### **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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.

Open to Public

Ā	For the	2022 calend	dar year, or tax year beginning	g 01/01/2022 a	nd ending		12/31/2	2022			
В	Check if	applicable:	C Name of organization Campaig	gn to Decriminalize Sex Work				D Emplo	oyer identification	number	
	Address	change	Doing business as						83-2009448		
	Name ch	hange	Number and street (or P.O. box	if mail is not delivered to street addres	ss)	Room	/suite	<b>E</b> Teleph	none number		
	Initial ret	turn	2407 South Congress Ave So	uite E111					512-942-6078		
	Final retu	urn/terminated	City or town, state or province, o	country, and ZIP or foreign postal code	е						
	Amende	ed return	Austin, TX 78704					<b>G</b> Gross	receipts \$	360,071	
	Applicat	ion pending	F Name and address of principal of	fficer: Robert Kampia			H(a) Is this a gro	oup return fo	or subordinates? 🔲 Y	es 🗸 No	
			8100 Red Willow Drive, Austi	in, TX 78736			H(b) Are all su	subordinates included? Tes No			
ī	Tax-exe	mpt status:	501(c)(3) 501(c) (	4 ) (insert no.) 4947(a)(1)	or 527		If "No," attach	n a list. Se	ee instructions.		
J	Website	: www.Dec	criminalizeSex.Work				H(c) Group ex	cemption	number		
ĸ	Form of	organization: 🗸	Corporation Trust Associa	ation Other	L Year of forr	nation:	2019	M State	of legal domicile:	DE	
Ρ	art I	Summa	ry	<u> </u>							
	1	Briefly des	cribe the organization's miss	sion or most significant activit	ties: To er	nd the	prohibition	of pros	stitution and imp	orove	
e			s relating to other forms of se								
aŭ											
Governance	2	Check this	box if the organization of	discontinued its operations or	disposed	of mo	ore than 25	% of its	s net assets.		
30	3		_	erning body (Part VI, line 1a).				3		1	
ૹ	4		-	ers of the governing body (Par				4		0	
Activities &	5			in calendar year 2022 (Part V,		,		5		0	
Ĭ	6			necessary)				6			
Ac	7a			Part VIII, column (C), line 12				7a		0	
	b			e from Form 990-T, Part I, line	11			7b		0	
							Prior Year	.	Current Ye	ear	
ø)	8	8 Contributions and grants (Part VIII, line 1h)						82,649		360,071	
Ď	9	Program service revenue (Part VIII, line 2g)								0	
Revenue	10	-	vestment income (Part VIII, column (A), lines 3, 4, and 7d) her revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)							0	
ď	11									0	
	12			must equal Part VIII, column (A			1	0 82,649		360,071	
_	13			IX, column (A), lines 1-3)				6,000		8,500	
	14			X, column (A), line 4)				0		0	
s	15	-	-	benefits (Part IX, column (A), li				0		0	
Expenses	16a			column (A), line 11e)	-			0		0	
per	b		raising expenses (Part IX, co		414						
Ж	17		enses (Part IX, column (A), lir				1	12,027		126,699	
	18	-		equal Part IX, column (A), line				18,027		135,199	
	19	-	-	18 from line 12				64,622		224,872	
or						Begi	nning of Curr		End of Ye		
Net Assets or Fund Balances	20	Total asset	ts (Part X, line 16)					56,979		882,308	
Ass d Ba	21		ties (Part X, line 26)					85		542	
E E	22		or fund balances. Subtract	line 21 from line 20			6	56,894		881,766	
	art II		re Block					, , , , , ,			
Un	nder pena			return, including accompanying sche	edules and st	atemer	nts, and to the	best of r	my knowledge and	belief, it is	
tru	e, correc	t, and complete	e. Declaration of preparer (other than	n officer) is based on all information of	f which prepa	arer has	s any knowled	ge.			
Sig	gn	Signature of	officer / /	1 1/2 -			Date		-/		
Here Rob Kampia, Political Director W. Kungu					11/1	2/2023					
			name and title	/							
	.i.d	Print/Type	e preparer's name	Preparer's signature		Date		Check	if PTIN		
Pa								self-emp			
	epare	[:was's assu	ne	1			Firm's	EIN	I		
US	se Onl	Firm's add					Phone				
Ma	v the IF			shown above? See instructio	ns		1. 110/10		□ Vec	□No	

Form 990 (2022)

Part	Ш	Statement of Program Service Accomplishments  Check if Schedule O contains a response or note to any line in this Part III						
1	Brief	describe the organization's mission:						
		I strives to end the prohibition of consensual adult prostitution and improve the policies relating to other forms of sex work						
		ne United States.						
2		e organization undertake any significant program services during the year which were not listed on the						
		Form 990 or 990-EZ?						
_		s," describe these new services on Schedule O.						
3		ne organization cease conducting, or make significant changes in how it conducts, any program						
		es?						
-		s," describe these changes on Schedule O.						
4		ibe the organization's program service accomplishments for each of its three largest program services, as measured by ses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,						
		ses. Section 30 f(c)(3) and 30 f(c)(4) organizations are required to report the amount of grants and allocations to others, tal expenses, and revenue, if any, for each program service reported.						
	tile t	tal expenses, and revenue, if any, for each program service reported.						
4a	(Cod	: ) (Expenses \$ 38,511 including grants of \$ 0 ) (Revenue \$ 0 )						
	1	IONT LOBBYING: CDSW lobbied the Vermont government as well as the local governments of Burlington and Montpelier						
		hange the state's and two cities' prostitution laws. In March 2022, fully 69% of Burlington voters passed a local referendum						
		emoved offensive prostitution language from the city's ordinances. A couple months later, the Montpelier city council passed						
		larly good bill. And then the state legislature enacted a law that permitted these two local measures to take effect. Three						
		n Vermont in one word						
		n vermont in one year:						
4b	(Cod	:) (Expenses \$33,012 including grants of \$0 ) (Revenue \$0						
		YORK STATE LOBBYING: CDSW lobbied the New York government to change the state's prostitution laws, with an						
	emphasis on passing "immunity" (also known as "Good Samaritan") legislation that seeks to protect sex workers from arrest if they							
	or th	d parties contact the police to report crimes involving violence and/or theft directed at the sex workers.						
4c	(Cod	:) (Expenses \$ including grants of \$ 0 ) (Revenue \$ 0 )						
	RHC	E ISLAND LOBBYING: CDSW lobbied the Rhode Island government to change a few of the state's prostitution statutes,						
	setti	g the stage for a more muscular lobbying effort in 2023.						
	<b>~</b> ··	' /D '						
4d		program services (Describe on Schedule O.) See Schedule O, Statement 1						
_	<u> </u>	nses \$ 31,196 including grants of \$ 8,500 ) (Revenue \$ 0 )						
4e	Tota	program service expenses 132,719						

Part I	V 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		1
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	<b>√</b>	
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	✓	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)		,	
-	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	-		
Ū	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		/
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	3		✓
6				
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	8.8		
	"Yes," complete Schedule D, Part I	6		✓
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		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		✓
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		✓
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			•
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		<b>V</b>
	VII, VIII, IX, or X, as applicable.			
	1			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
_	complete Schedule D, Part VI	11a		✓
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		✓
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		1
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		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
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		✓
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			· ·
	Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	124		· ·
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	406		,
40		12b		<b>√</b>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<b>√</b>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
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			100
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		✓
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		✓
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		✓
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		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			<u> </u>
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10		<b>-</b>
19	If "Yes," complete Schedule G, Part III	40		,
00		19		<b>√</b>
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
ь	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		1./

Part	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	1	
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	<b>√</b>	
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		•	
	-	24a		✓
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<b>√</b>
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		<b>√</b>
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		· ✓
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<b>√</b>
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			•
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		<b>√</b>
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		<b>∀</b>
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		<b>∀</b>
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29	✓	
	conservation contributions? If "Yes," complete Schedule M	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		· ✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		✓
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	<b>✓</b>	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	,	<b>√</b>
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	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<b>√</b>
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	38	1	
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			
	The second secon		Yes	No
1a b	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	-	. 50	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	4-		

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on 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		<b>√</b>
b	If "Yes," enter the name of the foreign country			
<b>-</b> -	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	c -		1
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		<b>V</b>
b c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		<b>V</b>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		
-	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	1	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		•	
	gifts were not tax deductible?	6b	<b>√</b>	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7h		
Ü	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	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:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b 13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
-	<b>Note:</b> 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			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓
, b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			,
	excess parachute payment(s) during the year?	15		<b>√</b>
16	If "Yes," see the instructions and file Form 4720, Schedule N.	16		1
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		<b>√</b>
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

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Part VI

Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No"

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. 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 1 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent ... 0 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 1 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person?. 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 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 Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O . . . . 9 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 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 **b** Describe on 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 **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 1 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official . . . . . . . . 15a 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a **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? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ✓ Own website ✓ Another's website ✓ Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 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. Maddy Kammeraad-Campbell, (512)942-6078

Form 990 (2022) Page **7** 

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization no	r any relate	d org	aniz	atic	n c	ompe	nsa	ated any current	officer, director,	or trustee.	
		(C)									
(A)	(B)			Position				(D)	(E)	(F)	
Name and title	Average hours	(do not check more than one box, unless person is both an officer and a director/trustee)					n an	Reportable compensation from the	Reportable compensation from related	Estimated amount of other compensation	
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations	
Robert Kampia	1.00										
Political Director	37.00	✓		✓				0	162,000	16,000	
Crystal DeBoise	0.00					2025					
Community Outreach Director	40.00					<b>V</b>		0	138,000	16,361	
Melissa Sontag Broudo	0.00	-									
Legal Director	40.00					<b>√</b>		0	138,000	12,221	
	<del> </del>	-									
-											
		-									
		-									
	<u> </u>										
	+	-	1	1	1	1	1	1		1	

Part	VII Section A. Officers, Directors,	Trustees,	Key I	Em	plo	yee	s, an	ıd F	lighest Compe	nsated Emplo	yees (continued)
						C)					
	(A)	(B)	(do n	ot el		sition	e than	one	(D)	(E)	(F)
	Name and title	Average	,				is both		Reportable	Reportable	Estimated amount
		hours per week	office	er an		direct	tor/trus	tee)	compensation from the	compensation from related	of other compensation
		(list any	or o	Inst	Officer	Ke)	em]	Former		organizations (W-2/	
		hours for	Individual trustee or director	Institutional	cer	Key employee	Highest compensated employee	mer	1099-MISC/	1099-MISC/	organization and
		related organizations	ू वं म	ona		plo	ee Cor		1099-NEC)	1099-NEC)	related organizations
		below	rust	Ē		yee	npe				
		dotted line)	8	trustee			nsat				
-				w			ed				
100								,			
100											
-											
			1								
-											
			1								
			1								
-											
		<del> </del>	-								
=											
		<del> </del>	-								
		<del> </del>	:-								
1b	Subtotal				-			-	0	438,000	44,582
c	Total from continuation sheets to Part	VII Sectio	n Δ	•				•		430,000	44,502
d	Total (add lines 1b and 1c)			•	•				0	438,000	44,582
2	Total number of individuals (including					thos	se lis	ted	_		
_	reportable compensation from the organi								0		
-									U		Yes No
3	Did the organization list any former	officer dire	ector	trı	iste	ا م	(eV e	mn	lovee or highes	st compensated	
·	employee on line 1a? If "Yes," complete						-			The state of the s	3 ✓
4	For any individual listed on line 1a, is the										0-0
-	organization and related organizations										
	individual										4 🗸
5	Did any person listed on line 1a receive of									tion or individua	
3	for services rendered to the organization										
Sooti	on B. Independent Contractors		<i>,</i> ,,,,,,,			,,,,,	u, o o ,		00017   0.00017		5 √
1	Complete this table for your five high	neet comn	eneat	od	inda	ana	ndent		entractors that i	received more	than \$100,000 of
•	compensation from the organization. Rep										
-	\$672	ort dompor	ioutioi			<i>-</i>	TOTTGG	T , C		Within the Organ	101.20
	<b>(A)</b> Name and business add	Irocc							( <b>B)</b> Description of services	lices	<b>(C)</b> Compensation
	Name and Dashess add	11 000							Description of serv	71003	Сопрованов
None											
-											
100											
	Takal manakan af indamandank an i	um Chr L. P.	!-	.1 .		D 1	· ·				
2	Total number of independent contractor						ea to	o th		e) wno	
	received more than \$100,000 of compens	ation from	ıne or	gar	ıızat	ion			0		

1 OIII 000 (202	د,
Part VIII	Statement of Revenue

		Check if Schedule	0.00	ntains a respon	se of flote to al	iy iiile iii tilis Fa	ITL VIII		🗀
						<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	( <b>D)</b> Revenue excluded from tax under sections 512–514
ທົທ	1a	Federated campaigi	ns .	1a	0				
ant	b	Membership dues			0				
جَ 5	С	Fundraising events			0				
fts, rA	d	Related organization			190,000				
ਲੂ ≅	е	Government grants	(cont	ributions) 1e	0				
Contributions, Gifts, Grants, and Other Similar Amounts	f	All other contribution and similar amounts no	ns, gif	ts, grants,	170,071				
tribu d Oth	g	Noncash contribution lines 1a-1f							
3or and	h	Total. Add lines 1a-				360,071			
		Total: Add liftes Ta			Business Code	300,011			
ĕ	2a				Daoinee e e e				
ر ٍ ₹	b	·							
Sel	c	S							
gram Ser Revenue	d								
g Re	e	,							
Program Service Revenue	f	All other program se	ervice	revenue					
_	g	Total. Add lines 2a-				0			
	3	Investment income	(incl	uding dividends	s, interest, and				
		other similar amoun							
	4	Income from investn							
	5	Davidia			2				
		•		(i) Real	(ii) Personal				
	6a	Gross rents	6a						
	b	Less: rental expenses	6b						
	С	Rental income or (loss)	6с	0	0				
	d	Net rental income of	r (loss	s)					
	7a	Gross amount from		(i) Securities	(ii) Other				
		sales of assets							
		other than inventory	7a						
ē	b	Less: cost or other basis							
Revenue		and sales expenses .	7b						
ě	С	Gain or (loss)	7с	0	0				
	d	Net gain or (loss)							
Othe	8a	Gross income from		ndraising					
0		events (not including		0					
		of contributions rep		_					
		1c). See Part IV, line		8a					
		Less: direct expense		ADD					
	C	Net income or (loss)			nts				
	9a	Gross income f activities. See Part I							
		Less: direct expense		· · · · · · · · · · · · · · · · · · ·					
		Net income or (loss) Gross sales of in			S				
	IVa	returns and allowan	10a						
	h	Less: cost of goods							
	b	Net income or (loss)		-	)rv				
w					Business Code				
Miscellaneous Revenue	11a								
ane næ	b								
scellaned Revenue	c	**************************************							
ŠŠ R	d	All other revenue							
Σ	e	Total. Add lines 11a				0			
	12	Total revenue. See				360,071	0	0	0

#### Part IX Statement of Functional Expenses

ection 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				
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21 .	2,500	2,500		
2	Grants and other assistance to domestic	,	,		
	individuals. See Part IV, line 22	6,000	6,000		
3	Grants and other assistance to foreign	0,000	0,000		
•	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16		2		
	AT-18	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors,				
	trustees, and key employees	0	0	0	0
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	0	0	0	0
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	0	0	0	0
9	Other employee benefits	0	0	0	0
10	Payroll taxes	0	0	0	0
11	Fees for services (nonemployees):	· ·			
··a	Management	o	0	0	0
b	Legal	0	0	0	0
c	Accounting	0	0	0	0
d	Lobbying	108,300	108,300	0	0
	Professional fundraising services. See Part IV, line 17	1000	108,300	U	
e	Investment management fees	0		0	0
f g	Other. (If line 11g amount exceeds 10% of line 25, column	U	0	U	0
9	(A), amount, list line 11g expenses on Schedule O.)	4.000	050	4.070	•
40		1,626	350	1,276	0
12	Advertising and promotion	13,161	13,161	0	0
13	Office expenses	1,204	0	790	414
14	Information technology	0	0	0	0
15	Royalties	0	0	0	0
16	Occupancy	0	0	0	0
17	Travel	712	712	0	0
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings .	196	196	0	0
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization .				
23	Insurance	0	0	0	0
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
а	political parties and candidates	1,500	1,500	0	0
b					
С					
d					
е	All other expenses	0	0	0	0
25	Total functional expenses. Add lines 1 through 24e	135,199	132,719	2,066	414
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)				
	3 ,,,,				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	rt X		
			(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing	238,979	1	76,808
	2	Savings and temporary cash investments	0	2	0
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	0	5	0
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	0
ţ	7	Notes and loans receivable, net	418,000	7	805,000
Assets	8	Inventories for sale or use	0	8	0
Ą	9	Prepaid expenses and deferred charges	0	9	0
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b	0	10c	
	11	Investments – publicly traded securities	0	11	0
	12	Investments – other securities. See Part IV, line 11	0	12	0
	13	Investments-program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	500
	15	Other assets. See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 33)	656,979	16	882,308
	17	Accounts payable and accrued expenses	85	17	542
	18	Grants payable	0	18	0
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .	0	21	0
es	22	Loans and other payables to any current or former officer, director,			
≝		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons	0		0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	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		2022	
		NO. 10-30-10-10-10-10-10-10-10-10-10-10-10-10-10	0	25	
	26	Total liabilities. Add lines 17 through 25	85	26	542
Ses		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.			
ă				0.7	
3a	27	Net assets without donor restrictions		27	
둳	28	Net assets with donor restrictions		28	
ڐؚ		and complete lines 29 through 33.			
卢	20	-		20	
ţ	29 30	Capital stock or trust principal, or current funds	0	29 30	0
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds .	656,894		881,766
ţ	32	Total net assets or fund balances	656,894		881,766
Ž	33	Total liabilities and net assets/fund balances	656,979	3773737	882,308
- Comment		rotal habilities and not assets/rand salations	030,373	~	002,300

Form 990 (2022) Page **12** 

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)		360,0	71
2	Total expenses (must equal Part IX, column (A), line 25)		135,1	99
3	Revenue less expenses. Subtract line 2 from line 1		224,8	72
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4		656,8	94
5	Net unrealized gains (losses) on investments			0
6	Donated services and use of facilities			0
7	Investment expenses			0
8	Prior period adjustments			0
9	Other changes in net assets or fund balances (explain on Schedule O)			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	32, column (B))		881,7	66
Part	XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII		[	
	•	)	es N	lo
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 on			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		_
	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		_
	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			
С	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 on Schedule O.			
9-				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			,
h		3a	<b>Y</b>	_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.	3b		
	required addit of addits, explain why on schedule of and describe any steps taken to undergo such addits.	SD		

Form **990** (2022)

## SCHEDULE C (Form 990)

#### **Political Campaign and Lobbying Activities**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

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

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

Open to Public Inspection

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

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

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

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

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name	of organization			E	mployer iden	ntification number	
Camp	aign to Decriminalize Sex W	/ork				83-2009448	
Part	I-A Complete if the	e organization is exempt und	er section 501(d	c) or is a se	ction 527 c	organization.	
1	Provide a description of definition of political car	f the organization's direct and in	direct political ca	mpaign activ	ities in Part	: IV. See instruc	tions for
2		y expenditures. See instructions .			\$		1,500
3		cal campaign activities. See instruc					0
Part		e organization is exempt und					
1	Enter the amount of any	excise tax incurred by the organiza	ation under section	n 4955	\$		
2	Enter the amount of any	excise tax incurred by organizatior	n managers under	section 4955	\$		
3	If the organization incurre	ed a section 4955 tax, did it file Fo	rm 4720 for this ye	ear?		Yes	No
4a						Yes	No
b	If "Yes," describe in Part						
Part	•	e organization is exempt und		7.00 / O.		(c)(3).	
1	and the second s	ly expended by the filing organiz		•	<b>A</b>		0
2		filing organization's funds contributies	_		_		0
3	Total exempt function e	expenditures. Add lines 1 and 2.	Enter here and	on Form 11	20-POL,		
					the state of the s		0
4	151 15	n file <b>Form 1120-POL</b> for this year				<del></del>	✓ No
5	organization made payme the amount of political co	ses and employer identification nur ents. For each organization listed, ontributions received that were pro I fund or a political action committe	enter the amount   mptly and directly	paid from the delivered to	filing organi a separate p	zation's funds. A olitical organizat	lso enter ion, such
	<b>(a)</b> Name	<b>(b)</b> Address	(c) EIN	<b>(d)</b> Amount filing orga funds. If nor		(e) Amount of p contributions rece promptly and di delivered to a se political organiz If none, enter	ived and irectly parate ration.
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							

Schedule C (Form 990) 2022 Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)). Check [ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures). **B** Check ☐ if the filing organization checked box A and "limited control" provisions apply. **Limits on Lobbying Expenditures** (b) Affiliated (a) Filing organization's totals (The term "expenditures" means amounts paid or incurred.) group totals Total lobbying expenditures to influence public opinion (grassroots lobbying) **b** Total lobbying expenditures to influence a legislative body (direct lobbying) . . . **c** Total lobbying expenditures (add lines 1a and 1b) . . . . . . . . . . Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 20% of the amount on line 1e. Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000. Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000. Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000. Over \$17,000,000 \$1,000,000. Grassroots nontaxable amount (enter 25% of line 1f) Subtract line 1g from line 1a. If zero or less, enter -0-Subtract line 1f from line 1c. If zero or less, enter -0-If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 No reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.) Lobbying Expenditures During 4-Year Averaging Period

	Calendar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column (e))					
С	Total lobbying expenditures					
d	Grassroots nontaxable amount					
е	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

Schedule C (Form 990) 2022

Schedule C (Form 990) 2022 Page **3** 

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT f (election under section 501(h)).	iled	Form	5768		
For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed	(8	1)		(b)	
	iption of the lobbying activity.	Yes	No	Aı	noun	t
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	)(5), C	or se	ction		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the					
Part	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Of answered "Yes."	R (b)	Part		ine 3	3, is
1	Dues, assessments and similar amounts from members	200	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of	0.			
a	Current year	•	2a			
b	Carryover from last year	1	2b			
с 3	Total	•	2c 3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of	the	3			
7	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby					
	and political expenditures next year?	_	4			
5	Taxable amount of lobbying and political expenditures. See instructions		5			
Part		-	<u> </u>			
Provid	le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro instructions); and Part II-B, line 1. Also, complete this part for any additional information.	up list	t); Par	t II-A, I	ines 1	and
Sched	lule C, Part I-A, Line 1 - CDSW occasionally donates to political parties and/or the campaigns of candidate	s for p	public	office,	as	
permi	tted by state laws. In 2022, CDSW made donations only in New York State and Vermont.					

#### SCHEDULE I (Form 990)

# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Name of the organization						Employe	i identinca don numbe	•
Campaign to Decriminalize Sex Work							83-2009448	
Part I General Information	on Grants and	l Assistance						
Does the organization maintai     the selection criteria used to a			_	528 D-	·	or the grants or assistanc		□No
2 Describe in Part IV the organiz	zation's procedu	res for monitoring	the use of grant fu	ınds in the United	States.			
Part II Grants and Other Ass Part IV, line 21, for any							ered "Yes" on F	orm 990,
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of or assistance	~
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
2 Enter total number of section	501(c)(3) and go	ı vernment organiz	ations listed in the	line 1 table				

**3** Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) 2022

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assista
e Schedule I, Part IV, Statement 1					
Supplemental Information, Pro	ovide the information re	equired in Part I. li	ine 2: Part III. colum	n (b): and any other additi	onal information.
		·			
Supplemental Information. Pro le I, Part I, Line 2 - CDSW issues only a har		·			
		·			
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#### Campaign to Decriminalize Sex Work

Form: **Schedule I (2022)** EIN: **83-2009448** 

Page: 2

Part III

		Number of recipients	Amt. of cash grant	Amt. of non- cash asst.
Type of grant	CDSW issued a grant to a sex-worker activist in New Hampshire, in supp of CDSW's lobbying efforts to change New Hampshire's laws.	ort 1	6,000	0
Method of valuation				
Desc. of Non-Cash Asst.				

#### **SCHEDULE J** (Form 990)

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Camp	aign to Decriminalize Sex Work 83-20094	48		
Part	Questions Regarding Compensation			
		-	Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use			
	☐ Travel for companions ☐ Payments for business use of personal residence			
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  Approval by the board or compensation committee			
	Divine the year did any name is letted on Fame CCC Part VIII. Costian A. line 1a, with manner to the filling			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		✓
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		1
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		1
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:			
а	The organization?	5a		√
b	Any related organization?	5b		<b>√</b>
	If "Yes" on line 5a or 5b, describe in Part III.			
•	For parsons listed on Form 000 Part VII Section A line to did the assessment on any assessment			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
_		6-		1
a	The organization?	6a		<b>√</b>
b	Any related organization?	6b		<b>V</b>
	if res on line oa or ob, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
-	payments not described on lines 5 and 6? If "Yes," describe in Part III	7		1
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			1
U	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		1
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

9

Schedule J (Form 990) 2022

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

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

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

		( <b>B)</b> Breakdown of W-2 an	nd/or 1099-MISC and/or 10	99-NEC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
Robert Kampia, Political Director	(i)	0	0	0	0	0	0	0
1	(ii)	141,504	0	0	20,496	16,000	178,000	0
Crystal DeBoise, Community	(i)	0	0	0	0	0	0	0
Outreach Director	(ii)	138,000	0	0	0	16,361	154,361	0
Melissa Sontag Broudo, Legal	(i)	0	0	0	0	0	0	0
3 Director	(ii)	138,000	0	0	0	12,221	150,221	0
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
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12	(ii)							
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13	(ii)							
	(i)							
14	(ii)							<del> </del>
	(i)							
15	(ii)	ļ						
	(i)							
16	(ii)	ļ						

chedule J (F	orm 990) 2022	Page
Part III	Supplemental Information	
rovide t	e information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete t	this pa
or any ad	ditional information.	

## SCHEDULE M (Form 990)

#### **Noncash Contributions**

OMB No. 1545-0047

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

ation. Inspection
Employer identification number

Campaign to Decriminalize Sex Work 83-2009448 Types of Property Part I (c) (a) (b) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g Art-Works of art . . . . . 1 2 Art-Historical treasures . . . 3 Art—Fractional interests . . 4 Books and publications . . 5 Clothing and household goods . . . . . . . . . 6 Cars and other vehicles . . . 7 Boats and planes . . . . . 8 Intellectual property . . . . 9 Securities-Publicly traded . . 10 Securities-Closely held stock . Securities—Partnership, LLC, 11 or trust interests 12 Securities-Miscellaneous . . 13 Qualified conservation contribution - Historic structures . . . . . . . . . 14 Qualified conservation contribution - Other 15 Real estate-Residential . . . 16 Real estate - Commercial . . 17 Real estate-Other . . . . 18 Collectibles . . . . . . 19 Food inventory . . . . . 20 Drugs and medical supplies . . 21 Taxidermy . . . . . . 22 Historical artifacts . . . . 23 Scientific specimens . . . . 24 Archeological artifacts 25 Other ( cryptocurrency 118,237 cash from immediate sale 26 Other ( Other ( 27 28 Other ( 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement . . . . . . Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be 30a **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard 31 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, 33 describe in Part II.

Schedule M (Form 990) 2022 Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether Part II the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

#### **SCHEDULE O** (Form 990)

#### Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection Employer identification number

Campaign to Decriminalize Sex Work	83-2009448
Form 990, Part VI, Section B, Line 11b - CDSW's board of directors meticulously reviewed this Form 990 b	efore it was submitted to the IRS.
Form 990, Part VI, Section B, Line 12c - At the annual meeting of CDSW's board of directors (which occurs	s each summer), there is a formal
review of potential conflicts of interest among board members, officers, and/or key employees.	
Form 990, Part VI, Section C, Line 19 - CDSW maintains in its Austin office the organization's key institution	
mailing documents to interested parties upon request, the organization also makes some of its key documents to interested parties upon request, the organization also makes some of its key documents.	
websites, including Charity Navigator, the Economic Research Institute, and Candid. These key document	
1024 that established CDSW's 501(c)(4) tax status; (2) the annual Forms 990; (3) the organization's internal	
and harassment among the staff, board of directors, and outside consultants; and (4) four additional inter-	nal policies involving conflicts of
interest, whistleblowers, retention of documents, and privacy of data.	

Schedule O, Statement 1

Campaign to Decriminalize Sex Work Form: Form 990 (2022)

EIN: 83-2009448 Part III, Line 4d

Page: **2** 

#### Other Program Services Accomplishments

Activity Code	Description	Expense	Grants	Revenue
	NEW HAMPSHIRE LOBBYING: CDSW lobbied the New Hampshire government to change the state's prostitution laws, with an emphasis on passing "expungement" legislation to clean the criminal records of sex-trafficking victims who had been convicted of prostitution crimes. This legislation was enacted into law in May 2022.	28,500	6,000	0
	MAINE LOBBYING: In the aftermath of Gov. Janet Mills (D) vetoing the "entrapment" bill we opposed in 2021, we started lobbying in Maine in 2022, with an emphasis on killing that bill if and when it's reintroduced in the legislature in early 2023.	2,500	2,500	0
	COALITION BUILDING: While in New England for various lobbying meetings and hearings, CDSW occasionally bought lunches or dinners with key players working on the perimeter of state government.	196	0	0
Total:		31,196	8.500	0

#### SCHEDULE R (Form 990)

Part I

(1)

(2)

#### **Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

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

(b) Primary activity (c) Legal domicile (state

or foreign country)

(d) Total income

(e)

End-of-year assets

Open to Public Inspection

**(f)** 

Direct controlling

entity

Name of the organization

Campaign to Decriminalize Sex Work

83-2009448

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(3)								
(4)								
(5)								
(6)								
Part II Identification of Related Tax-Exempt Organizations due one or more related tax-exempt organizations due	ations. Coluring the ta	mplete if th x year.	ne organization a	nswered "Yes" or	n Form 990, Part I	V, line 34, beca	use it h	ad
(a) Name, address, and EIN of related organization	(k Primary	o) activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	<b>(e)</b> Public charity status (if section 501(c)(3))	(f) Direct controlling entity	cont	<b>g)</b> 512(b)(13) trolled tity?
							Yes	No
(1) Decriminalize Sex Work (83-3561423) 2407 South Congress Avenue Suite E-111, Austin, TX 78704	End the pro prostitution	hibition of in USA	DE	501(c)(3)	Yes	N/A		✓
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								

(a)
Name, address, and EIN (if applicable) of disregarded entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under	(f) Share of total income	(g)	allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	partner?		(k) Percentage ownership
		Courtily)		sections 512-514)			Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(c) Legal domicile (state or foreign country)		(g) Share of end-of-year assets	(h) Percentage ownership	Section 5 conti ent	<b>i)</b> 512(b)(13) rolled ity?
					Yes	No
(2)						
(3)						,
(4)						,
(5)						
(6)						
(7)						

Yes No

1a

1b

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

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

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

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

	, , , ,															_	_		
C	Gift, grant, or capital contribution from related organization(s)		11		r		10										1c	✓	
d	Loans or loan guarantees to or for related organization(s)															-	1d	✓	
е	Loans or loan guarantees by related organization(s)																1e		✓
f	Dividends from related organization(s)																1f		✓
g	Sale of assets to related organization(s)																1g		1
h	Purchase of assets from related organization(s)															-	1h		<b>√</b>
i	Exchange of assets with related organization(s)																1i		<b>√</b>
i	Lease of facilities, equipment, or other assets to related organization(s)																1j		1
•																			
k	Lease of facilities, equipment, or other assets from related organization(s)											7500					1k		<b>√</b>
i	Performance of services or membership or fundraising solicitations for related organization(s)																11		1
m	Performance of services or membership or fundraising solicitations by related organization(s)																m		$\overline{\checkmark}$
n																	1n	<b>√</b>	_
0																	10	•	<b>√</b>
U	Sharing of paid employees with related organization(s)		•		•		•	•	•	•	•		•	•			10		_
_	Reimbursement paid to related organization(s) for expenses																4		,
p																	1p		<u>√</u>
q	Reimbursement paid by related organization(s) for expenses				•					•	•		•8	•			1q		✓
																	4		,
r	Other transfer of cash or property to related organization(s)																1r		<b>√</b>
S	Other transfer of cash or property from related organization(s)																1s		<u>√</u>
2	If the answer to any of the above is "Yes," see the instructions for information on who must c	omple	ete ti	his iir	ne, in	cluc	ling o	cove	ered	rela	ation	ship	os ar	nd tra	ansa	action	thre	sholo	IS.
	(a)		-	(b)					(c)							(d)			
	Name of related organization			nsactio e (a—s			Ar	moun	t invol	ivea		IV	tetno	or a	etern	nining a	moun	t invol	/ea
	ee Schedule R, Part VII, Statement 1		-71	- (	,														
	ee Schedule R, Part VII, Statement 1																		
(1)						_													
(2)																			
(3)																			
(4)						_													
(5)																			
(6)						- 1						1							
																ule R (			

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

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

	(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	Are all p	Caracitan	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	(h) Disproportionat allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership	
				sections 512-514)	Yes	No			Yes	No		Yes	No		
(1)															
(2)															
(3)															
(4)															
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(16)															

		age <b>5</b>
art VII	Supplemental Information Provide additional information for responses to questions on Schedule R. See instructions.	
	Provide additional information for responses to questions on Schedule R. See instructions.	

Schedule R, Part VII, Statement 1

#### Campaign to Decriminalize Sex Work

Form: Schedule R (2022)
Page: 3
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Page: 4

Description of Covered Relationships and Tra	nsaction Thresholds
--	---------------------

		Amt. involved
Name	Decriminalize Sex Work	592,000
Transaction type	d	
Method of determining amt. involved	Over the last few years, CDSW has issued to DSW several interest-free loans totaling \$592,000.	
Name	Decriminalize Sex Work	190,000
Transaction type	С	
Method of determining amt. involved	DSW issued a \$190,000 grant to CDSW to embolden lobbying efforts in targeted state capitals in New England and New York State.	
Name	Decriminalize Sex Work	1,000
Transaction type	n	
Method of determining amt. involved	CDSW and DSW periodically shared the contact information of various supporters of the two organizations' missions.	