17	522	168	168
128	Computer	12/14/17	1,200	384	384
			70,796	4,184	4,227
ACRS:					
1	Furniture & Fixtures	6/01/84	7,316	0	0
	Total ACRS Depreciation		7,316	0	0
Other Depreciation:					
91	Software - Adobe Suites	9/22/08	2,236	0	0
104	Computer Software	6/22/10	33,966	0	0
108	Computer Software - Adobe Systems	6/01/12	2,973	0	0
118	Software - Metasoft Systems	5/29/15	8,995	1,799	985
	Total Other Depreciation		48,170	1,799	985
	Total ACRS and Other Depreciation		55,486	1,799	985
Listed Property:					
120	2011 Chev Van	11/25/15	17,790	1,975	1,975

Asset	Description	Date In Service	Cost	Tax	AMT
			17,790	1,975	1,975
	Grand Totals		144,072	7,958	7,187

IL Future Depreciation Report FYE: 5/31/19

Form 990, Page 1

Asset	Description	Date In Service	Cost	IL
Prior MACRS:				
9	File Cabinets	12/07/89	462	0
12	Furniture - Desk	3/19/90	320	0
26	Furniture	4/05/98	488	0
27	Chairs	5/28/98	1,940	0
28	Furniture - Credenza	9/28/98	575	0
29	3 Single Sided Roll up-banner System Exhibit	4/20/01	3,003	0
50	Fax Machine - Cannon	3/03/98	2,433	0
59	Furniture - Gently Used	9/17/02	679	0
70	Camera Equipment - Helix	4/21/05	1,495	0
77	Projector - Tiger Direct (2 projectors)	10/13/06	1,578	0
78	ABM Office Copier - CS5050	1/25/07	7,933	0
83	Furniture & Fixtures - 2 chairs & 3 tables	1/15/08	946	0
84	Furniture & Fixtures - 3 Desk Chairs	2/12/08	678	0
85	Furniture & Fixtures -	3/11/08	1,645	0
86	BookCase - 57th ST	6/09/08	1,590	0
87	Furniture & Tables - Walter E Smith	6/27/08	1,866	0
89	Camera	10/09/08	666	0
96	Fixtures - Office Blinds	2/22/10	1,987	0
98	Telephone System - Avaya	10/14/09	3,022	0
100	Cameras - 1 Flip Cameras	4/28/11	375	0
101	Computer - Server	2/12/11	1,701	0
106	Computer Equipment - Apple I Pad & Accessori	3/12/12	1,095	0
107	Computers - Apple Store I Mac Pro	6/01/12	8,687	0
109	Equipment - PA Systems	9/11/12	500	0
111	Computer Equipment - Canon 7D	2/15/13	1,500	0
112	Computer - Audio Tech - Band H	4/30/13	1,127	0
113	Computer - Apple I I Mac Pro	2/19/13	1,804	0
115	Computers - Micro	6/19/13	2,447	70
116	Camera & Phone	10/21/14	724	64
117	Computer	3/18/15	802	88
119	Computer - Apple Mac	12/10/15	3,126	180
121	Computer - Lenovo	8/03/16	1,215	117
122	Computer - Lenovo	1/17/17	1,016	98
123	Computer	6/20/17	819	262
124	Computer	7/21/17	409	131
125	Computer	8/09/17	7,442	2,382
126	Furniture	9/11/17	979	240
127	Computer	11/20/17	522	168
128	Computer	12/14/17	1,200	384
			70,796	4,184
ACRS:				
1	Furniture & Fixtures	6/01/84	7,316	0
	Total ACRS Depreciation		7,316	0
Other Depreciation:				
91	Software - Adobe Suites	9/22/08	2,236	0
104	Computer Software	6/22/10	33,966	0
108	Computer Software - Adobe Systems	6/01/12	2,973	0
118	Software - Metasoft Systems	5/29/15	8,995	1,799
	Total Other Depreciation		48,170	1,799
	Total ACRS and Other Depreciation		55,486	1,799
Listed Property:				
120	2011 Chev Van	11/25/15	17,790	1,975

Asset	Description	Date In Service	Cost	IL
			17,790	1,975
	Grand Totals		144,072	7,958

Form **990**

Two Year Comparison Report

2016 & 2017

For calendar year 2017, or tax year beginning 06/01/17 , ending 05/31/18

Name: PRO-LIFE ACTION LEAGUE, INC.

Taxpayer Identification Number: 36-3081086

			2016	2017	Differences
Revenue	1. Contributions, gifts, grants	1.	766,216	803,530	37,314
	2. Membership dues and assessments	2.			
	3. Government contributions and grants	3.			
	4. Program service revenue	4.			
	5. Investment income	5.	284	8,900	8,616
	6. Proceeds from tax exempt bonds	6.			
	7. Net gain or (loss) from sale of assets other than inventory	7.	-167	2,794	2,961
	8. Net income or (loss) from fundraising events	8.			
	9. Net income or (loss) from gaming	9.			
	10. Net gain or (loss) on sales of inventory	10.	19,560	7,906	-11,654
	11. Other revenue	11.	56,667		-56,667
	12. Total revenue. Add lines 1 through 11	12.	842,560	823,130	-19,430
Expenses	13. Grants and similar amounts paid	13.			
	14. Benefits paid to or for members	14.			
	15. Compensation of officers, directors, trustees, etc.	15.	98,400	92,700	-5,700
	16. Salaries, other compensation, and employee benefits	16.	365,845	365,181	-664
	17. Professional fundraising fees	17.			
	18. Other professional fees	18.	15,171	12,925	-2,246
	19. Occupancy, rent, utilities, and maintenance	19.	78,462	79,601	1,139
	20. Depreciation and Depletion	20.	10,647	8,753	-1,894
	21. Other expenses	21.	360,851	335,105	-25,746
	22. Total expenses. Add lines 13 through 21	22.	929,376	894,265	-35,111
	23. Excess or (Deficit). Subtract line 22 from line 12	23.	-86,816	-71,135	15,681
Other Information	24. Total exempt revenue	24.	842,560	823,130	-19,430
	25. Total unrelated revenue	25.			
	26. Total excludable revenue	26.	76,344	19,600	-56,744
	27. Total assets	27.	195,515	123,905	-71,610
	28. Total liabilities	28.	1,190	715	-475
	29. Retained earnings	29.	194,325	123,190	-71,135
	30. Number of voting members of governing body	30.	9	9	
	31. Number of independent voting members of governing body	31.	7	7	
	32. Number of employees	32.	15	13	
	33. Number of volunteers	33.			

Form **990** | **Tax Return History** | **2017**

Name: PRO-LIFE ACTION LEAGUE, INC.

Employer Identification Number: 36-3081086

	2013	2014	2015	2016	2017	2018
Contributions, gifts, grants	914,422	839,680	1,028,432	766,216	803,530	
Membership dues						
Program service revenue						
Capital gain or loss		40	-1,980	-167	2,794	
Investment income	9,430	262	603	284	8,900	
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue	13,811	56	17,787	76,227	7,906	
Total revenue	937,663	840,038	1,044,842	842,560	823,130	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.	104,620	100,050	98,800	98,400	92,700	
Other compensation	417,942	375,477	355,858	365,845	365,181	
Professional fees	10,462	11,843	17,689	15,171	12,925	
Occupancy costs	78,341	86,683	84,492	78,462	79,601	
Depreciation and depletion	6,145	3,990	9,328	10,647	8,753	
Other expenses	370,785	350,433	378,975	360,851	335,105	
Total expenses	988,295	928,476	945,142	929,376	894,265	
Excess or (Deficit)	-50,632	-88,438	99,700	-86,816	-71,135	

Total exempt revenue	937,663	840,038	1,044,842	842,560	823,130	
Total unrelated revenue						
Total excludable revenue	23,241	358	16,410	76,344	19,600	
Total Assets	271,092	182,653	282,105	195,515	123,905	
Total Liabilities	1,213	1,212	964	1,190	715	
Net Fund Balances	269,879	181,441	281,141	194,325	123,190	

Form **990T**

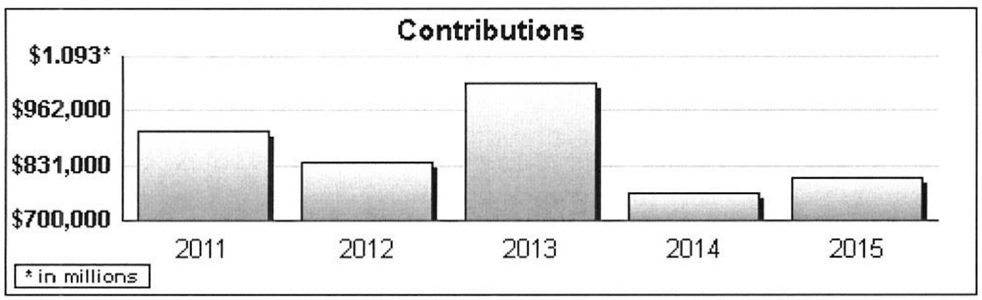
Tax Return History

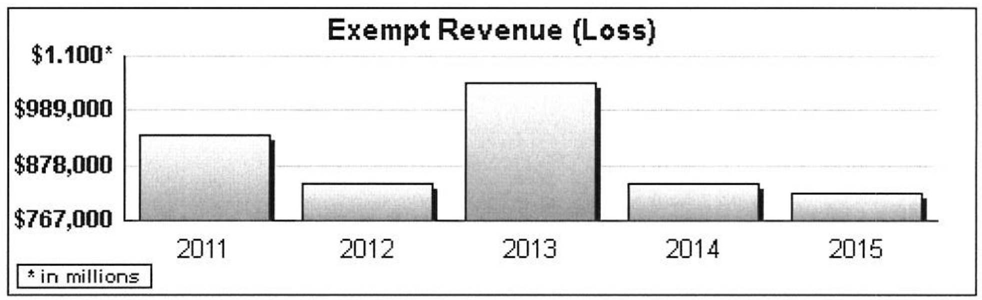
2017

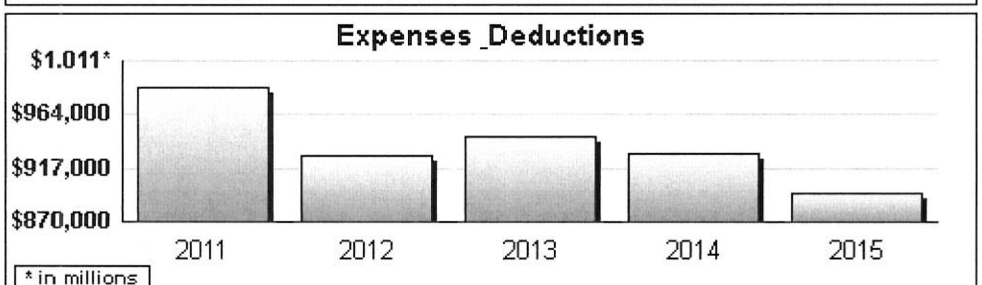
Name: PRO-LIFE ACTION LEAGUE, INC.

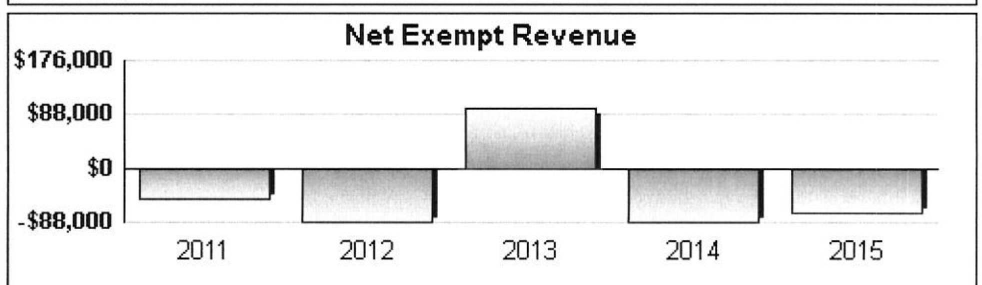
Employer Identification Number: 36-3081086

	2013	2014	2015	2016	2017	2018
Business activity profit/loss						
Capital gains/losses						
Partner and S Corp gain/loss						
Rental income*						
Debt-financed income*						
Controlled organizations income/interest*						
Investment income, specific organizations*						
Exploited exempt activity income*						
Other income						
Total trade or business income.						
Compensation of officers, ect.						
Other salaries and wages						
Repairs and maintenance						
Bad debts						
Interest						
Taxes and licenses						
Charitable contributions						
Depreciation and Depletion						
Deferred compensation plans						
Employee benefit programs						









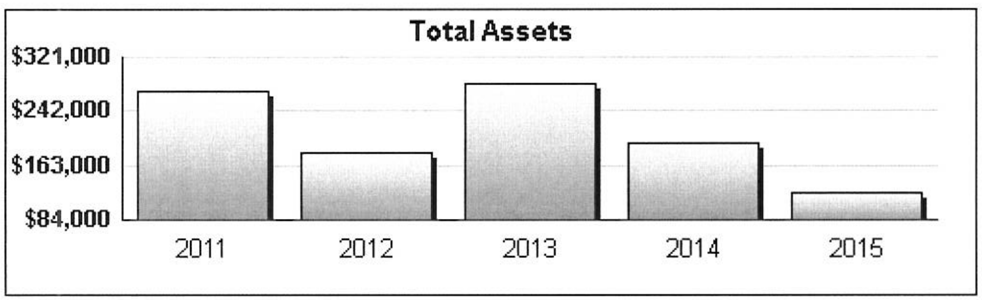
Form **990T** | **Tax Return History** | **2017**

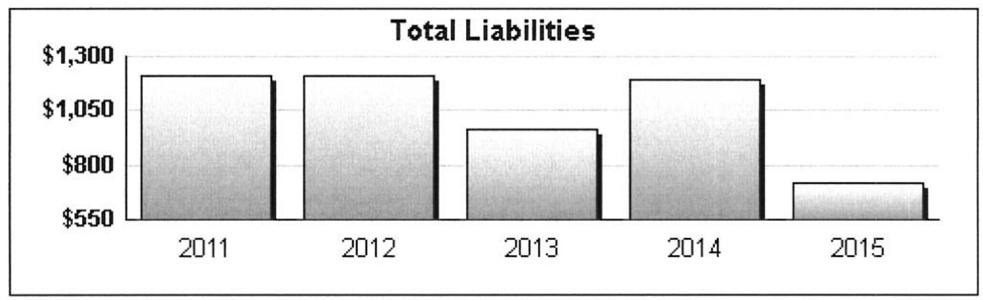
Name PRO-LIFE ACTION LEAGUE, INC.

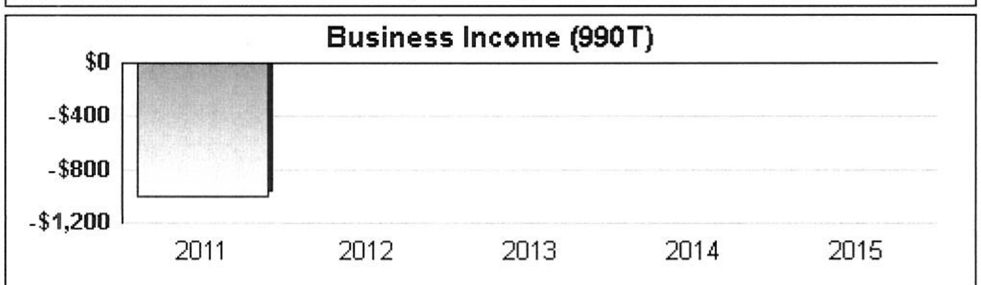
Employer Identification Number 36-3081086

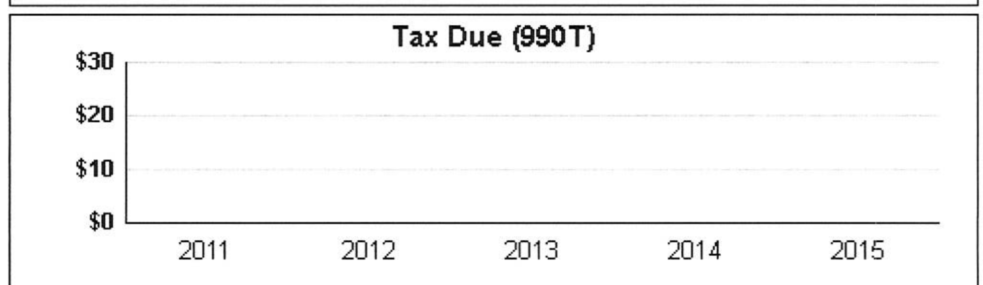
	2013	2014	2015	2016	2017	2018
Other deductions						
Net operating loss deduction						
Specific deduction	1,000					
Income after expense and deductions	-1,000					
Income tax (corporate or trust)						
Other taxes						
Total taxes						
General business credit						
Other credits						
Net tax after credits						
Estimated tax payments						
Other payments						
Balance due/Overpayment						

* Income shown net of expenses









Federal Statements

Taxable Interest on Investments

Description	Amount	Unrelated Business Code	Exclusion Code	Postal Code	Acquired after 6/30/75	US Obs ($ or %)
INTEREST MONEY MARKET	$ 266		14	IL		
TOTAL	$ 266					

Taxable Dividends from Securities

Description	Amount	Unrelated Business Code	Exclusion Code	Postal Code	Acquired after 6/30/75	US Obs ($ or %)
DIVIDEND FROM SECURITIES	$ 8,576		14	IL		
DIVIDEND FROM SECURITIES	58		14	IL		
TOTAL	$ 8,634					

Federal Statements

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
DISPLAY & BILL BOARD	$ 10,431	$ 10,431	$	$
FUNDRAISING EXPENSE	10,050			10,050
MEMORIAL MASS DONATION	7,820	7,820		
PRINTING PLAL NEWSPAPER	6,663	6,663		
COPIER RENTAL	6,377	5,377	1,000	
CREDIT CARD PROCESSING FE	5,184	5,184		
POSTAL METER FEES	4,049	4,049		
BROCHURES	3,739	3,739		
COMPUTER SUPPORT	3,717	3,717		
BANK CHARGES	3,527		3,527	
POSTCARDS & INVITATIONS	2,616	2,616		
DELIVERY SERVICE FEES	2,186		2,186	
FUNDRAISING MAILING LIST	2,099			2,099
AUTO EXPENSES	1,192	1,192		
MISCELLANEOUS LICENSE & T	1,135		1,135	
NEWSPAPERS & MAGAZINES SU	325		325	
MISCELLANEOUS EXPENSE	176	176		
DATABASE RENTAL	73	73		
TOTAL	$ 71,359	$ 51,037	$ 8,173	$ 12,149

Federal Statements

Schedule A, Part II, Line 1(e)

Description	Amount
GENERAL DONATIONS	$ 797,430
STOCK DONATION	1,042
STOCK DONATION	5,058
TOTAL	$ 803,530

Schedule A, Part II, Line 8(e)

Description	Amount
INTEREST MONEY MARKET	$ 266
DIVIDEND FROM SECURITIES	8,576
DIVIDEND FROM SECURITIES	58
TOTAL	$ 8,900

Schedule A, Part II, Line 10(e)

Description	Amount
LITERATURE & TAPES	$ 10,423
TOTAL	$ 10,423