

** PUBLIC DISCLOSURE COPY **
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.

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

A I	For the	e 2024 calendar year, or tax year beginning and e	nding						
	Check if applicable	C Name of organization		D Employer identific	cation number				
	Addre	SIXTEEN THIRTY FUND							
	Name chang	Doing business as		26-44867	35				
	Initial return Final return	1929 T. CMDEEM MM 2	Room/suite	E Telephone number (202) 971-1337					
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	284,289,469.				
	Ameno			H(a) Is this a group re	eturn				
	Application	F Name and address of principal officer. ALL ROLLE		for subordinates? Yes X No					
	pendir	SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No				
<u>1</u>	Гах-ех	empt status: 501(c)(3)X 501(c) (4 _) (insert no.) 4947(a)(1) or	527	If "No," attach a	list. See instructions				
	Websit			H(c) Group exemptio					
	orm of	organization: X Corporation Trust Association Other Summary	L Year	of formation: 2009 N	M State of legal domicile: DC				
	1	Briefly describe the organization's mission or most significant activities: SEE S	CHEDU	LE O					
Governance		,							
rnai	2	Check this box if the organization discontinued its operations or dispose	d of more	than 25% of its net ass	sets.				
ove.	3	Number of voting members of the governing body (Part VI, line 1a)		3	<u>5</u>				
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	5				
Se Se	5	Total number of individuals employed in calendar year 2024 (Part V, line 2a)		5	8				
Ζŧ	6	Total number of volunteers (estimate if necessary)		6	100				
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.				
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	·····		0.				
			1	Prior Year	Current Year				
ē	8	Contributions and grants (Part VIII, line 1h)		76,676,637.	275,156,582.				
Revenue	9	Program service revenue (Part VIII, line 2g)		16,025.	9,836.				
Re ev	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		3,725,793.					
	ויי	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	- 4	934,797.	2,500,653.				
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		81,353,252.	282,241,759. 236,497,395.				
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		06,422,552.	0.				
	1	Benefits paid to or for members (Part IX, column (A), line 4)		7,231,758.					
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		266,750.	274,750.				
Expenses	h	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 349,43		200,730.	2/4,/50*				
Ĕ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		27,345,826.	65,017,940.				
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			310,782,035.				
		Revenue less expenses. Subtract line 18 from line 12		40,086,366.					
or or				ginning of Current Year	End of Year				
Net Assets or	20	Total assets (Part X, line 16)	1	39,942,052.	106,501,029.				
ASS	21	Total liabilities (Part X, line 26)		23,615,231.	18,089,484.				
Net	22	Net assets or fund balances. Subtract line 21 from line 20	1	16,326,821.	88,411,545.				
Pa	art II	Signature Block							
Und	er pena	lties of perjury, I declare that I have examined this return, including accompanying schedules a	and stateme	nts, and to the best of my	knowledge and belief, it is				
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of whic	ch preparer	has any knowledge.					
Sig		Signature of officer		Date					
Her	e	AMY KURTZ, PRESIDENT							
		Type or print name and title	Ir)oto I a	DTIM				
_	_	Preparer's name Preparer's signature	l l	Date Check Check	PTIN				
Paid		MICHAEL LUMSDEN MICHAEL LUMSDEN	1	1/06/25 self-employ					
	parer	Firm's name BAKER TILLY ADVISORY GROUP, LP		Firm's EIN 3	9-0859910				
use	Only	Firm's address 101 SECOND STREET SUITE 900		D. 41	5 056 1500				
	. 41- 27	SAN FRANCISCO, CA 94105		Phone no. 4 1	5-956-1500				
May	y the IF	RS discuss this return with the preparer shown above? See instructions			X Yes No				

Pai	Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	SIXTEEN THIRTY FUND PROVIDES OPERATIONAL SUPPORT TO CHANGEMAKERS
	COMMITTED TO TACKLING SOCIETY'S BIGGEST SOCIAL CHALLENGES.
	(CONT. SCHEDULE O)
2	Did the organization undertake any significant program services during the year which were not listed on the
_	
	prior Form 990 or 990-EZ? 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 \$262,682,580including grants of \$219,341,862) (Revenue \$9,836)
	CIVIL RIGHTS, SOCIAL ACTION, AND ADVOCACY PROGRAMS.
	SIXTEEN THIRTY FUND'S WORK TO PROMOTE CIVIL RIGHTS, SOCIAL ACTION, AND
	ADVOCACY SUPPORTS A BROAD ARRAY OF PROJECTS AND GRANTEES, INCLUDING
	THOSE WORKING TO ENSURE VOTING ACCESS AND CIVIC PARTICIPATION; GROUPS
	ADVOCATING FOR PAY EQUITY, PAID FAMILY LEAVE, AND FAIR TAX POLICY;
	FIGHTING FOR ACCESS TO HEALTH CARE FOR ALL AMERICANS; AND ADVOCATING
	FOR COMMON SENSE GUN REFORM.
4b	(Code:) (Expenses \$26,657,008 . including grants of \$15,632,697 .) (Revenue \$)
40	CAPACITY BUILDING PROGRAMS.
	SIXTEEN THIRTY FUND'S CAPACITY BUILDING PROJECTS SUPPORT THE CAPACITY
	DEVELOPMENT OF GRANTEES ON ISSUES RELATED TO CIVIC PARTICIPATION,
	EQUITY, EQUAL REPRESENTATION, AND OTHER ADVOCACY ISSUES.
4c	(Code:) (Expenses \$ $10,106,978.$ including grants of \$ $0.$) (Revenue \$ $0.$)
	HEALTH.
	SIXTEEN THIRTY FUND'S HEALTH PROJECTS ARE WORKING TO EDUCATE THE PUBLIC
	ABOUT AFFORDABLE AND ACCESSIBLE HEALTHCARE AND HELP INFORM THE DEBATE
	AROUND THE FUTURE OF HEALTHCARE.
4d	Other program services (Describe on Schedule O.)
-r u	(Expenses \$ 1,792,010 · including grants of \$ 1,522,836 ·) (Revenue \$)
4e	Total program service expenses 301,238,576.
	Form 990 (2024)

Form 990 (2024) SIXTEEN THIRTY FUND 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		
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 Rev. Proc. 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,	<u> </u>		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	- '-		
8	, ,			x
•	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		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			.,
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		<u> X</u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	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
С	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		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
		12b		x
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Pid the appropriation projection on the second property of the United Obstaco	14a	Х	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	148	21	\vdash
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			
		441.	Х	
	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	l		.
	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	<u> </u>
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
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b		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	Х	

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Form 990 (2024) SIXTEEN THIRTY FUND
Part IV Checklist of Required Schedules (continued)

	·		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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	Х	
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
	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		
	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	25a		х
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		25
b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
		25b		х
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		
	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		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	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		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	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		<u> </u>
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Х	
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			7.7
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
04	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	34		х
25.0	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	33a		
	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?	000		
	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		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			X
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 182			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		7.7	
	(gambling) winnings to prize winners?	1c	X	(2024)

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Form	990 (2024) SIXTEEN THIRTY FUND	26-4486	735	Р	age 5
Pai	t 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	2a 8			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	,	2b	X	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За		Х
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		
	At any time during the calendar year, did the organization have an interest in, or a signature or other auth				
	financial account in a foreign country (such as a bank account, securities account, or other financial account	ount)?	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 According	ounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	n?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the o				
	any contributions that were not tax deductible as charitable contributions?	-	6a	X	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions				
	were not tax deductible?	_	6b	X	
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 service	es provided to the payor?	7a		
b	IS THE REPORT OF THE PARTY OF T		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was r	equired			
	to file Form 8282?		7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	'd			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contri	ract?	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		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	n file a Form 1098-C?	7h		
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.				
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	0a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	0b			
11	Section 501(c)(12) organizations. Enter:				
а	Gross income from members or shareholders	1a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against				
	·	1b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10	41?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	2b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		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	3b			
		3c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule C)	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration	on or			

that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 17

Form **990** (2024)

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excess parachute payment(s) during the year?

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities

If "Yes," complete Form 6069.

If "Yes," see the instructions and file Form 4720, Schedule N.

If "Yes," complete Form 4720, Schedule O.

SIXTEEN THIRTY FUND 26-4486735 Page 6 Form 990 (2024) 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. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 5 **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 Did the organization have members or stockholders? 6 6 Х 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? Х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 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? Х 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. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 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 Х 15a Х 15b Other officers or key employees of the organization 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 with a Х taxable entity during the year? 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? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed AL, AR, CA, FL, GA, HI, IL, KS, KY, MA, MD, MN Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Own website X Upon request Another's website __ Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records ARABELLA ADVISORS, LLC - (202) 595-1020

Form **990** (2024)

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SEE SCHEDULE O FOR FULL LIST OF STATES

1828 L STREET, NW, SUITE 300, WASHINGTON

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 ne		orga T	niza			nper	sat			
(A)	(B)	(C) Position						(D)	(E)	(F)
Name and title			o not check more than one					Reportable	Reportable	Estimated
	hours per		box, unless person is bo officer and a director/tru					compensation	compensation	amount of
	week (list any		1 1				Ĺ	from the	from related organizations	other compensation
	hours for	direct				_		organization	(W-2/1099-MISC/	from the
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	trust	nal tru		oyee	om pe		1099-NEC)	,	and related
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
/1\	line)	<u>lu</u>	lus	#0	Ke	를 등 등	For			
(1) AMY KURTZ PRESIDENT	40.00	-		х				251 500	0.	27 670
(2) RYAN JOHNSON	40.00			^				251,500.	0.	27,670.
PROJECT DIRECTOR	40.00	1				X		210,000.	0.	22,136.
(3) AMY STEINHOFF	40.00					^		210,000.	0.	22,130.
CAMPAIGNS DIRECTOR	40.00	1				X		186,800.	0.	34,501.
(4) PATRICIA KUPFER	40.00					1		100,000.	0.	34,301.
CAMPAIGNS DIRECTOR	40.00	1				x		178,907.	0.	37,182.
(5) CARL WALZ	40.00							27073070		37,1010
CAMPAIGNS DIRECTOR (THROUGH 12/2/24)		1				X		173,868.	0.	35,325.
(6) RAUL ALVILLAR	1.00									•
CHAIR (THROUGH 7/15/24)		Х		Х				0.	0.	0.
(7) DARA FREED	1.00									
TREASURER/INT CHAIR (AS OF 7/15/24)		Х		Х				0.	0.	0.
(8) DOUGLAS HATTAWAY	1.00									
SECRETARY (THROUGH 5/2/24)		Х		Х				0.	0.	0.
(9) MARISSA BROWN	1.00	<u> </u>								
DIRECTOR/SECRETARY (AS OF 5/2/24)		Х		Х				0.	0.	0.
(10) JEFF CHERRY	1.00									
DIRECTOR		Х						0.	0.	0.
(11) LATOIA JONES	1.00	ļ								
DIRECTOR		Х						0.	0.	0.
(12) ERIC KESSLER	1.00	ļ								
DIRECTOR		Х						0.	0.	0.
		-								
-		<u> </u>								
		1								
		 	\vdash		_	\vdash				
		1								
_										
		1								
	·			_				· · · · · · · · · · · · · · · · · · ·	·	- QQQ (000 t)

Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloye	es,	and	Hig	ghes	t Co	ompensated Employee	s (continued)			
(A)	(B)			(0	J)			(D)	(E)	(F)		
Name and title	Average hours per week	box,	box, unless person is bot		Position (do not check more than one box, unless person is both an officer and a director/trustee)			than c s both	an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations		
1b Subtotal	ı						1	1,001,075.	0.	156,814.		
c Total from continuation sheets to Part VI								0.	0.	0.		
d Total (add lines 1b and 1c)								1,001,075.	0.	156,814.		
2 Total number of individuals (including but n								ceived more than \$100	000 of reportable			

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

3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

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

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
ARABELLA ADVISORS, LLC, 1828 L STREET NW,	ADMIN. & OPERATIONAL	
SUITE 300, WASHINGTON, DC 20036	SUPPORT SERVICES	6,627,257 .
LOCUST STREET SOLUTIONS LLC		
2008 HILLYER PL NW, WASHINGTON, DC 20009	CONSULTING SERVICES	3,781,000.
GLOBAL STRATEGY GROUP LLC	POLLING AND	
215 PARK AVENUE SOUTH, NEW YORK, NY 10003	CONSULTING SERVICES	2,117,575.
BLUE ROSE RESEARCH		
1800 M ST NW, WASHINGTON, DC 20036	CONSULTING SERVICES	1,344,174.
MARKHAM GROUP LLC		
1000 W 3RD STREET, LITTLE ROCK, AR 72201	CONSULTING SERVICES	914,118.
2 Total number of independent contractors (including but not limited to those listed	d above) who received more than	
\$100,000 of compensation from the organization 28		

26-4486735

Form 990 (2024) SIXTEEN
Part VIII Statement of Revenue

			Check if Schedule O c	conta	ains a r	esponse	or note to any lin	e in this Part VIII			
			Official in Goriedate of C	Jorne	anis a i	СЭРОПЭС	or note to any iiii	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
10.10	_	_	Forders to discount of the control o		Ι	4.					360110113 3 12 - 3 14
Contributions, Gifts, Grants and Other Similar Amounts	1 6		Federated campaigns			1a					
Gra	'		Membership dues			1b					
ts, An	•		Fundraising events			1c					
igif ilar	•		Related organizations			1d					
ns, Sim	•		Government grants (contri		Г	1e					
ıtio	1	f	All other contributions, gifts,				055 456 500				
된 된			similar amounts not included			1f	275,156,582.				
ont nd (9	_	Noncash contributions included in I		_	1g \$	2,043,443.	275156502			
<u>o</u> <u>e</u>		h	Total. Add lines 1a-1f					275156582.			
			CONCULTATION DEVENIES				Business Code	0.036	0.036		
ice	2 8	_	CONSULTING REVENUE				541610	9,836.	9,836.		
erv	١	b									
n Si	•	С									
ran 3ev	•	d									
Program Service Revenue	•	е									
Д			All other program service					0.006			
		g	Total. Add lines 2a-2f					9,836.			
	3		Investment income (includ					4 540 040			4540040
								4,548,849.			4548849.
	4		Income from investment o		-	=					
	5		Royalties			Real	(ii) Personal				
				_	(1)	Real	(II) Personal				
			Gross rents	6a							
			Less: rental expenses	6b							
			Rental income or (loss)	6с							
			Net rental income or (loss)				(") OH				
	7 :	а	Gross amount from sales of			curities	(ii) Other				
	_		assets other than inventory	7a	2,0	73,549.					
•		b	Less: cost or other basis		١ , ,	12 112	4 267				
nue			and sales expenses	7b		43,443.					
eve			Gain or (loss)			30,106.		25,839.			25 020
her Revenue			Net gain or (loss)					25,639.			25,839.
	8 8	a	Gross income from fundraising	ig ev	-	_					
Ò			including \$	P	1-1-0-						
			contributions reported on		,						
		.	Part IV, line 18								
			Less: direct expenses								
			Net income or (loss) from t				<u> </u>				
	9 8	d	Gross income from gaming	•							
		.	Part IV, line 19								
			Less: direct expenses								
			Net income or (loss) from (
	10 8	a	Gross sales of inventory, le								
		.	and allowances								
			Less: cost of goods sold				•				
_	•	<u> </u>	Net income or (loss) from s	saies	01 1/10	епсогу	Business Code				
ns	11 -	a	OTHER INCOME				900099	2,500,653.			2500653.
ned Jue		a b						, , , , , , ,			
əlla		C									
Miscellaneous Revenue			All other revenue								
Σ			Total. Add lines 11a-11d					2,500,653.			
	12		Total revenue. See instruction					282241759.	9,836.	0.	7075341.

432009 12-10-24

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 (**D**)
Fundraising (C) Management and general expenses (B) Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 236,497,395.236,497,395. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 279,171. 13,959. 265,212. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 6,783,712. 6,761,055. 22,657. Other salaries and wages 7 Pension plan accruals and contributions (include 360,814. 5,997. 366,811. section 401(k) and 403(b) employer contributions) 6,730. 1,025,116. 1,018,386. Other employee benefits 9 537,140.521,315. 15,825. 10 Payroll taxes Fees for services (nonemployees): 6,807,846. 6,807,846. Management 766,582. 514,147. 252,435. Legal 94,365. 31,450. 62,915. Accounting 31,026,950. 31,026,950. Lobbying 274,750. 274,750. Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 12,760,220. 263,885. 74,686. 13,098,791. column (A), amount, list line 11g expenses on Sch O.) 8,543,799. 8,543,799. Advertising and promotion 12 187,571. 184,141. 3,430. Office expenses 13 681,708. 540,618. 141,090. Information technology 14 15 Royalties 18,182. 143,844. 125,662. 16 Occupancy 543,485. 539,302. 4,183. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials ... 1,127,172. 1,122,642. 4,530. Conferences, conventions, and meetings 19 20 Payments to affiliates 21 26,236. 26,236. Depreciation, depletion, and amortization 22 60,329. 182. 60,147. 23 Other expenses. Itemize expenses not covered 24 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.) 603,544. 1,257,701. 1,861,245. TAXES OTHER EXPENSES 48,017. 46,759. 1,258. С All other expenses 310,782,035.301,238,576. 9,194,023. 349,436. Total functional expenses. Add lines 1 through 24e 25 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)

Pai	rt X	Balance Sneet					
		Check if Schedule O contains a response or not	e to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			7,608,527.		11,843,619
	2	Savings and temporary cash investments			93,587,292.	2	71,279,958
	3	Pledges and grants receivable, net			38,179,290.	3	22,359,384
	4	Accounts receivable, net	68,915.	4	598,367		
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes	e pers	ons		5	
	6	Loans and other receivables from other disqualit	fied per	rsons (as defined			
		under section 4958(f)(1)), and persons described	l in sec	tion 4958(c)(3)(B)		6	
S	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ä	9	5			424,023.	9	376,199
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	584,743.			
	b	Less: accumulated depreciation	10b	545,865.	69,381.	10c	38,878
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 1	1			12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			4,624.	15	4,624
	16	Total assets. Add lines 1 through 15 (must equa			139,942,052.	16	106,501,029
	17	Accounts payable and accrued expenses			6,016,399.	17	5,604,484
	18	Grants payable			17,598,832.	18	12,485,000
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete I		***************************************		21	
es	22	Loans and other payables to any current or form					
ilti		trustee, key employee, creator or founder, subst					
Liabilities		controlled entity or family member of any of thes				22	
_	23	Secured mortgages and notes payable to unrela		•		23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	17-24)	. Complete Part X			
		of Schedule D			22 615 221	25	10 000 404
	26			\	23,615,231.	26	18,089,484
S		Organizations that follow FASB ASC 958, che	ck her	e X			
Jce		and complete lines 27, 28, 32, and 33.			4 225 470		6 070 564
alaı	27				4,225,470. 112,101,351.		6,978,564 81,432,981
d B	28	Net assets with donor restrictions			112,101,331.	28	01,432,901
'n.		Organizations that do not follow FASB ASC 9	b8, cne	eck nere			
or F		and complete lines 29 through 33.					
sts	29	Capital stock or trust principal, or current funds				29	
SSE	30	Paid-in or capital surplus, or land, building, or ed				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated in			116,326,821.	31	88,411,545
ž	32	Total net assets or fund balances				32	
	33	Total liabilities and net assets/fund balances			139,942,052.	33	106,501,029

Pa	T XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	282			
2	Total expenses (must equal Part IX, column (A), line 25)	2	310			
3	Revenue less expenses. Subtract line 2 from line 1	3	-28			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	116	, 32	6,8	<u>21.</u>
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 on Schedule O)	9		62	5,0	00.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	88	, 41	1,5	<u>45.</u>
Pa	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
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	<u> </u>
	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:					
	X 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		X
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.				
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?			3a		<u> X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		
				Form	990	(2024)

432012 12-10-24

Schedule B (Form 990)

(Rev. December 2024) Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OMB No. 1545-0047

Name of the organization

SIXTEEN THIRTY FUND

Employer identification number

26-4486735

Organization type (check one):							
Filers of	:	Section:					
Form 99	0 or 990-EZ	$oxed{X}$ 501(c)($oxed{4}$) (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated as a private foundation					
		527 political organization					
Form 99	0-PF	501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
Note: Or General	nly a section 501(c)(Rule For an organization	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. filling Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special	,	she sonthibator. Complete i are rand ii. Coe instructione for determining a sonthibator o total contributions.					
	sections 509(a)(1) a contributor, during	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under nd 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; line 1. Complete Parts I and II.					
	contributor, during literary, or education	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, nal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering instead of the contributor name and address), II, and III.					
	year, contributions is checked, enter h purpose. Don't con	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., applete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year \$					
answer "	'No" on Part IV, line	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify requirements of Schedule B (Form 990).					

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

Schedule B (Form 990) (Rev. 12-2024)

SIXTEEN THIRTY FUND

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 58,932,923.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>51,375,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>29,175,000</u> .	Person X Payroll
(a)	(b)	(c)	(d)
	Name, address, and ZIP + 4	* 22,000,000	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ <u>10,000,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ 8,408,566.	Person X Payroll

SIXTEEN THIRTY FUND

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ <u>7,700,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$ <u>6,500,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$5,291,332.	Person X Payroll
(a)	(b)	(c)	(d)
	Name, address, and ZIP + 4	* 5,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11		\$5,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12		\$3,900,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

SIXTEEN THIRTY FUND 26-4486735

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13		\$3,800,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14		\$3,500,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15		\$ 3,250,000.	Person X Payroll X Noncash X (Complete Part II for noncash contributions.)
(a)	(b) Name, address, and ZIP + 4	(c) Total contributions	(d)
No. 16	Name, address, and ZIP + 4	\$ 2,750,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
17		\$ 2,370,233.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
18		\$ 2,300,000.	Person X Payroll

Name of organization Employer identification number SIXTEEN THIRTY FUND 26-4486735

Part I	Contributors (see instructions). Use duplicate copies of Part I if ac	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19		\$\$, 2,075,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
20		\$2,015,301.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
21		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
22		\$2,000,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
23		\$1,900,419.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
24		\$\$	Person X Payroll

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SIXTE	EN THIRTY FUND		26-4486735
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25		\$1,500,00	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
26		\$1,350,00	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
27		\$1,025,00	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
28_		\$1,000,00	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
29		\$1,000,00	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
30		\$1,000,00	Person X Payroll Noncash (Complete Part II for noncash contributions)

SIXTEEN THIRTY FUND

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31		\$ <u>1,000,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
32		\$ <u>1,000,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
33		\$1,000,000.	Person X Payroll
(a)	(b)	(c)	(d)
	Name, address, and ZIP + 4	* 950,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
35		\$ 950,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
36		\$900,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

SIXTEEN THIRTY FUND 26-4486735 Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (d) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 37 X Person **Payroll** 900,000. Noncash (Complete Part II for noncash contributions.) (a) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 38 X Person **Payroll** 825,000. Noncash (Complete Part II for noncash contributions.) (a) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 39 X Person **Payroll** 774,323. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 40 X Person Payroll 750,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 41 Person Payroll 650,000. Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 42 X Person **Payroll** 600,000. Noncash (Complete Part II for

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ı artı	Contributors (see instructions). Ose duplicate copies of Fart III add	ultional space is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
43		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
44		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
45		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
46		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
47		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
48		Person X Payroll Noncash (Complete Part II for noncash contributions.)

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SIXTEEN THIRTY FUND

26-4486735

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
49		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
50		\$ 400,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
51		\$ <u>400,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
52		\$ 350,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
53		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
54		\$300,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

SIXTEEN THIRTY FUND

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
55		\$300,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
56		\$ 300,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
57		\$300,000.	Person X Payroll
(a)	(b)	(c)	(d)
	Name, address, and ZIP + 4	* 250,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
59		\$ 250,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
60		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

SIXTEEN THIRTY FUND

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
61		\$ 250,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
62		\$ <u>250,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
63		\$ 210,000.	Person X Payroll
(a)	(b)	(c)	(d)
64	Name, address, and ZIP + 4	* 205,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
65		\$ 200,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
66		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

SIXTEEN THIRTY FUND

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
67		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
68		\$ <u>200,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
69		\$ 200,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
70		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
71_		\$ 200,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
72		\$ 200,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

SIXTEEN THIRTY FUND

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
73		\$150,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
74		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
75		\$ <u>131,250.</u>	Person X Payroll
(a)	(b)	(c)	(d)
No. 76	Name, address, and ZIP + 4	Total contributions \$ 130,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
77		\$ <u>125,000.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
78		\$ 125,000.	Person X Payroll

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Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
79		\$125,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
80		\$ <u>125,000.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
81		\$ <u>120,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
82		\$ <u>110,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
83		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
84		\$100,000.	Person X Payroll

SIXTEEN THIRTY FUND

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
85		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
86		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
87		\$100,000.	Person X Payroll
(a)	(b)	(c)	(d)
88	Name, address, and ZIP + 4	* 100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
89		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
90		\$100,000 .	Person X Payroll Noncash (Complete Part II for noncash contributions.)

SIXTEEN THIRTY FUND

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
91		\$\$_	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
92		\$100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
93		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
94		\$\$_	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
95		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
96		\$\$	Person X Payroll

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SIXTE	EN THIRTY FUND		26-4486735
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	l space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
97		\$ 75,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
98		\$ 75,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
99		\$ 75,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
100		\$75,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
101		\$71,844	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
102		\$70,000	Person X Payroll Noncash (Complete Part II for

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Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
103		\$65,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
104		\$\$55,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
105		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
106		\$ 50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
107		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
108		\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

SIXTE	EN THIRTY FUND		26-4486735
Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
109		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No	Name, address, and ZIP + 4	Total contribution - \$ 50,0	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d)
111		- - \$\$0,0	Person X Payroll
(a)	(b)	(c) Total contribution	(d)
No	Name, address, and ZIP + 4	\$ 50,0	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
113		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d)
114		- \$ 50.0	Person X Payroll

(Complete Part II for

SIXTE	EN THIRTY FUND		26-4486735
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
115		\$50,00	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
116		\$50,00	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
117		\$50,00	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) S Type of contribution
118		\$50,00	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
119		\$50,00	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) s Type of contribution
120		\$50,00	Person X Payroll

SIXTEEN THIRTY FUND

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
121		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
122		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
123		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
124		\$50,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
125		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
126		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

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Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
127		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
128		\$ <u>45,000.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
129		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
130		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
131		\$35,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
132		\$35,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

SIXTEEN THIRTY FUND

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
133		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
134		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
135		\$ 25,003.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
136		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
137		\$ 25,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
138		\$ 25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

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Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
139		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
140		\$ 25,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
141		\$ <u>25,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
142		\$ 25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
143		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
144		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

SIXTEEN THIRTY FUND 26-4486735

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
145		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
146		\$ 25,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
147		\$ 25,000.	Person X Payroll
(a)	(b)	(c)	(d)
No. 148	Name, address, and ZIP + 4	Total contributions \$ 25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
149		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
150		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

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Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
151		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
152		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
153		\$ 25,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
154		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
155		\$ 23,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
156		\$ 22,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

SIXTEEN THIRTY FUND

26-4486735

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
157		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
158		\$ 20,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
159		\$ 20,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
160		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
161		\$ 20,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
162		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

SIXTE	EN THIRTY FUND	26	-4486735
Part I	Contributors (see instructions). Use duplicate copies of Part I if add	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
163		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
164		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
165		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
166		\$15,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
167		\$15,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
168			Person X Payroll

SIXTEEN THIRTY FUND

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
169		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
170		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>171</u>		\$13,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
172		\$12,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
173		\$ <u>12,500.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
174		\$ <u>12,500.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)

SIXTE	EN THIRTY FUND	26	5-4486735
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
175		\$11,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
176		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
177		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
178		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
179		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
180		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

SIXTE	EN THIRTY FUND	20	6-4486735
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional additional contributors.	tional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
181			Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
182			Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
183			Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
184		\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
185		\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
186			Person X Payroll Noncash (Complete Part II for noncash contributions.)

SIXTEEN THIRTY FUND

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
187		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
188		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
189		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
190		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
191		\$8,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
192		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

SIXTEEN THIRTY FUND

26-4486735

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
193		\$6,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
194		\$6,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
195		\$5,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
196		\$5,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
197		\$5,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
198		\$5,000.	Person X Payroll

SIXTEEN THIRTY FUND 26-4486735 Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (d) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 199 X Person **Payroll** 5,000. Noncash (Complete Part II for noncash contributions.) (a) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 200 X Person **Payroll** 5,000. Noncash (Complete Part II for noncash contributions.) (a) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 201 X Person **Payroll** 5,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 202 X Person Payroll 5,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 203 Person Payroll 5,000. Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 204 X Person **Payroll**

Noncash (Complete Part II for

5,000.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
205		\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
206		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
207		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
208		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
209		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
210		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

SIXTE	EN THIRTY FUND		26-4486735
Part I	Contributors (see instructions). Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
211		\$5,00	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
212		\$5,00	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
213		\$\$5,00	Person X Payroll
(a)	(b)	(c)	(d)
No	Name, address, and ZIP + 4	* \$ 5 , 0 (Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
215	rumo, addi 035, und En TT	\$\$ 5,00	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
216	manno, addi 655, and £if + +	5 00	Person X Payroll

(Complete Part II for

Name of organization

Employer identification number

SIXTEEN THIRTY FUND

26-4486735

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
217		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
218		\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

SIXTEEN THIRTY FUND

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1.	SECURITIES - PUBLICLY TRADED		
<u>15</u>			
		\$ 2,043,443.	09/16/24
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
arti			
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		<u> </u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	-		
		\$	e B (Form 990) (Rev. 12-

Name of organization **Employer identification number** SIXTEEN THIRTY FUND 26-4486735 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number (EIN)

Department of the Treasury Internal Revenue Service

Name of organization

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

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

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

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

SIXTEEN	THIRTY FUND			26-4486735		
Part I-A Complete if the org	ganization is exempt under	section 501(c) or	is a section 527 org			
Provide a description of the organi						
2 Political campaign activity expendi	tures		\$	78,008,755.		
3 Volunteer hours for political campa				0.		
Part I-B Complete if the or	ganization is exempt under	section 501(c)(3)	_			
1 Enter the amount of any excise tax	-					
2 Enter the amount of any excise tax	, ,					
		55 tax, did it file Form 4720 for this year?				
b If "Yes," describe in Part IV.						
Part I-C Complete if the org	ganization is exempt under	section 501(c), e	xcept section 501(c)			
1 Enter the amount directly expende	d by the filing organization for section	on 527 exempt function	n activities\$	15,313,455.		
2 Enter the amount of the filing organ		•		60 60 - 000		
			\$	62,695,300.		
3 Total exempt function expenditure		•	•	70 000 755		
line 1/b	4400 DOL 6 HI: 0		\$	78,008,755. X Yes No		
4 Did the filing organization file Form	1 1120-POL for this year?					
organization listed, enter the amou	nt paid from the filing organization's a separate political organization, suc	funds. Also enter the	amount of political contrib	outions received that were		
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0		
YOUR COMMUNITY PAC	WILMINGTON, DE					
INC	19802	93-4865071	6,695,000.	0.		
FUTURE FORWARD USA PAC	WASHINGTON, DC 20003	83-0791921	3,000,000.	0.		
RETIRE CAREER	PO BOX 15845					
POLITICIANS	WASHINGTON, DC 20	99-2545096	2,000,000.	0.		
	PO BOX 15845					
CIVIC TRUTH ACTION	WASHINGTON, DC 20	99-4080424	1,900,000.	0.		
HOUSE MAJORITY PAC	WASHINGTON, DC 20005	45-1672898	1,850,000.	0.		
	WASHINGTON, DC	= = 3 · = 3 9	=,:30,000			
SMP	20005	27-2896127	1,250,000.	0.		

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

Schedule C (Form 990) 2024

LHA 432041 11-17-24

SEE PART IV FOR CONTINUATION

Part II-A Complete if the org	anization is exen	npt under section	501(c)(3) and file	d Form 5768 (ele	ection under
section 501(h)).					
			Part IV each affiliated	group member's nam	e, address, EIN,
	re of excess lobbying e	. ,			
B Check if the filing organiza	tion checked box A ar	nd "limited control" pro	visions apply.		Т
	ts on Lobbying Exper ditures" means amou			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	uence public opinion (c	grassroots lobbying)			
b Total lobbying expenditures to influ	uence a legislative bod	ly (direct lobbying)			
c Total lobbying expenditures (add li	•				
d Other exempt purpose expenditure					
e Total exempt purpose expenditure	s (add lines 1c and 1d)			
f Lobbying nontaxable amount. Ente	er the amount from the		ſ		
IF the amount on line 1e, column (a)	or (b), is: THEN to	he lobbying nontaxab	le amount is:		
not over \$500,000	, ,,	the amount on line 1e.			
over \$500,000 but not over \$1,000		00 plus 15% of the exc	ess over \$500.000.		
over \$1,000,000 but not over \$1,5		00 plus 10% of the exc			
over \$1,500,000 but not over \$17,		00 plus 5% of the exce			
over \$17,000,000	\$1.000.0	•	γ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
g Grassroots nontaxable amount (en	1 OF0/ -f line 16		,		
h Subtract line 1g from line 1a. If zer	,				
i Subtract line 1f from line 1c. If zero			[
j If there is an amount other than ze					
reporting section 4911 tax for this	_				Yes No
	•	eraging Period Under			
(Some organizations t	hat made a section 50		have to complete all o	f the five columns b	elow.
	Lobbying Exper	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2024

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a	1)	(b	p)
of the lobbying activity.	Yes	No	Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state, or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to not be 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?	504(-)/5	-\	45	
Part III-A Complete if the organization is exempt under section 501(c)(4), sectio 501(c)(6).	n 501(c)(c	o), or sec	ction	
50 1(C)(0).			Yes	No
4. We was belong the H (000) as a constitution of a described by a constitution of the H (000) as a constitution of the H (000).			162	140
1 Were substantially all (90% or more) dues received nondeductible by members?				
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		····		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the Part III-B Complete if the organization is exempt under section 501(c)(4), section			rtion	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered		• •		3 is
answered "Yes."	,	(5) 1 411	74,	, 0, 10
Dues, assessments, and similar amounts from members		1		
 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures) 				
expenses for which the section 527(f) tax was paid):	ou.			
a Current year		2a		
b Carryover from last year				
c Total				
		I .		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
expenditures next year?		4		
5 Taxable amount of lobbying and political expenditures. See instructions		5		
Part IV Supplemental Information				
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-	A, lines 1 a	nd 2 (see	
instructions); and Part II-B, line 1. Also, complete this part for any additional information.				
PART I-A, LINE 1:				
SUPPORTED POLITICAL ACTIVITY BY ORGANIZATIONS CONSISTE	IIW TNI	H SIX	TEEN	
THIRTY FUND'S PROGRAMMATIC PRIORITIES.				
DADE T O COMMINITATION.				
PART I-C CONTINUATION:				
YOUR COMMUNITY PAC INC 2810 N CHURCH ST, BOX 35422 WILMINGTON, DE 19802				
	f∩TTN™ .	0.		
EIN: 93-4865071 COL (D) AMOUNT: 6695000. COL (E) AM	MOUNT:	U •		
FUTURE FORWARD USA PAC				
611 PENNSYLVANIA AVE SE, SUITE 143 WASHINGTON, DC 2000) 3			
	MOUNT:	0.		
				990) 2024

Schedule C (Form 990) 2024 SIXTEEN THIRTY FUND	26-4486735 Page 4
Part IV Supplemental Information (continued)	
RETIRE CAREER POLITICIANS	
PO BOX 15845 WASHINGTON, DC 20003	
EIN: 99-2545096 COL (D) AMOUNT: 2000000. COL (E) AMOUNT:	0.
CIVIC TRUTH ACTION	
PO BOX 15845 WASHINGTON, DC 20003	
EIN: 99-4080424 COL (D) AMOUNT: 1900000. COL (E) AMOUNT:	0.
EIN: 99 4000424 COL (D) AMOONI: 1900000: COL (E) AMOONI:	
HOUSE MAJORITY PAC	
1032 15TH ST NW, SUITE 247 WASHINGTON, DC 20005	
EIN: 45-1672898 COL (D) AMOUNT: 1850000. COL (E) AMOUNT:	0.
SMP	
1032 15TH STREET NW, SUITE 247 WASHINGTON, DC 20005	
EIN: 27-2896127 COL (D) AMOUNT: 1250000. COL (E) AMOUNT:	0.
MAINSTREAM COLORADO FUND	
3700 QUEBEC ST, UNIT 100 DENVER, CO 80207	
EIN: 99-4304448 COL (D) AMOUNT: 860000. COL (E) AMOUNT:	0.
ROCKY MOUNTAIN VALUES PAC	
4845 PEARL EAST CIR, SUITE 118 BOULDER, CO 80301	
EIN: 99-1474853 COL (D) AMOUNT: 600000. COL (E) AMOUNT:	0.
EIN: 99-14/4000 COL (D) AMOUNT: 000000. COL (E) AMOUNT:	0.
CERT DIG	
CFFE PAC	
1032 15TH STREET NW, SUITE 247 WASHINGTON, DC 20005	
EIN: 85-0792961 COL (D) AMOUNT: 500000. COL (E) AMOUNT:	0.
OPEN DEMOCRACY PAC	
600 PENNSYLVANIA AVE SE, UNIT 15180 WASHINGTON, DC 20003	
EIN: 86-2772049 COL (D) AMOUNT: 500000. COL (E) AMOUNT:	0.
STRAIGHT TALK POLITICS PAC	
PO BOX 612286 SAN JOSE, CA 95161	
EIN: 85-0599495 COL (D) AMOUNT: 450000. COL (E) AMOUNT:	0.
<u> </u>	
ALL TOGETHER COLORADO	
PO BOX 102673 DENVER, CO 80210	-
	0
EIN: 85-3959470 COL (D) AMOUNT: 250000. COL (E) AMOUNT:	0.
SOMOS PAC	
1032 15TH ST NW, SUITE 247 WASHINGTON, DC 20005	
EIN: 84-3253759 COL (D) AMOUNT: 250000. COL (E) AMOUNT:	0.
PLANNED PARENTHOOD VOTES	
123 WILLIAM ST, 10TH FLOOR NEW YORK, NY 10038	
EIN: 13-4128897 COL (D) AMOUNT: 200000. COL (E) AMOUNT:	0.
COLORADO WAY FORWARD	
PO BOX 100912 DENVER, CO 80250	
EIN: 92-3861115 COL (D) AMOUNT: 175000. COL (E) AMOUNT:	0.
HIM. 72 300III3 COD (D) AMOUNT. 1/3000. COD (E) AMOUNT:	•
DDOCDEDIMY MIGHTON ACMION BIND	
PROSPERITY MICHIGAN ACTION FUND	
711 PROSPECT SAULT STE MARIE, MI 49783	
EIN: 85-2098057 COL (D) AMOUNT: 150000. COL (E) AMOUNT:	0.

Schedule C (Form 990) 2024

Schedule C (10111 990) 2024 SIXIEM INIKII FUND	20-4400/33 Fage 4
Part IV Supplemental Information (continued)	
MONTANA SENIOR VOTE ACTION FUND	
PO BOX 1101 HELENA, MT 59624	
EIN: 93-3857626 COL (D) AMOUNT: 115000. COL (E) AMOUNT:	0.
EIN: 93-363/626 COL (D) AMOUNT: 113000. COL (E) AMOUNT:	<u> </u>
API PA VOTES	
PO BOX 22611 PHILADELPHIA, PA 19110	
EIN: 85-3438527 COL (D) AMOUNT: 100000. COL (E) AMOUNT:	0.
EIN. 03 3130327 COL (2) IMCONT. 1000000 COL (2) IMCONT.	
DUDAL GROUND GAME	
RURAL GROUND GAME	
676 MELROSE ROAD HARRISONBURG, VA 22802	
EIN: 84-4651295 COL (D) AMOUNT: 85000. COL (E) AMOUNT:	0.
NEBRASKA RAILROADERS FOR PUBLIC SAFETY	
1090 COUNTY ROAD 75 HEMINGFORD, NE 69348	
EIN: 93-3837578 COL (D) AMOUNT: 80000. COL (E) AMOUNT:	0.
	_
CENTENNIAL HORIZON	
191 UNIVERSITY BLVD, SUITE 118 DENVER, CO 80206	
EIN: 99-4557446 COL (D) AMOUNT: 78000. COL (E) AMOUNT:	0.
COLORADANS CREATING OPPORTUNITIES	
PO BOX 100292 DENVER, CO 80250	
	0.
EIN: 47-2607588 COL (D) AMOUNT: 75000. COL (E) AMOUNT:	U •
MOVE INDIGO INC	
PO BOX 230648 NEW YORK, NY 10023	
EIN: 92-2558179 COL (D) AMOUNT: 59150. COL (E) AMOUNT:	0.
EIN. 32 2330173 COL (D) AMOUNT. 33130. COL (E) AMOUNT.	•
IN UNION USA	
2010 MASSACHUSETTS AVE NW 2ND FLOOR WASHINGTON, DC 20036	
EIN: 85-0817214 COL (D) AMOUNT: 50000. COL (E) AMOUNT:	0.
AD DAG	
AB PAC	
800 MAINE AVE SW, SUITE 400 WASHINGTON, DC 20024	
EIN: 27-4819166 COL (D) AMOUNT: 50000. COL (E) AMOUNT:	0.
MOVING MONTANA FORWARD	
125 W MENDENHALL ST BOZEMAN, MT 59715	
EIN: 99-4702697 COL (D) AMOUNT: 25000. COL (E) AMOUNT:	0.
TOGETHER FOR OHIOS FUTURE	
545 E TOWN ST COLUMBUS, OH 43215	
·	
EIN: 88-3700688 COL (D) AMOUNT: 25000. COL (E) AMOUNT:	0.
WORKING MONTANA PAC	
210 EAST LYNDALE AVE HELENA, MT 59601	_
	0
EIN: 46-0630315 COL (D) AMOUNT: 17700. COL (E) AMOUNT:	0.
MONTANA RURAL VOTERS ACTION FUND	
PO BOX 414 BILLINGS, MT 59103	
EIN: 81-1086593 COL (D) AMOUNT: 12000. COL (E) AMOUNT:	0.
EIN. OI-IU00333 COU (D) AMOUNT: IZUUU. COU (E) AMOUNT:	U •
MONTANA CONSERVATION VOTERS POLITICAL ACTION COMMITTEE	
PO BOX 1812 HELENA, MT 59624	
EIN: 81-0531919 COL (D) AMOUNT: 12000. COL (E) AMOUNT:	0.
The state of the s	· ·
WILD MONTANA VOTER FUND	

800461_1

SCHEDULE D (Form 990)

(Rev. December 2024) Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

SIXTEEN THIRTY FUND

Employer identification number 26-4486735

Pai	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, lin-		Similar Fund	s or Acc	counts. Complete if the
		(a) Donor advis	sed 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 v	writing that the assets h	neld in donor adv	rised funds	
	are the organization's property, subject to the organization's	-			
6	Did the organization inform all grantees, donors, and donor a				
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for a	any other purpos	e conferrin	g
	impermissible private benefit?				
Par	t II Conservation Easements. Complete if the org	ganization answered "Y	es" on Form 990	, Part IV, li	ne 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply))		
	Preservation of land for public use (for example, recreated	tion or education)	Preservation	of a histori	cally important land area
	Protection of natural habitat		Preservation	of a certifie	ed historic structure
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contri	bution in the forr	n of a cons	
	day of the tax year.				Held at the End of the Tax Year
а	Total number of conservation easements				2a
b				·····	2b
С	Number of conservation easements on a certified historic stru				2c
d	Number of conservation easements included on line 2c acqui				
	on a historic structure listed in the National Register				2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or	terminated by th	ne organiza	ation during the tax
	year				
4	Number of states where property subject to conservation eas			-	
5	Does the organization have a written policy regarding the per				
_	violations, and enforcement of the conservation easements it				
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, a	and enforcing co	nservation	easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and e	enforcing conserv	ation ease	ements during the year
_				(L) (A) (D) (i)	
8	Does each conservation easement reported on line 2d above				□ Vaa □ Na
•	and section 170(h)(4)(B)(ii)?				
9					
	balance sheet, and include, if applicable, the text of the footn organization's accounting for conservation easements.	lote to the organization	S III Iai ICiai Statei	Herits that	describes trie
Par	t III Organizations Maintaining Collections of	Art, Historical Tr	easures, or C	Other Sir	nilar Assets.
	Complete if the organization answered "Yes" on Form		ŕ		
1a	If the organization elected, as permitted under FASB ASC 95		venue statement	and balan	ce sheet works
	of art, historical treasures, or other similar assets held for pub	•			
	service, provide in Part XIII the text of the footnote to its finan	•	•		1
b	If the organization elected, as permitted under FASB ASC 95				sheet works of
	art, historical treasures, or other similar assets held for public				
	provide the following amounts relating to these items.	,			
	(i) Revenue included on Form 990, Part VIII, line 1				\$
2	If the organization received or held works of art, historical trea				
	the following amounts required to be reported under FASB A			J / I=-	
а	Revenue included on Form 990, Part VIII, line 1				\$
	Assets included in Form 990, Part X				

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

Schedule D (Form 990) (Rev. 12-2024)

432051 01-02-25

Par	t III Organizations Maintaining Co	ollections of Ar	t, Historic	al Tre	asures, or	Othe	r Sim	ilar Asse	ets (contir	nued)	uge
3	Using the organization's acquisition, accession										
	collection items (check all that apply).										
а	Public exhibition	d	I Loar	or exc	hange prograi	m					
b	Scholarly research	е									
С	Preservation for future generations										
4	Provide a description of the organization's co	llections and explain	n how they fu	rther th	ne organizatior	n's exe	mpt pu	ırpose in Pa	art XIII.		
5	During the year, did the organization solicit or										
	to be sold to raise funds rather than to be ma							_	Yes		No
Par	t IV Escrow and Custodial Arrang								, line 9, or		
	reported an amount on Form 990, Par		ŭ					,			
	Is the organization an agent, trustee, custodia	an, or other intermed	diary for cont	ribution	s or other ass	ets not	t includ	led			
	on Form 990, Part X?		•					[Yes		No
b	If "Yes," explain the arrangement in Part XIII a										
		·	· ·						Amoun	t	
С	Beginning balance							1c			
d	Additions during the year							1d			
е	Distributions during the year							1e			
f	Ending balance							1f			
	Did the organization include an amount on Fo							. [Yes		No
	If "Yes," explain the arrangement in Part XIII.						•				Ī
_	t V Endowment Funds Complete if										
	·	(a) Current year	(b) Prior		(c) Two years			ree years bad	ck (e) Four	r years	back
1a	Beginning of year balance	•						-			
b	Contributions										
c	Net investment earnings, gains, and losses										
d	Grants or scholarships										
	Other expenditures for facilities										
·											
f	Administrative expenses										
g 2	Provide the estimated percentage of the curre	ant year and halance	a (lino 1 a col	umn (a))) hold as:						
	Board designated or quasi-endowment	ent year end balance	% (iii le 1g, coi	uiiiii (a)	I) Held as.						
a	Permanent endowment	%	⁷⁰								
b		⁷⁰									
С	The percentages on lines 2a, 2b, and 2c shou										
22	Are there endowment funds not in the posses	•	ition that are	hold or	ad administors	d for th	ho				
Ja	organization by:	ssion of the organiza	ilion that are	riciu ai	id administere	ים וטו נו	ic		ſ	Yes	No
									3a(i)		
	(II) D. I.										
b	If "Yes" on line 3a(ii), are the related organizations:	tions listed as requir									
4	Describe in Part XIII the intended uses of the								[30]		<u> </u>
Par	t VI Land, Buildings, and Equipme		willellt lulius	•							
	Complete if the organization answered		Part IV line	11a S	See Form 990	Part X	line 1	n			
	·				T T				(d) Doo	اديرواد	
	Description of property	(a) Cost or o basis (investre		-	or other (other)		Accum eprecia		(d) Boo	k vait	ie
-	Lond	<u> </u>	none,	Dasis	(Garier)	ue	יטייטייטי	LIOI I			
	Land										
b	Buildings										
C	Leasehold improvements	I		2.0	3,792.		202	,792.			0.
d	Equipment				0,951.			, 792.	2	Q Q	78.
	Other Add lines 1a through 1e (Column (d) must on						<u> </u>	,013.		<u>0,0</u> 8.8	

Schedule D (Form 990) (Rev. 12-2024)

Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market val
inancial derivatives		
Inancial derivatives Closely held equity interests		
Other		
· · · · · · · · · · · · · · · · · · ·		
)		
)		
5)		
)		
i)		
(Col. (b) must equal Form 990, Part X, line 12, col. (B)) † VIII Investments - Program Related.		
Complete if the organization answered "Yes" (a) Description of investment	on Form 990, Part IV, line (b) Book value	11c. See Form 990, Part X, line 13. (c) Method of valuation: Cost or end-of-year market val
	, , , , , , , , , , , , , , , , , , , ,	.,
)		
2)		
3)		
5)		
3)		
<u>') </u>		
3)		
Complete if the organization answered "Yes" (a)	on Form 990, Part IV, line Description	11d. See Form 990, Part X, line 15. (b) Book valu
2)		
3)		
))		
5)		
5)		
r)		
3)		
))))		
: - (Column (b) must equal Form 990, Part X, line 15, co T X Other Liabilities	I. (B))	
Complete if the organization answered "Yes"	on Form 990, Part IV, line	
(a) Description of liability		(b) Book valu
) Federal income taxes		
2)		
3)		
(A)		
5)		
;;)		
·/		
3)		
))))		

432053 01-02-25

Schedule D (Form 990) (Rev. 12-2024)

Par	t XI Reconciliation of Revenue per Audited Financial Stat		n Revenue per Re	turn	
	Complete if the organization answered "Yes" on Form 990, Part IV, lin	ie 12a.			
1	Total revenue, gains, and other support per audited financial statements			1	285,046,026.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	2,800,000.		
е	Add lines 2a through 2d			2e	2,800,000.
3	Subtract line 2e from line 1			3	282,246,026.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIII.)	4b	-4,267.		
С	Add lines 4a and 4b			4c	-4,267.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	<u> </u>		5	282,241,759.
Pai	T XII Reconciliation of Expenses per Audited Financial Sta		th Expenses per F	Retur	'n
	Complete if the organization answered "Yes" on Form 990, Part IV, lin				
1	Total expenses and losses per audited financial statements			1	312,961,302.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1			
а	Donated services and use of facilities				
b	Prior year adjustments			_	
С	Other losses			_	
d	Other (Describe in Part XIII.)	2d	2,179,267.		0 4 5 0 0 6 5
е	Add lines 2a through 2d			2e	2,179,267.
3	Subtract line 2e from line 1			3	310,782,035.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIII.)	4b			
	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	8.)		5	310,782,035.
	t XIII Supplemental Information				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4			; Part	X, line 2; Part XI,
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide an	ny additional info	ormation.		
	RT X, LINE 2:		DOGETHEONIC		
	FUND DOES NOT HAVE ANY MATERIAL UNCERT				E FUND
	LES INFORMATIONAL TAX RETURNS IN THE U.S	5. FEDERA	AL AND STATE		
<u>J U F</u>	RISDICTIONS.				
	NA AL LINE OD OMITED AD THOMATHMO				
	RT XI, LINE 2D - OTHER ADJUSTMENTS:				2 900 000
KE.	TURN OF PRIOR YEAR GRANTS				2,800,000.
D 7 E	DM VI IINE AD OMHED AD THOMENMO.				
	RT XI, LINE 4B - OTHER ADJUSTMENTS:				-4,267.
TO	SS ON DISPOSAL OF FIXED ASSETS				-4,20/.
D 7 E	RT XII, LINE 2D - OTHER ADJUSTMENTS:				
	•				1 267
	SS ON DISPOSAL OF FIXED ASSETS				4,267. 2,175,000.
	SS ON GRANT FUNDS				2,179,267.
101	TAL TO SCHEDULE D, PART XII, LINE 2D				2,119,201.



SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

(Rev. December 2024)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

SIXTEEN THIRTY					26-448673	
Part I General Info	mation on A	ctivities Out	side the United States. Comple	ete if the organ	ization answered "Y	es" on
Form 990, Part IV	/, line 14b.					
1 For grantmakers. Does	the organization	maintain record	ds to substantiate the amount of its gra	ints and other a	assistance,	
the grantees' eligibility for	or the grants or a	ssistance, and t	he selection criteria used to award the	grants or assis	stance?	Yes No
-	ribe in Part V the	organization's p	procedures for monitoring the use of its	s grants and ot	her assistance outsi	de the
United States.	bar fallanda a Dart	I line O table as		1 \		
3 Activities per Region. (TI (a) Region	(b) Number of	(c) Number of	n be duplicated if additional space is n (d) Activities conducted in the region		vity listed in (d)	(f) Total
(a) Hegion	offices	employees,	(by type) (such as, fundraising, pro-		gram service,	expenditures
	in the region	employees, agents, and independent	gram services, investments, grants to		specific type	for and investments
		contractors in the region	recipients located in the region)	of service	(s) in the region	in the region
		in the region				
CENTRAL AMERICA AND				CIVIL RIGHT	S, SOCIAL	
THE CARIBBEAN	0	6		ACTION, ADV		284,408.
				,		,
				CIVIL RIGHT	S, SOCIAL	
NORTH AMERICA	0	1	PROGRAM SERVICES	ACTION, ADV	OCACY	4,100.
				CIVIL RIGHT	S, SOCIAL	
SOUTH AMERICA	0	2	PROGRAM SERVICES	ACTION, ADV	OCACY	27,846.
3 a Subtotal	0	9				316,354.
b Total from continuation						
sheets to Part I	0	0				0.
c Totals (add lines 3a						
and 3b)	0	9				316,354.

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

Schedule F (Form 990) (Rev. 12-2024)

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax
	exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

Schedule F (Form 990) (Rev. 12-2024)

Part III Grants and Other Assistance Part III can be duplicated if a			tes. Complete i	f the organization answered "Yes"	on Form 990, Part	IV, line 16.		
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)	

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) (Rev. 12-2024)

Part V | Supplemental Information

	invest	ments v	s. expe	enditure	es per r	egion); I	Part II,	line 1 (a	accour	nting m	ethod);	Part III ((acco	nn (f) (acc ounting m Iditional ii	ethod);	and P	art III, o	column (c)	
DADE T				псорі	O1110), u	σαρριιο	abic. /	1100 001	прісто	tino pe	ir to pr	Ovide di	ily ac	iditional ii	Hommat	1011. 0	30 11100	40110110.	
PART I																			
THE OR	GAN]	ZATI	ON	ACC	TUUC	S FO	R F	OREI	GN	EXP	ENDI	TURE	is :	REPOR	TED	IN	SCH	EDULE	
F, PAR	TI	UTII	JIZI	NG '	THE	ACCR	UAL	MET	'HOD	OF	ACC	OUNT	IN	G.					

SCHEDULE G (Form 990)

(Rev. December 2024)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-E2 filers are not required to complete this part. 1. Indicate whether the organization risised funds through any of the following activities. Check all that apply. a Mail solicitations c X Solicitation of powerment grants c X Phone solicitations c X Solicitation of powerment grants c X Phone solicitations c X Phone so	Name of the organization	THIRTY FUND					Employer ide 26-4486	ntification number 735
required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a			ered "Y	'es" or	n Form 990. Part IV. I			
a Mail solicitations b X Internet and email solicitations c X Phone solicitations d X Inperson solicitations g Solicitation of government grants c X Phone solicitations g Solicitation of government grants d X Inperson solicitations g Solicitation of government grants d X Inperson solicitations g Solicitation of government grants d X Inperson solicitations g Solicitation of government grants d X Inperson solicitations g Solicitation of government grants d X Inperson solicitations d X Inperson solicitati	<u> </u>		orea 1	00 01	11 01111 000,1 01114,1		. 1 01111 000 22	more are not
2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? (i) Name and address of individual or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (ii) Name and address of individual or entity (fundraiser) (iii) Activity (iii) Did to retain the fundraiser is or entity (fundraiser) or entity (fundraiser) or entity (fundraiser) PATH TO VICTORY LLC - 136 SOUTH HANCOCK ST, MADISON, WI FUNDRAISING COUNSEL PATH TO VICTORY LLC - 136 SOUTH RANCOCK ST, MADISON, WI FUNDRAISING COUNSEL ABUNDANCE STRATEGIES - 5009 BELT ROAD NW, MASHINGTON, DC DACH STRATEGIES - 5009 BELT ROAD NW, MASHINGTON, DC DACH STRATEGIES - 5010 LAGIONA VISTA, ALAMBEDA, CA FUNDRAISING COUNSEL X 2,495,907, 56,700, 2,439,207, VIBRANT STRATEGIES - 301 LAGIONA VISTA, ALAMBEDA, CA FUNDRAISING COUNSEL X 250,000, 25,000, 225,000, EMK CONSULTING LLC - 4707 CONNECTICUT AVE NW, FUNDRAISING COUNSEL X 250,000, 15,000, 235,000, STRAUS BAKER - 99 MAIN ST, SHEFFIELD, MA 01257 FUNDRAISING COUNSEL X 145,000, 10,000, 135,000, TAILWIND PARTNERS LLC - PO BOX 111, MISSION, KS 66201 FUNDRAISING COUNSEL X 0, 8,350, -8,350, -8,350, -8,350, -8,350, -8,350, AK, AL, AR, CA, CO, CT, DC, FL, GA, HI, TL, KS, KY, ME, MA, MD, MI, MN, MO, MS, NC, ND, NH, NJ, NM	 a Mail solicitations b X Internet and email solicitations c X Phone solicitations 	e X Solicita f Solicita	ition of	nongo gover	overnment grants			
(ii) Activity	2 a Did the organization have a written of key employees listed in Form 990, Fb If "Yes," list the 10 highest paid indi	Part VII) or entity in connection with p viduals or entities (fundraisers) pursu	rofessi	onal f	undraising services?	•	X Yes	· · · · · · · · · · · · · · · · · · ·
SOUTH HANCOCK ST, MADISON, WI FUNDRAISING COUNSEL X 13,000,000. 55,000. 12,945,000. ABUNDANCE STRATEGIES - 5009 BELT ROAD NW, WASHINGTON, DC FUNDRAISING COUNSEL X 3,250,000. 99,900. 3,150,100. DACH STRATEGY GROUP LLC - 4318 NEWARK STREET NW, PROFESSIONAL FUNDRAISER X 2,495,907. 56,700. 2,439,207. VIBRANT STRATEGIES - 301 LAGUNA VISTA, ALAMEDA, CA FUNDRAISING COUNSEL X 250,000. 25,000. 225,000. BMK CONSULTING LLC - 4707 CONNECTICUT AVE NW, FUNDRAISING COUNSEL X 250,000. 15,000. 235,000. STRAUS BAKER - 99 MAIN ST, SHEFFIELD, MA 01257 FUNDRAISING COUNSEL X 145,000. 10,000. 135,000. TAILWIND PARTNERS LLC - PO BOX 111, MISSION, KS 66201 FUNDRAISING COUNSEL X 0. 8,3508,350. TOTAL TOTAL TOTAL 19,390,907. 269,950. 19,120,957. 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. AK, AL, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MA, MD, MI, MN, MO, MS, NC, ND, NH, NJ, NM	• •	(ii) Activity	have c	ustody itrol of	1 ' '	tò (or	r retained by) undraiser	to (or retained by)
ABUNDANCE STRATEGIES - 5009 BELT ROAD NW, WASHINGTON, DC FUNDRAISING COUNSEL X 3,250,000. 99,900. 3,150,100. DACH STRATEGY GROUP LLC - 3418 NEWARK STREET NW, PROFESSIONAL FUNDRAISER X 2,495,907. 56,700. 2,439,207. VIERANT STRATEGIES - 301 LAGUNA VISTA, ALAMEDA, CA FUNDRAISING COUNSEL X 250,000. 25,000. 225,000. BMK CONSULTING LLC - 4707 CONNECTICUT AVE NW, FUNDRAISING COUNSEL X 250,000. 15,000. 235,000. STRAUS BAKER - 99 MAIN ST, SHEFFIELD, MA 01257 FUNDRAISING COUNSEL X 145,000. 10,000. 135,000. TAILWIND PARTNERS LLC - PO BOX 111, MISSION, KS 66201 FUNDRAISING COUNSEL X 0. 8,3508,350. TOTAL TOTAL 19,390,907. 269,950. 19,120,957. 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. AK, AL, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MA, MD, MI, MN, MO, MS, NC, ND, NH, NJ, NM	PATH TO VICTORY LLC - 136		Yes	No				
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EMK CONSULTING LLC - 4707 CONNECTICUT AVE NW, FUNDRAISING COUNSEL X 250,000. 15,000. 235,000. STRAUS BAKER - 99 MAIN ST, SHEFFIELD, MA 01257 FUNDRAISING COUNSEL X 145,000. 10,000. 135,000. TAILWIND PARTNERS LLC - PO BOX 111, MISSION, KS 66201 FUNDRAISING COUNSEL X 0. 8,3508,350. Total 19,390,907. 269,950. 19,120,957. 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. AK, AL, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MA, MD, MI, MN, MO, MS, NC, ND, NH, NJ, NM		FIINDRAISING COUNSEL		l _v	250 000		25 000	225 000
CONNECTICUT AVE NW, FUNDRAISING COUNSEL X 250,000. 15,000. 235,000. STRAUS BAKER - 99 MAIN ST, SHEFFIELD, MA 01257 FUNDRAISING COUNSEL X 145,000. 10,000. 135,000. TAILWIND PARTNERS LLC - PO BOX 111, MISSION, KS 66201 FUNDRAISING COUNSEL X 0. 8,3508,350. Total 19,390,907. 269,950. 19,120,957. 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. AK,AL,AR,CA,CO,CT,DC,FL,GA,HI,IL,KS,KY,ME,MA,MD,MI,MN,MO,MS,NC,ND,NH,NJ,NM		FUNDRAISING COUNSED		_ A	230,000.		23,000.	223,000.
STRAUS BAKER - 99 MAIN ST, SHEFFIELD, MA 01257 FUNDRAISING COUNSEL X 145,000. 10,000. 135,000. TAILWIND PARTNERS LLC - PO BOX 111, MISSION, KS 66201 FUNDRAISING COUNSEL X 0. 8,3508,350. Total 19,390,907. 269,950. 19,120,957. 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. AK,AL,AR,CA,CO,CT,DC,FL,GA,HI,IL,KS,KY,ME,MA,MD,MI,MN,MO,MS,NC,ND,NH,NJ,NM		FUNDRAISING COUNSEL		l x	250 000		15 000	235 000
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Total 19,390,907. 269,950. 19,120,957. 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. AK, AL, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MA, MD, MI, MN, MO, MS, NC, ND, NH, NJ, NM	•	FUNDRAISING COUNSEL		l x	145 000.		10 000.	135 000.
BOX 111, MISSION, KS 66201 FUNDRAISING COUNSEL X 0. 8,3508,350. Total 19,390,907. 269,950. 19,120,957. 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. AK, AL, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MA, MD, MI, MN, MO, MS, NC, ND, NH, NJ, NM	·				110,000.		20,000.	200,000.
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. AK, AL, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MA, MD, MI, MN, MO, MS, NC, ND, NH, NJ, NM		FUNDRAISING COUNSEL		х	0.		8,350.	-8,350.
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	3 List all states in which the organization			utions		it is e	xempt from re	· · · · · ·
	AK, AL, AR, CA, CO, CT, DC,	FL,GA,HI,IL,KS,KY,I	ME,N	ſA,N	MD, MI, MN, MO	,MS	,NC,ND,	NH,NJ,NM
						<u>, </u>	<u>, , , , , , , , , , , , , , , , , , , </u>	· · ·

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990) (Rev. 12-2024)

1 4	πι	of fundraising Events. Complete if the of fundraising event contributions and ground and ground areas.				
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
a)			(event type)	(event type)	(total number)	COI. (C))
Revenue						
Rev	1	Gross receipts				
	2	Less: Contributions				
	_	Less. Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
	5	Noncash prizes				
es						
Sens	6	Rent/facility costs				
Direct Expenses	_					
irec	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses				
	10	Direct expense summary. Add lines 4 through	9 in column (d)			
	11	Net income summary. Subtract line 10 from li				
Pa	rt I		answered "Yes" on Forr	m 990, Part IV, line 19, or r	reported more than	
		\$15,000 on Form 990-EZ, line 6a.	T	6 > Doll to be for stood		1 (n = 1)
e			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c)
Revenue				Singo, progressive singe		
Be	1	Gross revenue				
S	2	Cash prizes				
ense	_					
EXP	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
ă	·					
	5	Other direct expenses				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	No	No No	No	
	_	Divert conservation Add lines Office and	Fig. and toward (all)			
	′	Direct expense summary. Add lines 2 through	i 5 in column (a)			
	8	Net gaming income summary. Subtract line 7	from line 1. column (d)			
		gg				
9	Ent	ter the state(s) in which the organization condu	cts gaming activities:			
а	ls t	he organization licensed to conduct gaming ac	tivities in each of these	states?		Yes No
b	If "	No," explain:				
	_					
10-	\\\\c	ere any of the organization's gaming licenses re	woked suspended or t	erminated during the tax s	/ear?	Yes No
		Yes," explain:				163 140
_	_					
3209	2 01	-14-25			Schedule G /F	orm 990) (Rev. 12-2024)
	_ 01	==			John Gardin G (I	, , , , , , , , , , , , , ,

Sch	edule G (Form 990) (Rev. 12-2024) SIXTEEN THIRTY FUND 26 -	44867	35	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Y	'es	☐ No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?	Y	'es	☐ No
13	Indicate the percentage of gaming activity conducted in:			
а	The organization's facility	13a		%
	An outside facility	13b		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	🔲 Y	'es	☐ No
b	of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$			
c	If "Yes," enter the name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Camina managay companation			
	Gaming manager compensation \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
	Mandatory distributions:			
а	a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	L Y	'es	∟ No
b	o Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
Da	organization's own exempt activities during the tax year \$			
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and P	art III, lines	s 9, 9	b, 10b,
~~	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	<u>~</u>		
SC	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISER	<u>s:</u>		
/ =	\ NAME OF FINIDATOED. DAMII MO VICMORY II C			
<u>(I</u>		702		
<u>(I</u>) ADDRESS OF FUNDRAISER: 136 SOUTH HANCOCK ST, MADISON, WI 53	703		
/ T	\ NAME OF FINDDATCED. ADINDANCE CHDAMECTEC			
<u>(I</u>		016		
<u>(I</u>) ADDRESS OF FUNDRAISER: 5009 BELT ROAD NW, WASHINGTON, DC 20	016		
/ +	\ NAME OF FINDDATCED. DACH CHDAMEON ODOLD ITC			
<u>(I</u>		200	16	
<u>(I</u>) ADDRESS OF FUNDRAISER: 3418 NEWARK STREET NW, WASHINGTON, DC	200	Τ.0	
/ T	\ NAME OF FINDDATCED, WIDDAME CEDAMECTEC			
<u>(I</u> /T				
<u>(I</u>) ADDRESS OF FUNDRAISER: 301 LAGUNA VISTA, ALAMEDA, CA 94501			
<u>(I</u>) NAME OF FUNDRAISER: BMK CONSULTING LLC			
(DC 2	000	18
<u> </u>	, or resident restriction and make the second resident second resident residen		(

Schedule G	(Form 990) SIXTEEN THIRTY FUND	26-4486735	Page 4
Part IV	(Form 990) SIXTEEN THIRTY FUND Supplemental Information (continued)		
	,		

SCHEDULE I (Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization SIXTEEN T	HIRTY FUN	D					Employer identification number 26-4486735
Part I General Information on Grants a							
Does the organization maintain records to criteria used to award the grants or assist Describe in Part IV the organization's properties. Part II Grants and Other Assistance to II	tance?ocedures for monit	oring the use of grant	funds in the United	States.			X Yes No
recipient that received more than \$ 1 (a) Name and address of organization or government	65,000. Part II can (b) EIN	be duplicated if additi (c) IRC section (if applicable)	onal space is neede (d) Amount of cash grant	ed. (e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
10,000 FRIENDS ADVOCATES OF PENNSYLVANIA - PO BOX 4547 - LANCASTER, PA 17604	31-1621198	501(C)(4)	100,975.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
1000 FRIENDS OF WISCONSIN LAND USE INSTITUTE - 820 WEST WINGRA DRIVE, BOX 259704 - MADISON, WI 53725	39-1857262	501(C)(3)	132,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
1000 WOMEN STRONG INC 1842 ASHLEY HALL WAY TALLAHASSEE, FL 32308	85-2794865	501(C)(4)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
1K WOMEN STRONG INC PO BOX 5651 TALLAHASSEE, FL 32314	86-3018152	501(C)(4)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
350 WISCONSIN ACTION INC 2921 LANDMARK PL, SUITE 215 MADISON, WI 53713	88-2053462	501(C)(4)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
350NH ACTION 1 WASHINGTON ST, SUITE 3123 DOVER, NH 03820	83-4581821		20,000.	0.			CAPACITY BUILDING
2 Enter total number of section 501(c)(3) ar3 Enter total number of other organizations	•	•					

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

Schedule I (Form 990) (Rev. 12-2024)

Schedule I (Form 990) SIXTEEN TE							26-4486735 Page
Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	T
(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 non-cash assistance	(h) Purpose of grant or assistance
603 FORWARD							
PO BOX 676							CIVIL RIGHTS, SOCIAL
CONCORD, NH 03302	83-2984780	501(C)(4)	90,250.	0.			ACTION, ADVOCACY
A BETTER BIG SKY							
PO BOX 7134							CIVIL RIGHTS, SOCIAL
MISSOULA, MT 59807	82-5313159	501(C)(4)	25,000.	0.			ACTION, ADVOCACY
AADI DEWOGDAGY EVEND							
AAPI DEMOCRACY FUND							CTVII BICUMC COCIAI
3435 WILSHIRE BLVD, SUITE 1400 LOS ANGELES, CA 90010	93-3775024	501 (C) (A)	2,495,500.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
LOS ANGELES, CA 90010	93-3773024	501(0)(4)	2,493,300.	0.			ACTION, ADVOCACT
AB PAC							
800 MAINE AVE SW, SUITE 400							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20024	27-4819166	527	50,000.	0.			ACTION, ADVOCACY
ABUNDANT HOUSING MA, INC.							GTYTT DIGUMG GOGTAL
52 WELD STREET, SUITE 2 JAMAICA PLAIN, MA 02130	85-1886940	501 (C) (A)	20,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
DAMAICA PLAIN, MA 02130	83-1880340	501(C)(4)	20,000.	0.			ACTION, ADVOCACI
ACT NOW PROJECT							
440 N BARRANCA AVE, SUITE 6683							CIVIL RIGHTS, SOCIAL
COVINA, CA 91723	92-2517254	501(C)(4)	46,400.	0.			ACTION, ADVOCACY
ACTION TOGETHER MED							
ACTION TOGETHER NEPA 504 FAIRVIEW PARKWAY							CIVIL RIGHTS, SOCIAL
MOUNTAIN TOP, PA 18707	82-1570948	501 (C) (A)	135,000.	0.			ACTION, ADVOCACY
MOUNTAIN TOP, PA 10707	02-1370940	501(0)(4)	133,000.	0.			ACTION, ADVOCACT
ADVANCE NORTH CAROLINA INC							
PO BOX 27421							CIVIL RIGHTS, SOCIAL
RALEIGH, NC 27611	47-2740671	501(C)(4)	25,000.	0.			ACTION, ADVOCACY
ADVANCED ENERGY UNITED							
1801 PENNSYLVANIA AVE NW, SUITE 410							
WASHINGTON, DC 20006	45-3859544	501(C)(6)	3,500,000.	0.			ENVIRONMENTAL PROGRAMS
, 20 2000	10 0000011		1 2,230,000.	••		1	Cabadala I (Farma 00

Schedule I (Form 990) SIXTEEN T							26-4486735 Page
Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	T
(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 non-cash assistance	(h) Purpose of grant or assistance
ADVANCING AZ 530 E MCDOWELL RD, SUITE 107 PHOENIX, AZ 85004	83-4665335	501(C)(4)	1,275,000.	0.			CAPACITY BUILDING
AFFORDABLE HOUSING ALLIANCE OF CENTRAL OHIO - 215 NORTH FRONT STREET - COLUMBUS, OH 43215	47-4823299	501(C)(3)	119,105.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
ALASKA JOBS COALITION 3333 DENALI STREET, SUITE 125 ANCHORAGE, AK 99503	99-1532524	501(C)(4)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
ALASKA PROGRESSIVE DONOR TABLE 1120 HUFFMAN RD, UNIT 502 ANCHORAGE, AK 99515	84-2728053	501(C)(4)	302,500.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
ALASKANS FOR POSTERITY PO BOX 90370 ANCHORAGE, AK 99509	85-2279710	501(C)(4)	200,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
ALL HANDS ON DECK NETWORK INC 37 BRIDGE ST, BOX 749 NORTHAMPTON, MA 01060	37-1697474	501(C)(4)	255,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
ALL IN ACTION FUND 611 PENNSYLVANIA AVE SE, UNIT 508 WASHINGTON, DC 20003	93-4403347	501(C)(4)	259,136.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
ALL TOGETHER COLORADO PO BOX 102673 DENVER, CO 80210	85-3959470	527	250,000.	0.			ENVIRONMENTAL PROGRAMS
ALLIANCE FOR A BETTER UTAH INC PO BOX 521847 SALT LAKE CITY, UT 84152	45-2463539	501(C)(4)	20,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

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Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	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 non-cash assistance	(h) Purpose of grant or assistance
ALLIANCE FOR YOUTH ACTION 650 MASSACHUSETTS AVE NW, SUITE 600 WASHINGTON, DC 20001	46-2914731	501(C)(4)	1,000,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
AMERICA VOTES 1155 CONNECTICUT AVE NW, SUITE 600 WASHINGTON, DC 20036	26-4568349	501(C)(4)	27,850,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
AMERICA WORKS USA 1225 EYE STREET NW, SUITE 1100 WASHINGTON, DC 20005	45-2315353	501(C)(4)	250,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
AMERICAN COUNCIL FOR AN ENERGY EFFICIENT ECONOMY - 529 14TH ST NW, SUITE 600 - WASHINGTON, DC 20045	94-2711707	501(C)(3)	720,000.	0.			ENVIRONMENTAL PROGRAMS
AMPLIFY NEW HAMPSHIRE PO BOX 3908 MANCHESTER, NH 03105	86-2948810	501(C)(4)	75,000.	0.			ENVIRONMENTAL PROGRAMS
ANNIES LIST TRAINING AND ENGAGEMENT FUND - PO BOX 303277 - AUSTIN, TX 78703	84-3909459	501(C)(4)	200,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
API PA VOTES PO BOX 22611 PHILADELPHIA, PA 19110	85-3438527	527	100,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
ARIZONA FOR ABORTION ACCESS 2800 N CENTRAL AVE, SUITE 1900 PHOENIX, AZ 85004	93-2767406	501(C)(4)	1,250,000.	0.			ENVIRONMENTAL PROGRAMS
ARIZONA WINS 530 E MCDOWELL RD, SUITE 107 189 PHOENIX, AZ 85004	36-4781665	501(C)(4)	20,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	- Faye
(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 non-cash assistance	(h) Purpose of grant or assistance
ARIZONANS FOR A CLEAN ECONOMY 1108 E GEORGIA AVE PHOENIX, AZ 85014	92-3664411	501(C)(4)	300,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
ASIAN AMERICAN ADVOCACY FUND INC 5680 OAKBROOK PKWY, STE 148 NORCROSS, GA 30093	83-1198242	501(C)(4)	250,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
ASIAN PACIFIC ISLANDER POLITICAL ALLIANCE – 1528 WALNUT ST, SUITE 808 – PHILADELPHIA, PA 19102	85-0685612	501(C)(4)	600,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
ASSOCIATION FOR ENERGY AFFORDABILITY - 105 BRUCKNER BLVD - BRONX, NY 10454	13-3374285	501(C)(3)	530,000.	0.			ENVIRONMENTAL PROGRAMS
BATTLE BORN PROGRESS 2657 WINDMILL PKWY, UNIT 619 HENDERSON, NV 89074	27-0854852	501(C)(4)	175,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
BEND THE ARC JEWISH ACTION INC 330 7TH AVE, SUITE 1900 NEW YORK, NY 10001	46-0539726	501(C)(4)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
BERRIEN FORWARD 100 W MAIN STREET BENTON HARBOR, MI 49022	88-1277064	501(C)(4)	107,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
BETTER JOBS FOR ALASKA INC 721 DEPOT DR, SUITE 100 ANCHORAGE, AK 99501	93-2861550	501(C)(4)	100,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
BETTER PENNSYLVANIA 1740 MAIN STREET MECHANICSBURG, PA 17055	84-3194010	501(C)(4)	150,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

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Part II Continuation of Grants and Other	Assistance to Don	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	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 non-cash assistance	(h) Purpose of grant or assistance
BIG SKY FIFTY FIVE PLUS							
404 NORTH 31ST STREET, SUITE 128							CIVIL RIGHTS, SOCIAL
BILLINGS, MT 59101	82-4712803	501(C)(4)	225,000.	0.			ACTION, ADVOCACY
•			,				,
BLACK LEADERSHIP ORGANIZING							
COLLABORATIVE - 848 W EXCHANGE ST							CIVIL RIGHTS, SOCIAL
- AKRON, OH 44302	81-0824161	501(C)(4)	75,000.	0.			ACTION, ADVOCACY
BLACK MALE VOTER PROJECT							
384 NORTHYARDS BLVD NW, BUILDING 10							CIVIL RIGHTS, SOCIAL
ATLANTA, GA 30313	84-3530186	501(C)(4)	150,000.	0.			ACTION, ADVOCACY
DILAW MARINA MARINA TWA							
BLACK VOTERS MATTER FUND INC							aritti pravma acarri
4751 BEST RD, SUITE 490	01 2625061	F01/G)/A)	100 000				CIVIL RIGHTS, SOCIAL
EAST POINT, GA 30337	81-3625061	501(0)(4)	100,000.	0.			ACTION, ADVOCACY
BLUE HORIZON ACTION FUND							
PO BOX 780162							CIVIL RIGHTS, SOCIAL
SAN ANTONIO, TX 78278	88-1992059	501(C)(4)	50,000.	0.			ACTION, ADVOCACY
2211 121120, 121 70270	00 1332003			-			1011011, 1121001101
BLUE RISING TOGETHER							
300 CENTER DR, SUITE G 358							CIVIL RIGHTS, SOCIAL
SUPERIOR, CO 80027	84-3989047	501(C)(4)	60,000.	0.			ACTION, ADVOCACY
BLUEGREEN ALLIANCE INC							
2701 UNIVERSITY AVE SE, SUITE 209							
MINNEAPOLIS, MN 55414	26-4086284	501(C)(4)	115,000.	0.			ENVIRONMENTAL PROGRAMS
BLUESTEM FOUNDATION FOR ECONOMIC							
FREEDOM INC - 700 SW JACKSON,							CIVIL RIGHTS, SOCIAL
SUITE 1100 - TOPEKA, KS 66603	81-1156636	501(C)(4)	38,000.	0.			ACTION, ADVOCACY
DILLID DUTLIN NOW							
BUILD PHILLY NOW							CTVTI DICUMO COCTAT
1735 MARKET ST, STE 125 155	99_1950167	501 (C) (A)	116 500	0.			CIVIL RIGHTS, SOCIAL
PHILADELPHIA, PA 19103	99-1950167	DUI(C)(4)	116,500.	U .			ACTION, ADVOCACY

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Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	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 non-cash assistance	(h) Purpose of grant or assistance
CAFE ACCION 420 W GRIGGS LAS CRUCES, NM 88005	85-2340038	501(C)(4)	100,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
CALDWELL HAYS EXAMINER 205 CHEATHAM ST, SUITE 1 SAN MARCOS, TX 78666	87-3919898		51,400.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
CARE IN ACTION INC 45 BROADWAY, SUITE 2240 NEW YORK, NY 10006	46-4605470	501(C)(4)	79,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
CAROLINA FEDERATION 1102 WALL STREET DURHAM, NC 27701	83-0936641	501(C)(4)	25,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
CASA IN ACTION 8151 15TH AVE HYATTSVILLE, MD 20783	27-2145405	501(C)(4)	150,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
CENTENNIAL HORIZON 191 UNIVERSITY BLVD, SUITE 118 DENVER, CO 80206	99-4557446	527	78,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
CENTENNIAL STATE PROSPERITY PO BOX 6692 DENVER, CO 80206	84-3973327	501(C)(4)	305,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
CENTER FOR AMERICAN PROGRESS ACTION FUND - 1333 H STREET, NW, SUITE 100E - WASHINGTON, DC 20005	30-0192708	501(C)(4)	325,000.	0.			ENVIRONMENTAL PROGRAMS
CENTER FOR CIVIC ACTION 625 SILVER AVE SW, SUITE 320 ALBUQUERQUE, NM 87102	02-0779812	501(C)(4)	217,909.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	- Fage
(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 non-cash assistance	(h) Purpose of grant or assistance
CENTER FOR COMMUNITY CHANGE ACTION							
PO BOX 5685							CIVIL RIGHTS, SOCIAL
FREDERICKSBURG, VA 22403	27-0061100	501(C)(4)	86,526.	0.			ACTION, ADVOCACY
CENTER FOR POPULAR DEMOCRACY							
ACTION FUND - 449 TROUTMAN ST,							CIVIL RIGHTS, SOCIAL
SUITE A - BROOKLYN, NY 11237	45-3860271	501(C)(4)	425,000.	0.			ACTION, ADVOCACY
CERES INC							
99 CHAUNCY STREET, 6TH FLOOR							CIVIL RIGHTS, SOCIAL
BOSTON, MA 02111	22-3053747	501(C)(3)	50,000.	0.			ACTION, ADVOCACY
GREE DAG							
CFFE PAC							CTVII BICHMS SOCIAL
1032 15TH STREET NW, SUITE 247 WASHINGTON, DC 20005	85-0792961	527	500,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MIDITACION, DC 20003	03 0732301	527	300,000.	· ·			nerion, abvocaer
CHARLOTTE REGIONAL BUSINESS							
ALLIANCE - 330 SOUTH TRYON ST -							CIVIL RIGHTS, SOCIAL
CHARLOTTE, NC 28202	56-0173610	501(C)(6)	75,000.	0.			ACTION, ADVOCACY
CITIES FORWARD INC							
6217 GEORGIA AVE NW, SUITE 1-406							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20011	93-1383745	501(C)(3)	2,679,000.	0.			ACTION, ADVOCACY
CITIZEN ACTION OF NEW YORK							
209 GARTH ROAD							CIVIL RIGHTS, SOCIAL
SCARSDALE, NY 10583	11-2644562	501(C)(4)	100,000.	0.			ACTION, ADVOCACY
CITIZEN ACTION OF WISCONSIN INC							
221 S 2ND STREET, SUITE 300							
MILWAUKEE, WI 53204	39-1424314	501(C)(4)	100,000.	0.			ENVIRONMENTAL PROGRAMS
CIMIZENS NOW DOLLWICIANS							
CITIZENS NOT POLITICIANS 545 EAST TOWN STREET							CIVIL RIGHTS, SOCIAL
COLUMBUS, OH 43215	93-2809225	501(C)(4)	6,000,000.	0.			ACTION, ADVOCACY
JOHOMBOD, OH 43213	1 73 2007223	501(0)(1)	0,000,000.	<u> </u>			FICTION, ADVOCACT

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	t II.)	T
(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 non-cash assistance	(h) Purpose of grant or assistance
CIVIC NATION ACTION							
1156 15TH ST. NW, SUITE 1000							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20005	86-1995353	501(C)(4)	200,000.	0.			ACTION, ADVOCACY
CIVIC NEBRASKA							
530 S 13TH STREET, SUITE 100							CIVIL RIGHTS, SOCIAL
LINCOLN, NE 68508	27-2204391	501(C)(3)	65,000.	0.			ACTION, ADVOCACY
CIVIC TRUTH ACTION							
PO BOX 15845							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20003	99-4080424	527	1,900,000.	0.			ACTION, ADVOCACY
CIVIC TRUTH COALITION INC							
200 CONTINENTAL DRIVE, SUITE 401							CIVIL RIGHTS, SOCIAL
NEWARK, DE 19713	99-3438435	501(C)(4)	1,340,000.	0.			ACTION, ADVOCACY
CLEAN AND PROSPEROUS AMERICA							
EDUCATION FUND - PO BOX 21961 -							CIVIL RIGHTS, SOCIAL
SEATTLE, WA 98111	93-2263138	501(C)(3)	1,050,000.	0.			ACTION, ADVOCACY
CLEAN ENERGY BUYERS ASSOCIATION							
1425 K ST NW, SUITE 1110							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20005	83-2935439	501(C)(6)	600,000.	0.			ACTION, ADVOCACY
CLEAN WATER ACTION							
PO BOX 188							
MT CLEMENS, MI 48046	23-7128611	501(C)(4)	44,988.	0.			ENVIRONMENTAL PROGRAMS
CLEANER ECONOMY COALITION INC							
1500 K ST NW, SUITE 850							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20005	99-2948277	501(C)(4)	75,000.	0.			ACTION, ADVOCACY
CLIMATE CABINET ACTION							
150 SUTTER STREET, SUITE 695							
SAN FRANCISCO, CA 94104	85-4196094	501(C)(4)	500,000.	0.			ENVIRONMENTAL PROGRAMS

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Organization or government if applicable cash grant non-cash assistance (book, FMV, appraisal, other) CLIMATE EMERCENCY ADVOCATES INC 529 MAIN ST, SUITE 200 GRARLBSTOWN, MA 02129 87-2122911 501(C)(4) 625,000. 0. ENVIRONMENTAL FROGRAM CLIMATE EQUITY ACTION FUND 1100 13TH ST NW, SUITE 800 MASHINGTON, DC 20005 88-3587010 501(C)(4) 6,943,121. 0. ENVIRONMENTAL PROGRAM CLIMATE JOBS NATIONAL RESOURCE CEMPTER ACTION FUND 350 W 31ST ST, 8TH FL - NEW YORK, NY 10001 85-0712215 501(C)(4) 5,840,000. 0. ENVIRONMENTAL PROGRAM CLIMATE FOWER 815 SLACK LIVES MATTER PLZ NW, SUIT MASHINGTON, DC 20005 92-2307261 501(C)(4) 1,000,000. 0. ENVIRONMENTAL PROGRAM CLIMATE SOLUTIONS ACTION FUND 36-5016879 501(C)(4) 265,540. 0. ENVIRONMENTAL PROGRAM CLIMATE STRATEGIES LAB LLC SAN WAINTS TS, SUITE 200 CINCINNARI, OH 45202 87-1467403 110,000. 0. ENVIRONMENTAL PROGRAM CLIMATE STRATEGIES LAB LLC SAN WAINTS TS, SUITE 200 CINCINNARI, OH 45202 87-1467403 110,000. 0. ENVIRONMENTAL PROGRAM COLLECTIVE RENAISSANCE ACTION 834 INMAN VILLAGE PARKMAY ATLANTA, GA 30307 99-1790672 501(C)(4) 125,000. 0. CINCINNARI CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY COLORADANS CREATING OPPORTUNITIES PO BOX 100292 CIVIL RIGHTS, SOCIAL	Part II Continuation of Grants and Other A	Assistance to Don	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
129 MAIN ST, SUITE 200 87-2122911 501(C)(4) 625,000. 0. ENVIRONMENTAL PROGRAM		(b) EIN			noncash	valuation (book, FMV,		(h) Purpose of grant or assistance
S29 MAIN ST, SUITE 200 S7-2122911 S01(C)(4) 625,000. 0. ENVIRONMENTAL PROGRAM	CLIMATE EMEDGENCY ADVOCATES INC							
CLIMATE EQUITY ACTION FUND 1100 13TH ST NW, SUITE 800 AASHINGTON, DC 20005 88-3587010 501(C)(4) 6,943,121. 0. ENVIRONMENTAL PROGRAM CLIMATE JOBS NATIONAL RESOURCE CENTER ACTION FUND - 350 W 318T 57, 8TH FL - NEW YORK, NY 10001 85-0712215 501(C)(4) 5,840,000. CLIMATE POWER 815 BLACK LIVES MATTER PLZ NW, SUIT WASHINGTON, DC 20006 92-2307261 501(C)(4) 1,000,000. CLIMATE SOLUTIONS ACTION FUND 1402 THIRD AVE, SUITE 1200 SEATTLE, WA 98101 36-5016879 501(C)(4) 265,540. CLIMATE STRATEGIES LAB LLC 530 WALNUT ST, SUITE 200 CLIMATE STRATEGIES LAB LLC 530 WALNUT ST, SUITE 200 CLIMATE, WA 45202 87-1467403 110,000. 0. ENVIRONMENTAL PROGRAM CLIMATE, WA 45202 87-1467403 110,000. 0. ENVIRONMENTAL PROGRAM CLIMATE ARE STRATEGIES LAB LLC 530 WALNUT ST, SUITE 200 CLIMATE STRATEGIES LAB LLC 530 WALNUT ST, SUITE 200 CLIMATE ASTRATEGIES LAB LLC 530 WALNUT ST, SUITE 200 CLIMATE ASTRATEGIES LAB LLC 531 WALNUT ST, SUITE 200 CLIMATE ASTRATEGIES LAB LLC 532 WALNUT ST, SUITE 200 CLIMATE STRATEGIES LAB LLC 533 WALNUT ST, SUITE 200 CLIMATE STRATEGIES LAB LLC 534 YANNA NULLIAGE PARKWAY ATLANTA, GA 30307 99-1790672 501(C)(4) 125,000. 0. ENVIRONMENTAL PROGRAM CIVIL RIGHTS, SOCIAL CLIMATE, SOCIAL CLIMATE STRATEGIES LAB LLC 501 WALNUT ST, SUITE 200 CLIMATE STRATEGIES LAB LLC 502 WALNUT ST, SUITE 200 CLIMATE STRATEGIES LAB LLC 503 WALNUT ST, SUITE 200 CLIMATE STRATEGIES LAB LLC 504 WALNUT ST, SUITE 200 CLIMATE STRATEGIES LAB LLC 505 WALNUT ST, SUITE 200 CLIMATE STRATEGIES LAB LLC 507 WALNUT ST, SUITE 200 CLIMATE STRATEGIES LAB LLC 508 WALNUT ST, SUITE 200 CLIMATE STRATEGIES LAB LLC 509 WALNUT STRATEGIES LAB LLC 501 WALNUT STRATEGIES LAB LLC 501 WALNUT STRATEGIES LAB LLC 501 WALNUT STRATEGIES LAB LLC 502 WALNUT STRATEGIES LAB LLC 503 WALNUT STRATEGIES LAB LLC 504 WALNUT STRATEGIES LAB LLC 507 WALNUT STRATEGIES LAB LLC 508 WALNUT STRATEGIES LAB LLC 508 WALNUT STRATEGIES LAB LLC 509 WALNUT STRATEGIES LAB LLC 501 WALNUT STRATEGIES LAB LLC 501 WALNUT STRATEGIES LAB LLC 501 WAL								
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CLIMATE JOBS NATIONAL RESOURCE CENTER ACTION FUND - 350 W 31ST ST, 8TH FL - NEW YORK, NY 10001 85-0712215 501(C)(4) 5,840,000. 0. ENVIRONMENTAL PROGRAM CLIMATE POWER 815 BLACK LIVES MATTER PLZ NW, SUIT WASHINGTON, DC 20006 92-2307261 501(C)(4) 1,000,000. 0. ENVIRONMENTAL PROGRAM CLIMATE SOLUTIONS ACTION FUND 1402 THIRD AVE, SUITE 1200 SEATTLE, WA 98101 36-5016879 501(C)(4) 265,540. 0. ENVIRONMENTAL PROGRAM CLIMATE STRATEGIES LAB LLC 530 WALNUT ST, SUITE 200 CINCINNATI, OH 45202 87-1467403 110,000. 0. ENVIRONMENTAL PROGRAM COLLECTIVE RENAISSANCE ACTION 834 INMAN VILLAGE PARKWAY ATLANTA, GA 30307 99-1790672 501(C)(4) 125,000. 0. C.	·			,				
## WASHINGTON, DC 20005 88-3587010 501(C)(4) 6,943,121. 0. ENVIRONMENTAL PROGRAM CLIMATE JOBS NATIONAL RESOURCE CENTER ACTION FUND - 350 W 31ST ST, 8TH FL - NEW YORK, NY 10001 85-0712215 501(C)(4) 5,840,000. 0. ENVIRONMENTAL PROGRAM CLIMATE POWER 815 BLACK LIVES MATTER PLZ NW, SUIT WASHINGTON, DC 20006 92-2307261 501(C)(4) 1,000,000. 0. ENVIRONMENTAL PROGRAM CLIMATE SOLUTIONS ACTION FUND 1402 THIRD AVE, SUITE 1200 SEATTLE, WA 98101 36-5016879 501(C)(4) 265,540. 0. ENVIRONMENTAL PROGRAM CLIMATE STRATEGIES LAB LLC 530 WALDIT ST, SUITE 200 CINCINNATI, OH 45202 87-1467403 110,000. 0. ENVIRONMENTAL PROGRAM COLLECTIVE RENAISSANCE ACTION 834 INMAN VILLAGE PARKWAY ATLANTA, GA 30307 99-1790672 501(C)(4) 125,000. 0. ACTION, ADVOCACY COLORADANS CREATING OPPORTUNITIES FO BOX 100292 CIVIL RIGHTS, SOCIAL	CLIMATE EQUITY ACTION FUND							
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1402 THIRD AVE, SUITE 1200 SEATTLE, WA 98101 36-5016879 501(C)(4) 265,540. 0. ENVIRONMENTAL PROGRAM CLIMATE STRATEGIES LAB LLC 530 WALNUT ST, SUITE 200 CINCINNATI, OH 45202 87-1467403 110,000. 0. ENVIRONMENTAL PROGRAM COLLECTIVE RENAISSANCE ACTION 834 INMAN VILLAGE PARKWAY ATLANTA, GA 30307 99-1790672 501(C)(4) 125,000. 0. CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY COLORADANS CREATING OPPORTUNITIES PO BOX 100292 CIVIL RIGHTS, SOCIAL								
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SOURCINCATI, OH 45202 R7-1467403 110,000. COLLECTIVE RENAISSANCE ACTION 834 INMAN VILLAGE PARKWAY ATLANTA, GA 30307 P9-1790672 501(C)(4) COLORADANS CREATING OPPORTUNITIES PO BOX 100292 R7-1467403 110,000. 0. ENVIRONMENTAL PROGRAM CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY CIVIL RIGHTS, SOCIAL	SEATTLE, WA 98101	36-5016879	501(C)(4)	265,540.	0.			ENVIRONMENTAL PROGRAMS
SOURCINCATI, OH 45202 R7-1467403 110,000. COLLECTIVE RENAISSANCE ACTION 834 INMAN VILLAGE PARKWAY ATLANTA, GA 30307 P9-1790672 501(C)(4) COLORADANS CREATING OPPORTUNITIES PO BOX 100292 R7-1467403 110,000. 0. ENVIRONMENTAL PROGRAM CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY CIVIL RIGHTS, SOCIAL	OLIMATE OF AFFICE LAB LLO							
CINCINNATI, OH 45202 87-1467403 110,000. 0. ENVIRONMENTAL PROGRAM COLLECTIVE RENAISSANCE ACTION 834 INMAN VILLAGE PARKWAY ATLANTA, GA 30307 99-1790672 501(C)(4) 125,000. 0. CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY COLORADANS CREATING OPPORTUNITIES PO BOX 100292 CIVIL RIGHTS, SOCIAL								
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834 INMAN VILLAGE PARKWAY ATLANTA, GA 30307 99-1790672 501(C)(4) 125,000. 0. COLORADANS CREATING OPPORTUNITIES PO BOX 100292 CIVIL RIGHTS, SOCIAL	emermani, on 19202	0, 110,103		110,000.	•			ENVIRONIENTE PROGRAMA
ATLANTA, GA 30307 99-1790672 501(C)(4) 125,000. 0. ACTION, ADVOCACY COLORADANS CREATING OPPORTUNITIES PO BOX 100292 CIVIL RIGHTS, SOCIAL	COLLECTIVE RENAISSANCE ACTION							
COLORADANS CREATING OPPORTUNITIES PO BOX 100292 CIVIL RIGHTS, SOCIAL	834 INMAN VILLAGE PARKWAY							CIVIL RIGHTS, SOCIAL
PO BOX 100292 CIVIL RIGHTS, SOCIAL	ATLANTA, GA 30307	99-1790672	501(C)(4)	125,000.	0.			ACTION, ADVOCACY
PO BOX 100292 CIVIL RIGHTS, SOCIAL								
DENVER, CO 80250 47-2607588 527 75,000. 0. ACTION, ADVOCACY								1
	DENVER, CO 80250	47-2607588	527	75,000.	0.			ACTION, ADVOCACY
COLORADANS FOR ACCESSIBLE AND	COLODADANG FOR ACCESSIBLE AND							
SECURE ELECTIONS - 3137 FULTON CIVIL RIGHTS, SOCIAL								CIVIL RIGHTS SOCIAL
STREET - DENVER, CO 80238 93-4830592 501(C)(4) 100,000. 0. ACTION, ADVOCACY		93-4830592	501(C)(4)	100 000.	0.			

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(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 non-cash assistance	(h) Purpose of grant or assistance		
COLORADO COMMUNICATIONS NETWORK ACTION - PO BOX 101482 - DENVER, CO 80250	84-0836874	501(C)(4)	600,000.	0.			ENVIRONMENTAL PROGRAMS		
COLORADO ETHICS INSTITUTE 191 UNIVERSITY BLVD, SUITE 118 DENVER, CO 80206	84-4585348	501(C)(4)	600,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY		
COLORADO WAY FORWARD PO BOX 100912 DENVER, CO 80250	92-3861115	527	175,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY		
COMMITTEE ON STATES PO BOX 1607 RALEIGH, NC 27602	84-2558945	501(C)(4)	25,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY		
COMMITTEE TO PROTECT HEALTHCARE 440 BURROUGHS STREET, SUITE 158 DETROIT, MI 48202	82-0596008	501(C)(4)	40,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY		
COMMON CAUSE 805 15TH ST NW, SUITE 800 WASHINGTON, DC 20005	52-6078441	501(C)(4)	230,104.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY		
COMMUNITIES FOR A NEW CALIFORNIA 5445 MADISON AVENUE SACRAMENTO, CA 95841	27-2348747	501(C)(4)	100,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY		
CONGRESSIONAL INTEGRITY PROJECT 2020 PENNSYLVANIA AVENUE NW WASHINGTON, DC 20006	85-1339862	501(C)(4)	600,000.	0.			CAPACITY BUILDING		
CONSERVATION COLORADO 303 E 17TH STREET, SUITE 400 DENVER, CO 80203	30-0037131	501(C)(4)	10,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY		

	HIRTY FUN						26-4486735 Page 1
Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa I	rt II.)	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 non-cash assistance	(h) Purpose of grant or assistance
CONSERVATION VOTERS OF PENNSYLVANIA - PO BOX 2125 - PHILADELPHIA, PA 19103	27-0800179	501(C)(4)	59,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
CONSERVATION VOTERS OF SOUTH CAROLINA - 712 RICHLAND ST, SUITE A - COLUMBIA, SC 29201	58-2420153	501(C)(4)	1,000,000.	0.			ENVIRONMENTAL PROGRAMS
CONSERVATIVES FOR A CLEAN ENERGY FUTURE - 106 WEST ALLEGAN STREET, SUITE 200 - LANSING, MI 48933	82-5201195		376,000.	0.			ENVIRONMENTAL PROGRAMS
COUNTERSPARK INC 1801 PENNSYLVANIA AVE, SUITE 410 WASHINGTON, DC 20006	80-0373809		2,410,000.	0.			ENVIRONMENTAL PROGRAMS
COURIER NEWSROOM INC PO BOX 509 NEW YORK, NY 10032	83-4159180		260,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
DEEDS ACTION FUND 2318 SANTA ROSA ST AUSTIN, TX 78702	83-1985863	501(C)(4)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
DEFEND DEMOCRACY PROJECT INC 2340 POWELL ST, PMB 122 EMERYVILLE, CA 94608	99-2030172	501(C)(4)	200,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
DEFENDING DEMOCRACY TOGETHER 1100 VERMONT AVE NW, 10TH FLOOR WASHINGTON, DC 20005	82-3877328	501(C)(4)	300,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
DEMOCRACY PROGRAM INC 419 OAKDALE RD NE ATLANTA, GA 30307	93-2023848	501(C)(4)	62,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	_
(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 non-cash assistance	(h) Purpose of grant or assistance
DEMOCRACY SECURITY PROJECT ACTION							
FUND - 70 N STREET SE, APT 1012 -							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20003	99-1250209	501(C)(4)	400,000.	0.			ACTION, ADVOCACY
			, -				,
DEPLOYUS ACTION INC							
68 HARRISON AVENUE, STE 605							CIVIL RIGHTS, SOCIAL
BOSTON, MA 02111	99-3175854	501(C)(4)	75,000.	0.			ACTION, ADVOCACY
DIASPORA ALLIANCE INC							
77 SANDS ST							CIVIL RIGHTS, SOCIAL
BROOKLYN, NY 11201	99-2196698	501(C)(4)	25,000.	0.			ACTION, ADVOCACY
DIRT ROAD ORGANIZING							
76 MORANG COVE RD							CIVIL RIGHTS, SOCIAL
NOBLEBORO, ME 04555	87-4406692	501(C)(4)	53,000.	0.			ACTION, ADVOCACY
DOWN HOME NORTH CAROLINA							
2617 SPRINGWOOD DRIVE							CIVIL RIGHTS, SOCIAL
GREENSBORO, NC 27403	83-1236736	501(C)(4)	225,000.	0.			ACTION, ADVOCACY
CKILIND BOKO, NC 27403	03 1230730	301(0)(4)	223,000.	· ·			RETION, ADVOCACT
ECONOMIC SECURITY PROJECT ACTION							
INC - 51 EAST 12TH STREET, 2ND FL							CIVIL RIGHTS, SOCIAL
- NEW YORK, NY 10003	83-2050594	501(C)(4)	50,000.	0.			ACTION, ADVOCACY
ECONOMIC SECURITY PROJECT INC							
228 PARK AVE S, PMB 32482							
NEW YORK, NY 10003	85-3888872	501(C)(3)	15,000.	0.			CAPACITY BUILDING
EDUCATION LEADERS OF COLOR INC							
3680 WILSHIRE BLVD, SUITE P04-1052							YOUTH DEVELOPMENT AND
LOS ANGELES, CA 90010	81-2253548	501(C)(3)	44,362.	0.			EDUCATION
DI DOMPTHIANTION CONTINUE NO PROPERTIES							
ELECTRIFICATION COALITION ALLIANCE							
1111 19TH ST NW, SUITE 406	01 0027225	E01/G)/A)	160 000	_			ENTITE ON THE PROPERTY OF THE
WASHINGTON, DC 20036	01-0927325	DUI(C)(4)	160,000.	0.			ENVIRONMENTAL PROGRAMS

Part II Continuation of Grants and Other	Assistance to Don	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	r ago
(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 non-cash assistance	(h) Purpose of grant or assistance
EMGAGE ACTION INC 11555 HERON BAY BLVD, SUITE 200 LAKELAND, FL 33809	46-5499822	501(0)(4)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
EMPIRE STATE VOICES 228 PARK AVE SOUTH, PMB 49561							
NEW YORK, NY 10003	92-2925787	501(C)(4)	1,922,000.	0.			CAPACITY BUILDING
ENERGY ACTION FUND 301 BATTERY STREET, 5TH FLOOR SAN FRANCISCO, CA 94111	26-3390444	501(C)(4)	1,845,000.	0.			ENVIRONMENTAL PROGRAMS
ENVIRONMENT AMERICA 294 WASHINGTON STREET, SUITE 500 BOSTON, MA 02108	20-5355252	501(C)(4)	410,000.	0.			ENVIRONMENTAL PROGRAMS
ENVIRONMENTAL DEFENSE ACTION FUND 257 PARK AVENUE SOUTH NEW YORK, NY 10010	90-0080500	501(C)(4)	1,000,000.	0.			ENVIRONMENTAL PROGRAMS
EVERGREEN ACTION 1250 CONNECTICUT AVE NW, SUITE 700 WASHINGTON, DC 20036	86-1697158	501(C)(4)	635,000.	0.			ENVIRONMENTAL PROGRAMS
FAIR FUTURE NC 8 ST MARYS STREET, 4 RALEIGH, NC 27605	84-3038674	501(C)(4)	100,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
FAITH IN MINNESOTA 2356 UNIVERSITY AVE W, SUITE 405 ST. PAUL, MN 55114	82-2771968	501(C)(4)	125,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
FAMILY FORWARD ACTION 2324 SE GRANT ST PORTLAND, OR 97214	80-0697682	501(C)(4)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(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 non-cash assistance	(h) Purpose of grant or assistance
FARMERS EDUCATIONAL AND CO-OP							
UNION OF AMERICA - 117 WEST SPRING							CIVIL RIGHTS, SOCIAL
STREET - CHIPPEWA FALLS, WI 54729	39-0808571	501(C)(5)	20,000.	0.			ACTION, ADVOCACY
·							
FIGHT CORPORATE MONOPOLIES							
2001 PENNSYLVANIA AVE NW, SUITE 540							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20006	82-5097446	501(C)(4)	31,500.	0.			ACTION, ADVOCACY
ETHINGTH, GERVICES GENERAL DEP							
FINANCIAL SERVICES STAKEHOLDER ACTION NFP - 2513 N CENTRAL PARK							CTVII DICHMC COCINI
AVE - CHICAGO, IL 60647	82-1727600	501(C)(A)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
AVE CHICAGO, II 00047	02 1727000	501(0)(4)	30,000.	· ·			ACTION, ADVOCACT
FLORIDA ADVANCEMENT PROJECT INC							
25550 SW 152ND AVE							CIVIL RIGHTS, SOCIAL
HOMESTEAD, FL 33032	87-1719096	501(C)(4)	235,000.	0.			ACTION, ADVOCACY
FLORIDA RISING INC							
10800 BISCAYNE BLVD, SUITE 1050							CIVIL RIGHTS, SOCIAL
MIAMI, FL 33161	27-0167620	501(C)(4)	104,000.	0.			ACTION, ADVOCACY
ELODIDING DROWEGEING EDEEDON							
FLORIDIANS PROTECTING FREEDOM 6619 S DIXIE HWY, SUITE 148							CIVIL RIGHTS, SOCIAL
MIAMI, FL 33143	92-3603212	527	14,000,000.	0.			ACTION, ADVOCACY
MIAMI, FE 33143	92-3003212	527	14,000,000.	0.			ACTION, ADVOCACT
FOOD & WATER ACTION FUND							
1616 P ST NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20036	32-0160436	501(C)(4)	80,000.	0.			ACTION, ADVOCACY
FOR MICHIGAN							
4158 WASHTENAW AVE							CIVIL RIGHTS, SOCIAL
ANN ARBOR, MI 48108	37-2128145	501(C)(4)	100,000.	0.			ACTION, ADVOCACY
FORWARD ACTION FUND							
114 NORTH MAIN STREET, SUITE 201	93_1906909	501 (C) (A)	1 645 300	0.			CADACTON DITTIDING
CONCORD, NH 03301	83-1806898	DOT (C) (4)	1,645,388.	<u> </u>			CAPACITY BUILDING

Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	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 non-cash assistance	(h) Purpose of grant or assistance
FORWARD DENVER							
1444 STEEL ST							CIVIL RIGHTS, SOCIAL
DENVER, CO 80206	88-2391613	501(C)(4)	140,000.	0.			ACTION, ADVOCACY
FORWARD JUSTICE ACTION NETWORK							
1 COPLEY PARKWAY, SUITE 302							CIVIL RIGHTS, SOCIAL
MORRISVILLE, NC 27560	84-2032850	501(C)(4)	50,000.	0.			ACTION, ADVOCACY
FORWARD MICHIGAN							
PO BOX 1384							CIVIL RIGHTS, SOCIAL
EAST LANSING, MI 48826	88-2478807	501(C)(4)	25,000.	0.			ACTION, ADVOCACY
FORWARD MONTANA							
PO BOX 2817							CIVIL RIGHTS, SOCIAL
MISSOULA, MT 59806	13-4285849	501(C)(4)	100,000.	0.			ACTION, ADVOCACY
FREE PRESS ACTION FUND							
40 MAIN STREET, SUITE 301							
FLORENCE, MA 01062	04-3771598	501(C)(4)	60,000.	0.			ENVIRONMENTAL PROGRAMS
FREEDOM ACTION NOW INC							
2110 LUANN LN							CIVIL RIGHTS, SOCIAL
MADISON, WI 53713	84-3944949	501(C)(4)	50,000.	0.			ACTION, ADVOCACY
FRESH ENERGY							
408 SAINT PETER STREET, SUITE 350							CIVIL RIGHTS, SOCIAL
SAINT PAUL, MN 55102	41-1735501	501(C)(3)	60,000.	0.			ACTION, ADVOCACY
FUTURE FORWARD USA PAC							
611 PENNSYLVANIA AVE SE, SUITE 143							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20003	83-0791921	527	3,000,000.	0.			ACTION, ADVOCACY
FUTURE GEORGIA							
PO BOX 8211							CIVIL RIGHTS, SOCIAL
ATLANTA, GA 31106	87-4560489	501(C)(4)	25,000.	0.			ACTION, ADVOCACY

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Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	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 non-cash assistance	(h) Purpose of grant or assistance
GLPA LEAD 100 ORNDORD DR, #866 BRIGHTON, MI 49008	84-2895367	501(C)(4)	75,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
GRASSROOTS ORGANIZING WESTERN WISCONSIN INC - 2240 10TH AVE W - BALDWIN, WI 54002	92-3691508	501(C)(4)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
GREATER GREATER WASHINGTON INC 80 M STREET SE, SUITE 100 WASHINGTON, DC 20003	47-2738753	501(C)(4)	86,524.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
HEAT PUMP NATION 116 FRONT ST, PO BOX 642 LEWES, DE 19958	92-1721579	501(C)(4)	2,320,000.	0.			ENVIRONMENTAL PROGRAMS
HIP HOP CAUCUS ACTION FUND 529 14TH ST NW, SUITE 952 WASHINGTON, DC 20045	85-1100834	501(C)(4)	1,000,000.	0.			ENVIRONMENTAL PROGRAMS
HOMETOWN PROJECT INC PO BOX 281 TIVOLI, NY 12583	99-1115643	501(C)(4)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
HOUSE MAJORITY PAC 1032 15TH ST NW, SUITE 247 WASHINGTON, DC 20005	45-1672898	527	1,850,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
IDAHO VOICES FOR CHILDREN FOUNDATION INC - PO BOX 2842 - BOISE, ID 83701	82-0478703	501(C)(3)	110,740.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
ILLINOIS ENVIRONMENTAL COUNCIL GENERAL FUND - 520 E CAPITOL AVE - SPRINGFIELD, IL 62701	37-0989990	501(C)(4)	45,000.	0.			ENVIRONMENTAL PROGRAMS

Schedule I (Form 990) SIXTEEN TE							26-4486735 Page
Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	1
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IN UNION USA							
2010 MASSACHUSETTS AVE NW 2ND FLOOR							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20036	85-0817214	527	50,000.	0.			ACTION, ADVOCACY
WASHINGTON, DC 20030	05 0017214	327	30,000.	٠.			ACTION, ADVOCACT
IN UNION USA ACTION							
2010 MASSACHUSETTS AVE NW, 2ND FLOO							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20036	85-1983868	501(C)(4)	150,000.	0.			ACTION, ADVOCACY
							1011011, 1121001101
INNOVATION OHIO							
360 S 3RD ST, 3RD FLOOR							
COLUMBUS, OH 43215	27-4562062	501(C)(4)	50,000.	0.			CAPACITY BUILDING
302011202, 011 10220							
INSTITUTE FOR AMERICAS FUTURE INC							
1050 CONNECTICUT AVE NW, 65792							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20035	52-1971942	501(C)(3)	114,935.	0.			ACTION, ADVOCACY
INSTITUTE FOR RESPONSIVE	02 13/1312			•			1011011, 1121001101
GOVERNMENT ACTION INC - 1440 W							
TAYLOR ST, SUITE 950 - CHICAGO, IL							CIVIL RIGHTS, SOCIAL
60607	92-2635543	501(C)(4)	7,700,000.	0.			ACTION, ADVOCACY
INSTITUTE FOR RESPONSIVE	72 2000010	301(0)(1)	7,700,000.	•			inerion, increaser
GOVERNMENT INC - 1440 W TAYLOR							
STREET, SUITE 950 - CHICAGO, IL							CIVIL RIGHTS, SOCIAL
60607	93-2827813	501 (C) (3)	8,000,000.	0.			ACTION, ADVOCACY
	J3 Z0Z7013	301(0)(3)	0,000,000.	· ·			nerion, abvocaer
KANSAS COALITION FOR COMMON SENSE							
INC - 403 LAWRENCE AVE - LAWRENCE,							CIVIL RIGHTS, SOCIAL
KS 66049	92-3932253	501 (C) (A)	20,000.	0.			ACTION, ADVOCACY
KS 00049	92-3932233	501(0)(4)	20,000.	0.			ACTION, ADVOCACT
KEEP COUNTRY FIRST POLICY ACTION							
PO BOX 15070							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20003	86-2932695	501(C)(4)	25,000.	0.			ACTION, ADVOCACY
MADITINGTON, DC 20003	00-2332033	JU1(C)(4)	25,000.	0.			ACTION, ADVOCACI
LAND STEWARDSHIP ACTION FUND							
821 E 35TH ST, STE 200							CIVIL RIGHTS, SOCIAL
MINNEAPOLIS, MN 55407	82-4347114	501(C)(4)	25,000.	0.			ACTION, ADVOCACY
MINIMAL OUIS, MN 3340/	04 494/114	DU1(C)(1)	23,000.	<u> </u>		1	ESCITON, ADVOCACI

Schedule I (Form 990) SIXTEEN T							26-4486735 Page 1
Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa I	rt II.)	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 non-cash assistance	(h) Purpose of grant or assistance
LEADERS IGNITING TRANSFORMATION ACTION FUND INC - 132 W MINERAL ST - MILWAUKEE, WI 53204	82-3166802	501(C)(4)	50,000.	0.			ENVIRONMENTAL PROGRAMS
LEAGUE OF CONSERVATION VOTERS 740 15TH STREET NW, STE 700 WASHINGTON, DC 20005	52-1733698	501(C)(4)	11,796,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
LEAGUE OF WOMEN VOTERS OF NEW JERSEY - 204 WEST STATE ST - TRENTON, NJ 08608	22-1153223	501(C)(4)	33,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
LIVING UNITED FOR CHANGE IN ARIZONA - 5716 N 19TH AVE - PHOENIX, AZ 85015	27-1398645	501(C)(4)	100,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
LOCAL JOBS & ECONOMIC DEVELOPMENT FUND INC - 8 THE GREEN, SUITE B - DOVER, DE 19901	88-0876930	501(C)(4)	2,000,000.	0.			ENVIRONMENTAL PROGRAMS
LOUD LIGHT CIVIC ACTION INC PO BOX 4045 TOPEKA, KS 66604	85-1047024	501(C)(4)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
LUPE VOTES 1601 E US HIGHWAY 83 SAN JUAN, TX 78589	85-2786747	501(C)(4)	75,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MAINE DONOR ALLIANCE PO BOX 4766 PORTLAND, ME 04112	87-1386372	501(C)(4)	25,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MAINE PEOPLES ALLIANCE 565 CONGRESS ST, SUITE 200 PORTLAND, ME 04101	01-0383493	501(C)(4)	120,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	
(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 non-cash assistance	(h) Purpose of grant or assistance
MAINSTREAM COLORADO FUND 3700 QUEBEC ST, UNIT 100 DENVER, CO 80207	99-4304448	527	860,000.	0.			CIVIL RIGHTS, SOCIAL
MAKE THE ROAD ACTION INC 449 TROUTMAN STREET, SUITE C BROOKLYN, NY 11215	27-1408443	501(C)(4)	50,000.	0.			CAPACITY BUILDING
MEDIA MATTERS ACTION NETWORK 800 MAINE AVE SW, SUITE 500 WASHINGTON, DC 20024	77-0646754	501(C)(4)	750,000.	0.			CAPACITY BUILDING
MICHIGAN CIVIC ACTION FUND 28342 DARTMOUTH STREET MADISON HEIGHTS, MI 48071	82-3995979	501(C)(4)	150,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MICHIGAN LEAGUE OF CONSERVATION VOTERS - 340 BEAKES ST, SUITE 110 - ANN ARBOR, MI 48104	38-3481677	501(C)(4)	1,250,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MICHIGAN PEOPLES CAMPAIGN 2227 MEDFORD RD ANN ARBOR, MI 48104	46-4173944	501(C)(4)	100,000.	0.			CIVIL RIGHTS, SOCIAL
MISSOURI ORGANIZING AND VOTER ENGAGEMENT ACTION - 1530 S BIG BEND BLVD - ST LOUIS, MO 63117	82-1450617	501(C)(4)	125,000.	0.			CIVIL RIGHTS, SOCIAL
MISSOURIANS FOR CONSTITUTIONAL FREEDOM - PO BOX 2187 - ST LOUIS, MO 63158	92-2712562	501(C)(4)	4,500,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MISSOURIANS FOR HEALTHY FAMILIES AND FAIR WAGES - 2742 CHEROKEE STREET, UNIT A - ST LOUIS, MO 63118	92-3452773	501(C)(4)	2,950,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government	(2)	if applicable	cash grant	noncash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
MONTANA BUDGET AND POLICY CENTER							
15 WEST 6TH AVE, UNIT 3E							CIVIL RIGHTS, SOCIAL
HELENA, MT 59601	80-0624179	501(C)(3)	80,000.	0.			ACTION, ADVOCACY
MONTANA CONSERVATION VOTERS							
POLITICAL ACTION COMMITTEE - PO							CIVIL RIGHTS, SOCIAL
BOX 1812 - HELENA, MT 59624	81-0531919	527	12,000.	0.			ACTION, ADVOCACY
MONTANA RURAL VOTERS ACTION FUND							
PO BOX 414							CIVIL RIGHTS, SOCIAL
BILLINGS, MT 59103	81-1086593	527	12,000.	0.			ACTION, ADVOCACY
MONTANA SENIOR VOTE ACTION FUND							
PO BOX 1101				_			CIVIL RIGHTS, SOCIAL
HELENA, MT 59624	93-3857626	527	115,000.	0.			ACTION, ADVOCACY
MONTANANS FOR ELECTION REFORM							
ACTION FUND - PO BOX 315 - HELENA,							
MT 59624	93-2615711	501(C)(4)	100,000.	0.			ENVIRONMENTAL PROGRAM
			,				
MONTANANS SECURING REPRODUCTIVE							
RIGHTS - 44 N LAST CHANCE GULCH,							CIVIL RIGHTS, SOCIAL
SUITE 18 - HELENA, MT 59601	93-4612109	501(C)(4)	3,000,000.	0.			ACTION, ADVOCACY
MOVE INDIGO INC							
PO BOX 230648							CIVIL RIGHTS, SOCIAL
NEW YORK, NY 10023	92-2558179	527	59,150.	0.			ACTION, ADVOCACY
,			, ,				,
MOVEMENT STRATEGY CENTER ACTION							
FUND - 1625 CLAY STREET, 6TH FLOOR							CIVIL RIGHTS, SOCIAL
- OAKLAND, CA 94612	14-1996986	501(C)(4)	40,000.	0.			ACTION, ADVOCACY
MOVEON ORG CIVIC ACTION							
MOVEON.ORG CIVIC ACTION							CTVII DICUMO COCINI
1442 WALNUT ST, 538 BERKELEY, CA 94709	06-1553389	501/C)/A)	250,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
	1 00 10000			· ·		1	[, 11D VOCALCI

Assistance to Doi	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	t II.)	
(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 non-cash assistance	(h) Purpose of grant or assistance
						CIVIL RIGHTS, SOCIAL
99-4702697	527	25,000.	0.			ACTION, ADVOCACY
						CIVIL RIGHTS, SOCIAL
99-1058755	501(C)(4)	10,000.	0.			ACTION, ADVOCACY
93-4927169	501(C)(4)	350,000.	0.			ENVIRONMENTAL PROGRAMS
46-0639645	501(C)(4)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
						CIVIL RIGHTS, SOCIAL
84-2889172	501(C)(4)	450,000.	0.			ACTION, ADVOCACY
83-2976095	501(C)(4)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
02.0400000	501/57/47					CIVIL RIGHTS, SOCIAL
03-0402828	501(C)(4)	75,000.	0.			ACTION, ADVOCACY
93-3837578	527	80,000.	0.			ENVIRONMENTAL PROGRAMS
		,				CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
	(b) EIN 99-4702697 99-1058755 93-4927169 46-0639645 84-2889172 83-2976095 03-0402828	(b) EIN (c) IRC section	(b) EIN (c) IRC section if applicable (d) Amount of cash grant (2) 25,000. 99-4702697 527 25,000. 99-1058755 501(C)(4) 10,000. 93-4927169 501(C)(4) 350,000. 46-0639645 501(C)(4) 50,000. 84-2889172 501(C)(4) 450,000. 83-2976095 501(C)(4) 50,000.	(b) EIN (c) IRC section if applicable (d) Amount of cash grant (e) Amount of noncash assistance 99-4702697 527 25,000. 0. 99-1058755 501(C)(4) 10,000. 0. 93-4927169 501(C)(4) 350,000. 0. 46-0639645 501(C)(4) 50,000. 0. 84-2889172 501(C)(4) 450,000. 0. 83-2976095 501(C)(4) 50,000. 0. 03-0402828 501(C)(4) 75,000. 0. 93-3837578 527 80,000. 0.	(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) 99-4702697 527 25,000. 0. 93-4927169 501(c)(4) 10,000. 0. 46-0639645 501(c)(4) 50,000. 0. 84-2889172 501(c)(4) 450,000. 0. 83-2976095 501(c)(4) 50,000. 0. 93-3837578 527 80,000. 0.	1

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Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	1
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NEBRASKANS CONNECTING THE DOTS 3637 HOLDREGE ST LINCOLN, NE 68503	93-3165832	501(C)(4)	40,000.	0.			CIVIL RIGHTS, SOCIAL
NEIGHBORS FOR MORE NEIGHBORS 21 1ST AVE NE, APT 26 MINNEAPOLIS, MN 55413	92-1373657	501(C)(4)	73,250.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
NEIGHBORS WELCOME RHODE ISLAND 123 DYER STREET, UNIT 2B PROVIDENCE, RI 02903	92-3910432	501(C)(4)	58,760.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
NEO PHILANTHROPY INC 1001 AVENUE OF THE AMERICAS, 12TH F NEW YORK, NY 10018	13-3191113	501(C)(3)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
NEVADA ALLIANCE 6675 S TENAYA WAY, SUITE 200 LAS VEGAS, NV 89178	83-0744945	501(C)(4)	140,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
NEVADANS FOR REPRODUCTIVE FREEDOM PO BOX 15845 WASHINGTON, DC 20003	93-3301795	501(C)(4)	500,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
NEW AMERICA FOUNDATION 740 15TH STREET NW, SUITE 900 WASHINGTON, DC 20005	52-2096845	501(C)(3)	25,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
NEW DAY NEVADA INC 7991 HACKBERRY DRIVE LAS VEGAS, NV 89123	84-3203462	501(C)(4)	150,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
NEW ERA COLORADO ACTION FUND 789 SHERMAN ST, SUITE 460 DENVER, CO 80204	20-5392556	501(C)(4)	150,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
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NEW HAMPSHIRE PROGRESS ALLIANCE							
PO BOX 3866							CIVIL RIGHTS, SOCIAL
CONCORD, NH 03302	82-4281685	501(C)(4)	70,000.	0.			ACTION, ADVOCACY
			,				
NEW HAMPSHIRE YOUTH MOVEMENT							
PROJECT - 1 WASHINGTON STREET,							CIVIL RIGHTS, SOCIAL
SUITE 3123 - DOVER, NH 03820	84-1846306	501(C)(4)	77,500.	0.			ACTION, ADVOCACY
NEW DENNIQUE HANDA DECIDIO							
NEW PENNSYLVANIA PROJECT PO BOX 443							
WEST CHESTER, PA 19381	86-1900180	501 (C) (A)	75,000.	0.			ENVIRONMENTAL PROGRAMS
WEST CHESTER, FR 19301	80-1300180	301(0)(4)	73,000.	0.			ENVIRONMENTAL FROGRAMS
NEW RURAL PROJECT							
11035 GOLF LINKS DR, 77424							CIVIL RIGHTS, SOCIAL
CHARLOTTE, NC 28277	86-3220083	501(C)(4)	102,500.	0.			ACTION, ADVOCACY
·			,				·
NEW SECURITY ACTION							
1 THOMAS CIRCLE NW, SUITE 700							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20005	27-0819099	501(C)(4)	25,000.	0.			ACTION, ADVOCACY
NEW VENTURE FUND							
1828 L STREET NW, SUITE 300 A	00 5006345	F01/71/21	160 410				CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20036	20-5806345	501(C)(3)	162,418.	0.			ACTION, ADVOCACY
NEW YORK COMMUNITIES FOR CHANGE							
INC - 470 VANDERBILT AVE, 9TH FL -							
BROOKLYN, NY 11238	27-1359103	501(C)(4)	375,000.	0.			ENVIRONMENTAL PROGRAMS
,			, , , , , , , ,				
NEW YORK PUBLIC INTEREST RESEARCH							
GROUP FUND INC - 9 MURRAY STREET,							CIVIL RIGHTS, SOCIAL
LOWER LEVEL - NEW YORK, NY 10007	13-2876109	501(C)(3)	100,000.	0.			ACTION, ADVOCACY
NORTH CAROLINA A PHILIP RANDOLPH							
EDUCATIONAL FUND INC - 1408							
HILLSBOROUGH STREET - RALEIGH, NC							
27605	47-3555626	501(C)(4)	75,000.	0.			CAPACITY BUILDING

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	10 1100/33 Fa
(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 non-cash assistance	(h) Purpose of grant or assistance
NORTH FUND							
1828 L STREET NW, SUITE 300 F							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20036	83-4011547	501(C)(4)	6,800,000.	0.			ACTION, ADVOCACY
			' '				,
NORTH MAIN STREET FUND							
114 NORTH MAIN STREET, SUITE 201							CIVIL RIGHTS, SOCIAL
CONCORD, NH 03301	82-2861559	501(C)(3)	125,000.	0.			ACTION, ADVOCACY
NRDC ACTION FUND INC							
40 WEST 20TH STREET							
NEW YORK, NY 10011	13-3976062	501(C)(4)	2,293,000.	0.			ENVIRONMENTAL PROGRAMS
OUTO ODGINITATING GIMPLITAN							
OHIO ORGANIZING CAMPAIGN							CTITE DEGUME COCTA
25 E BOARDMAN ST, SUITE 428	06 2064180	501/61/41	50.000				CIVIL RIGHTS, SOCIAL
YOUNGSTOWN, OH 44503	26-3064170	501(C)(4)	50,000.	0.			ACTION, ADVOCACY
ONE FAIR WAGE ACTION INC							
175 VARICK ST							CIVIL RIGHTS, SOCIAL
NEW YORK, NY 10014	46-5249734	501(C)(4)	125,000.	0.			ACTION, ADVOCACY
NEW TORK, NI 10014	40 3243734	301(0)(4)	123,000.	· ·			nerion, abvocaer
OPEN DEMOCRACY PAC							
600 PENNSYLVANIA AVE SE, UNIT 15180							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20003	86-2772049	527	500,000.	0.			ACTION, ADVOCACY
,			,				,
OPPORTUNITY ARIZONA							
3821 N 15TH DRIVE							CIVIL RIGHTS, SOCIAL
PHOENIX, AZ 85015	84-3103154	501(C)(4)	60,000.	0.			ACTION, ADVOCACY
ORGANIZE ACTION INC							
PO BOX 125							CIVIL RIGHTS, SOCIAL
CLOVERDALE, CA 95425	87-3632574	501(C)(4)	329,785.	0.			ACTION, ADVOCACY
ORGANIZE PENNSYLVANIA							
1414 BRIGHTON RD							CIVIL RIGHTS, SOCIAL
PITTSBURGH, PA 15212	82-0714373	501(C)(4)	50,000.	0.			ACTION, ADVOCACY

Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	<u> </u>
(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 non-cash assistance	(h) Purpose of grant or assistance
ORGANIZERS IN THE LAND OF ENCHANTMENT - 411 BELLAMAH AVE NW - ALBUQUERQUE, NM 87102	27-1275724	501(C)(4)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
OUR VOICE OUR VOTE ARIZONA 1241 E WASHINGTON ST, SUITE 103 PHOENIX, AZ 85034	82-3222019	501(C)(4)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
PARENT VOICES ACTION 580 2ND STREET, SUITE 210 OAKLAND, CA 94607	84-4520320	501(C)(4)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
PARENTSTOGETHER ACTION 1629 K ST NW, SUITE 300 WASHINGTON, DC 20006	81-2699957	501(C)(4)	30,000.	0.			CAPACITY BUILDING
PARTNERSHIP PROJECT ACTION FUND PO BOX 65826 WASHINGTON, DC 20035	81-0606786	501(C)(4)	500,000.	0.			ENVIRONMENTAL PROGRAMS
PENNENVIRONMENT INC 1528 WALNUT STREET, SUITE 1400 PHILADELPHIA, PA 19102	02-0611111	501(C)(4)	250,000.	0.			ENVIRONMENTAL PROGRAMS
PENNSYLVANIA STANDS UP 15 N LIME ST LANCASTER, PA 17602	83-2880678	501(C)(4)	150,000.	0.			ENVIRONMENTAL PROGRAMS
PENNSYLVANIA UNITED 841 CALIFORNIA AVE, 3RD FLOOR PITTSBURGH, PA 15212	82-3674888	501(C)(4)	275,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
PEOPLES ACTION 1130 N MILWAUKEE AVE CHICAGO, IL 60642	26-2613701	501(C)(4)	250,000.	0.			ENVIRONMENTAL PROGRAMS

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(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 non-cash assistance	(h) Purpose of grant or assistance	
PEOPLES INDEPENDENT COMMISSION PO BOX 42307 PORTLAND, OR 97242	99-4748656	527	48,500.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	
PLANNED PARENTHOOD ACTION FUND INC 123 WILLIAM ST, 10TH FLOOR NEW YORK, NY 10038	13-3539048	501(C)(4)	4,050,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	
PLANNED PARENTHOOD VOTES 123 WILLIAM ST, 10TH FLOOR NEW YORK, NY 10038	13-4128897	527	200,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	
PROGRESS GEORGIA INC 245 N HIGHLAND AVENUE, SUITE 230-16 ATLANTA, GA 30307	85-2273152	501(C)(4)	100,000.	0.			ENVIRONMENTAL PROGRAMS	
PROGRESSNOW 614 N SEYMOUR AVE LANSING, MI 48933	20-8720230	501(C)(4)	804,363.	0.			CAPACITY BUILDING	
PROGRESSNOW ARIZONA 345 E PALM LANE PHOENIX, AZ 85004	83-3393572	501(C)(4)	100,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	
PROJECT 26 PENNSYLVANIA 1735 MARKET STREET, SUITE 125-412 PHILADELPHIA, PA 19103	99-1334504	501(C)(4)	100,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	
PROSPERITY MICHIGAN ACTION FUND 711 PROSPECT SAULT STE MARIE, MI 49783	85-2098057	527	150,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	
PUBLIC CITIZEN INC 1600 20TH STREET NW WASHINGTON, DC 20009	23-7104508	501(C)(4)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	

	THIRTY FUN						26-4486735 Page 1
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	
(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 non-cash assistance	(h) Purpose of grant or assistance
RAPID RESIST ACTION 2045 W GRAND AVE, SUITE B CHICAGO, IL 60612	82-2476207	501(C)(4)	190,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
RED WINE & BLUE 15830 S PARK BLVD SHAKER HEIGHTS, OH 44120	84-4355156	501(C)(4)	200,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
REGISTER AMERICA 200 MASSACHUSETTS AVE NW WASHINGTON, DC 20001	81-2163801	501(C)(4)	7,840,000.	0.			CIVIL RIGHTS, SOCIAL
REPRESENT GA ACTION NETWORK INC 3859 GREENBRIAR ROAD E MACON, GA 31204	84-2748018	501(C)(4)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
REPRODUCTIVE FREEDOM FOR ALL 1725 EYE STREET NW, SUITE 900 WASHINGTON, DC 20006	13-2630359	501(C)(4)	100,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
RETIRE CAREER POLITICIANS PO BOX 15845 WASHINGTON, DC 20003	99-2545096	527	2,000,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
RIGHTS AND DEMOCRACY PROJECT 70 SOUTH WINOOSKI AVE, UNIT 205 BURLINGTON, VT 05401	47-3746922	501(C)(4)	25,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
ROCKY MOUNTAIN VALUES 635 HILL AVENUE GRANT JUNCTION, CO 81501	84-1860320	501(C)(4)	245,000.	0.			ENVIRONMENTAL PROGRAMS
ROCKY MOUNTAIN VALUES PAC 4845 PEARL EAST CIR, SUITE 118 BOULDER, CO 80301	99-1474853	527	600,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY Schedule I (Form 990)

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(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 non-cash assistance	(h) Purpose of grant or assistance
ROOSEVELT FORWARD INC							
570 LEXINGTON AVE, 5TH FL							CIVIL RIGHTS, SOCIAL
NEW YORK, NY 10022	84-2486795	501(C)(4)	20,000.	0.			ACTION, ADVOCACY
RUN AAPI							
1629 K ST NW, SUITE 300							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20006	85-3272791	501(C)(4)	50,000.	0.			ACTION, ADVOCACY
,			,				,
RURAL ARIZONA ACTION							
345 W CENTRAL AVE, STE 4							CIVIL RIGHTS, SOCIAL
COOLIDGE, AZ 85128	83-4660479	501(C)(4)	125,000.	0.			ACTION, ADVOCACY
RURAL GROUND GAME							
676 MELROSE ROAD							CIVIL RIGHTS, SOCIAL
HARRISONBURG, VA 22802	84-4651295	527	85,000.	0.			ACTION, ADVOCACY
RURAL URBAN BRIDGE INITIATIVE							
190 E MAIN ST, SUITE D							
ABINGDON, VA 24210	87-3370162	501(C)(4)	50,000.	0.			ENVIRONMENTAL PROGRAMS
DUDAL ODGANIZING ODG							
RURALORGANIZING.ORG 191 CLINTON ST							CIVIL RIGHTS, SOCIAL
COLUMBUS, OH 43202	82-5040665	501(C)(4)	225,000.	0.			ACTION, ADVOCACY
<u> </u>	02 3010003	301(0)(1)	223,000.	•			nerrow, neverter
SECURE DEMOCRACY USA							
611 PENNSYLVANIA AVENUE, SUITE 211							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20003	87-3854090	501(C)(4)	500,000.	0.			ACTION, ADVOCACY
SECURE ELECTIONS PROJECT							
130 NEILL AVE, SUITE H							CIVIL RIGHTS, SOCIAL
HELENA, MT 59601	83-3296530	501(C)(4)	100,000.	0.			ACTION, ADVOCACY
SECURING AMERICAS FUTURE ENERGY							
ALLIANCE - 1111 19TH ST NW, SUITE							CIVIL RIGHTS, SOCIAL
406 - WASHINGTON, DC 20036	20-1728102	501(C)(4)	477,000.	0.			ACTION, ADVOCACY

Part II Continuation of Grants and Other A	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(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 non-cash assistance	(h) Purpose of grant or assistance		
SHELTER WF INC 937 KALISPELL AVENUE WHITEFISH, MT 59937	88-1744351	501(C)(4)	62,500.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY		
SHOWING UP FOR RACIAL JUSTICE INC PO BOX 1376 BUFFALO, NY 14205	81-2081153	501(C)(4)	26,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY		
SIEMBRA NC 801 NEW GARDEN RD GREENSBORO, NC 27410	87-2256899	501(C)(4)	160,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY		
SIERRA CLUB 2101 WEBSTER STREET, SUITE 1300 OAKLAND, CA 94612	94-1153307	501(C)(4)	3,840,000.	0.			ENVIRONMENTAL PROGRAMS		
SMP 1032 15TH STREET NW, SUITE 247 WASHINGTON, DC 20005	27-2896127	527	1,250,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY		
SOCIAL GOOD FUND 12651 SAN PABLO AVE, UNIT 5473 RICHMOND, CA 94805	46-1323531	501(C)(3)	7,500.	0.			CAPACITY BUILDING		
SOLAR UNITED NEIGHBORS ACTION 1350 CONNECTICUT AVE NW, SUITE 412 WASHINGTON, DC 20036	86-2788934	501(C)(4)	245,000.	0.			CAPACITY BUILDING		
SOMOS PAC 1032 15TH ST NW, SUITE 247 WASHINGTON, DC 20005	84-3253759	527	250,000.	0.			ENVIRONMENTAL PROGRAMS		
SOUTHWEST BLUEPRINT 401 W BASELINE RD, SUITE 205 TEMPE, AZ 85282	93-2302590	501(C)(4)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY		

Schedule I (Form 990) SIXTEEN T							26-4486735 Page
Part II Continuation of Grants and Other	Assistance to Doi	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	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 non-cash assistance	(h) Purpose of grant or assistance
STATE DEMOCRACY ACTION FUND 1225 I STREET NW, SUITE 1250 WASHINGTON, DC 20005	81-4100201	501(C)(4)	250,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
STATE POWER ACTION FUND 425 CHERRY ST, 2ND FLOOR KENT, OH 44240	85-4015096	501(C)(4)	315,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
STOP PREDATORY LENDING NV 6675 S TENAYA WAY, SUITE 200 LAS VEGAS, NV 89113	93-4879342		130,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
STRAIGHT TALK POLITICS PAC PO BOX 612286 SAN JOSE, CA 95161	85-0599495	527	450,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
TAKEACTION MINNESOTA 705 RAYMOND AVE, SUITE 100 ST PAUL, MN 55114	20-3338691	501(C)(4)	365,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
TEXAS BLUE ACTION FUND PO BOX 41424 AUSTIN, TX 78704	86-3279257	501(C)(4)	100,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
THE ALASKA CENTER 808 E STREET, SUITE 100 ANCHORAGE, AK 99501	92-0090065	501(C)(4)	75,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
THE ARIZONA STUDENTS ASSOCIATION PO BOX 67955 PHOENIX, AZ 85082	86-0893801	501(C)(4)	85,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
THE CENTER FOR EMPOWERED POLITICS 1042 GRANT AVE, 5TH FLOOR SAN FRANCISCO, CA 94133	45-3084134	501(C)(4)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

	THIRTY FUN						26-4486735 Page
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	rt II.)	T
(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 non-cash assistance	(h) Purpose of grant or assistance
THE EQUITY ALLIANCE FUND							
PO BOX 280214							CIVIL RIGHTS, SOCIAL
NASHVILLE, TN 37228	82-5090772	501(C)(4)	100,000.	0.			ACTION, ADVOCACY
THE FAIRNESS PROJECT							
2300 18TH ST NW, LOBBY 21337							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20009	37-1779557	501(C)(4)	1,225,000.	0.			ACTION, ADVOCACY
THE HOPEWELL FUND							
1828 L STREET NW, SUITE 300 D							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20036	47-3681860	501(C)(3)	1,395,000.	0.			ACTION, ADVOCACY
	1, 5552555		2,020,000.	9.			1012011, 1121001101
THE PIPELINE FUND							
811 E WASHINGTON AVE, SUITE 400							CIVIL RIGHTS, SOCIAL
MADISON, WI 53703	93-4230127	501(C)(4)	2,262,575.	0.			ACTION, ADVOCACY
THE VOTER PROJECT							
121 S BROAD ST, SUITE 400							CIVIL RIGHTS, SOCIAL
PHILADELPHIA, PA 19107	85-0556933	501(C)(4)	200,000.	0.			ACTION, ADVOCACY
			,	-			,
THE WISCONSIN INITIATIVE INC							
420 W DAYTON STREET, APT 204							CIVIL RIGHTS, SOCIAL
MADISON, WI 53703	87-1540257	501(C)(4)	820,000.	0.			ACTION, ADVOCACY
TIDES ADVOCACY							
1014 TORNEY AVE							
SAN FRANCISCO, CA 94129	94-3153687	501(C)(4)	640,000.	0.			ENVIRONMENTAL PROGRAMS
,			,				
TIRRC VOTES							
3310 EZELL RD							CIVIL RIGHTS, SOCIAL
NASHVILLE, TN 37211	82-5038040	501(C)(4)	100,000.	0.			ACTION, ADVOCACY
TOGETHER FOR OHIO'S FUTURE							
545 E TOWN ST							CIVIL RIGHTS, SOCIAL
COLUMBUS, OH 43215	88-3700688	527	25,000.	0.			ACTION, ADVOCACY

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(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 non-cash assistance	(h) Purpose of grant or assistance	
UNITED TRIBES OF BRISTOL BAY 304 MAIN ST, PO BOX 1252 DILLINGHAM, AK 99576	30-0785358		30,000.	0.			ENVIRONMENTAL PROGRAMS	
UNRIG OUR ECONOMY INC 300 DELAWARE AVE, SUITE 210 WILMINGTON, DE 19801	88-1164058	501(C)(4)	5,103,446.	0.			CAPACITY BUILDING	
URBAN PHOENIX PROJECT NETWORK 106 WEST OSBORN ROAD, SUITE 1142 PHOENIX, AZ 85013	83-2098077	501(C)(4)	54,200.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	
URBAN SUSTAINABILITY DIRECTORS NETWORK - 500 WESTOVER DR, SUITE 14973 - SANFORD, NC 27330	82-5015863	501(C)(3)	150,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	
UTAH DONOR COLLABORATIVE 225 S 200 E, SUITE 350 SALT LAKE CITY, UT 84111	88-2424825	501(C)(4)	42,500.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	
UTAHNS FOR RESPONSIVE GOVERNMENT 159 W BROADWAY, UNIT 200 SALT LAKE CITY, UT 84101	82-1030846	501(C)(4)	25,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	
UTILITY ACTION ALLIANCE PO BOX 21961 SEATTLE, WA 98111	92-3593096	501(C)(4)	1,000,000.	0.			ENVIRONMENTAL PROGRAMS	
VIRGINIA NEW MAJORITY 3801 MT VERNON AVE ALEXANDRIA, VA 22304	26-1377619	501(C)(4)	100,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	
VOTE TRIPLING ACTION FUND PO BOX 15845 WASHINGTON, DC 20003	84-3996441	501(C)(4)	772,500.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	

Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(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 non-cash assistance	(h) Purpose of grant or assistance
VOTER REGISTRATION PROJECT 200 MASSACHUSETTS AVE NW, SUITE 700 WASHINGTON, DC 20001	26-4802468	501(C)(3)	645,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
VOTES IDAHO PO BOX 876 BOISE, ID 83704	46-5415188	501(C)(4)	163,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
WABANAKI ALLIANCE 84 MARGINAL WAY, SUITE 600 PORTLAND, ME 04101	85-1408286	501(C)(4)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
WALK BIKE NASHVILLE INC 1 SOUTH 7TH STREET NASHVILLE, TN 37206	62-1792034	501(C)(3)	30,000.	0.			ENVIRONMENTAL PROGRAMS
WALNUT WAY CONSERVATION CORPORATION - 2240 N 17TH STREET - MILWAUKEE, WI 53205	39-2007850	501(C)(3)	250,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
WE ACT 4 CHANGE INC 1854 AMSTERDAM AVE, 2ND FLOOR NEW YORK, NY 10031	85-2851625	501(C)(4)	2,000,000.	0.			ENVIRONMENTAL PROGRAMS
WE THE PEOPLE ACTION FUND 440 BURROUGHS ST, SUITE 174 DETROIT, MI 48202	84-3528071	501(C)(4)	475,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
WELCOMING NEIGHBORS NETWORK 1319 F ST NW, SUITE 301 WASHINGTON, DC 20004	99-4813080	501(C)(4)	600,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
WEST VIRGINIA ENVIRONMENTAL COUNCIL - PO BOX 1007 - CHARLESTON, WV 25324	55-0728622	501(C)(4)	39,000.	0.			ENVIRONMENTAL PROGRAMS

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(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 non-cash assistance	(h) Purpose of grant or assistance	
WESTERN CONSERVATION ACTION 1675 LARIMER STREET, SUITE 420 DENVER, CO 80202	20-8091495	501(C)(4)	4,225,000.	0.			ENVIRONMENTAL PROGRAMS	
WESTERN FUTURES FUND INC 30 N GOULD ST SHERIDAN, WY 82801	87-3907363	501(C)(4)	2,750,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	
WESTERN NATIVE VOICE INC 80 25TH ST WEST BILLINGS, MT 59102	88-3015226	501(C)(4)	300,000.	0.			ENVIRONMENTAL PROGRAMS	
WESTERN ORGANIZATION OF RESOURCE COUNCILS - 220 S 27TH STREET, SUITE B - BILLINGS, MT 59101	45-0356819	501(C)(4)	450,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	
WILD MONTANA ACTION FUND 80 S WARREN ST HELENA, MT 59601	84-3554059	501(C)(4)	53,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	
WILD MONTANA VOTER FUND PO BOX 6371 HELENA, MT 59604	88-1271887	527	5,700.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	
WIN MINNESOTA 1600 UNIVERSITY AVE W, SUITE 309 ST PAUL, MN 55104	74-3238362	501(C)(4)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	
WISCONSIN PUBLIC EDUCATION ACTION FUND INC - 5329 FAYETTE AVE - MADISON, WI 53713	87-3954281	501(C)(4)	75,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	
WORKING FAMILIES ORGANIZATION 77 SANDS ST, 6TH FLOOR BROOKLYN, NY 11201	20-4994004	501(C)(4)	425,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	

chedule I (Form 990) SIXTEEN Part II Continuation of Grants and Other	THIRTY FUN		and Domestic Go	vernments (Sche	edule I (Form 990) Pa		26-4486735 Pa
(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 non-cash assistance	(h) Purpose of grant or assistance
WORKING MONTANA PAC 210 EAST LYNDALE AVE							CIVIL RIGHTS, SOCIAL
HELENA, MT 59601	46-0630315	527	17,700.	0.			ACTION, ADVOCACY
WORKING MONTANANS 1925 GRAND AVENUE, SUITE 129							
BILLINGS, MT 59102	93-3520430	501(C)(4)	75,000.	0.			ENVIRONMENTAL PROGRAMS
WORLD RESOURCES INSTITUTE 10 G ST NE, SUITE 800 WASHINGTON, DC 20002	52-1257057	501(C)(3)	250,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
WOVEN ACTION INC 1050 QUEEN STREET, SUITE 100 HONOLULU, HI 96814	99-2988532	501(C)(4)	215,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
YOUR COMMUNITY PAC 2810 N CHURCH ST, BOX 35422 WILMINGTON, DE 19802	93-4865071	527	6,695,000.	0.			CAPACITY BUILDING
YOUR NEBRASKA 7601 PACIFIC STREET							CIVIL RIGHTS, SOCIAL
OMAHA, NE 68114	99-0749161	501(C)(4)	135,000.	0.			ACTION, ADVOCACY

Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	. Complete if the	organization answe	ered "Yes" on Form 9	90, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	Iditional information.	
PART I, LINE 2:					
SIXTEEN THIRTY FUND GENERALLY REQU					
THE PURPOSE FOR THE USE OF FUNDS.				THE REVIEW	
AND EVALUATION OF THE APPLICATION, REQUIREMENTS. INTERIM AND FINAL R				DM EIINDC	
REQUIREMENTS. INTERIM AND FINAL RIWERE USED FOR THE SPECIFIED PURPOSI		15 REQUIRE	ED TO CONFI.	KM FUNDS	
WERE OBED FOR THE BRECIFIED FORFOR	<u>.</u>				

SCHEDULE J (Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Name of the organization

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

SIXTEEN THIRTY FUND

 $Employer\ identification\ number\\26-4486735$

Pa	art I 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 X 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	Х	<u> </u>
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	Х	<u> </u>
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 X Approval by the board or compensation committee			
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:			77
а	Receive a severance payment or change-of-control payment?	<u>4a</u>		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С		4c		<u> </u>
	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			
3	contingent on the revenues of:			
•		5a		x
b		5b		X
J	Any related organization? If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
Ŭ	contingent on the net earnings of:			
а	The organization?	6a		х
	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7	Х	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		_X_
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) (Rev. 12-2024)

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

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

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

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) AMY KURTZ	(i)	174,750.	52,000.	24,750.	11,210.	16,460.	279,170.	0.
PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) RYAN JOHNSON	(i)	210,000.	0.	0.	12,338.	9,798.	232,136.	0.
PROJECT DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) AMY STEINHOFF	(i)	185,900.	0.	900.	11,154.	23,347.	221,301.	0.
CAMPAIGNS DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) PATRICIA KUPFER	(i)	178,007.	0.	900.	11,154.	26,028.	216,089.	0.
CAMPAIGNS DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) CARL WALZ	(i)	164,601.	0.	9,267.	5,750.	29,575.	209,193.	0.
CAMPAIGNS DIRECTOR (THROUGH 12/2/24)	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. PART I, LINE 1A:
THE ORGANIZATION MAY PROVIDE \$75 PER MONTH FOR FITNESS RELATED COSTS, WHICH
MAY INCLUDE CLUB FEES. THE AMOUNTS WERE CONSIDERED TAXABLE COMPENSATION TO
THE EMPLOYEES.
PART I, LINE 7:
THE ORGANIZATION PROVIDED BONUSES TO CERTAIN EMPLOYEES, WHICH WOULD BE
CONSIDERED A "NON-FIXED PAYMENT". BONUSES PAID BY THE ORGANIZATION ARE (IN
GENERAL) NOT SPECIFIED BY A FIXED FORMULA IN EMPLOYMENT CONTRACTS AND
DETERMINED (IN PART) WITH DISCRETION IN DETERMINING THE AMOUNT OF BONUS OR
WHETHER TO MAKE A BONUS PAYMENT.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2024

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

Employer identification number

	SIXTEEN THIR	TY FUN.	ט			26-4	400	/35	
Pa	rt I Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1	g	(d) Method of de noncash contribu	termin		s
1	Art - Works of art								
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	Х	1	2,043,443	. FA	R MARKET	VA	LUE	
10	Securities - Closely held stock		_		Ť				
11	Securities - Partnership, LLC, or								
•••	- · · · · · · · · · · · · · · · · · · ·								
12	trust interests Securities - Miscellaneous								
13	Qualified conservation contribution -								
13									
44	Historic structures Qualified conservation contribution - Other								
14	***								
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 ()								
26	Other ()								
27	Other ()								
28	Other ()								
29	Number of Forms 8283 received by the organiz	zation during	the tax year for co	ontributions					
	for which the organization completed Form 828	33, Part V, D	onee Acknowledg	ement 29				0	
								Yes	No
30a	During the year, did the organization receive by	/ contributio	n any property rep	orted on Part I, lines 1 thr	ough 28	, that it			
	must hold for at least 3 years from the date of	the initial co	ntribution, and whi	ch isn't required to be use	ed for				
	exempt purposes for the entire holding period?)					30a		X
b	If "Yes," describe the arrangement in Part II.								
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 X								
	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash								
	contributions?						32a		Х
h	If "Yes," describe in Part II.								
33	If the organization didn't report an amount in c	olumn (c) foi	a type of property	for which column (a) is ch	necked				
	describe in Part II.		, po o. p. oport)	(a) 10 of					

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

Schedule M (Form 990) 2024

Part II	Supplemental is reporting in Part this part for any ac	I, column (b)	, the number (the information	tion requi	red by Part number of i	I, lines 30k items recei	o, 32b, and ved, or a c	d 33, and vo	whether the on of both. A	organization
SCHEDIII	LE M, PART	T COI	LUMN (B	١.							
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	SEPARATE									CHEDULE	
PART I		B).	KATHEK	TIIM	BACII	DIIAKE	RECE.	L V LD /	III D	,11100111	э м,
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SCHEDULE O (Form 990)

(Rev. December 2024)
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 Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

SIXTEEN THIRTY FUND

Employer identification number 26-4486735

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
PROVIDING OPERATIONAL SUPPORT TO CHANGEMAKERS COMMITTED TO TACKLING
SOCIETY'S BIGGEST SOCIAL CHALLENGES.

FORM 990 PARTLINE 1, DESCRIPTION OF ORGANIZATION MISSION: III THE SIXTEEN THIRTY FUND BELIEVES IN THE POWER OF NEW IDEAS, CREATIVE AND EMERGING LEADERS TO ACHIEVE MEANINGFUL AND LASTING TO THE MOST PRESSING CHALLENGES OF OUR TIME FROM SOLUTIONS ADVANCING EOUITY AND RACIAL JUSTICE, TO PROMOTING ACCESS TO AFFORDABLE HEALTH CONFRONTING CLIMATE CHANGE, TO STRENGTHENING OUR DEMOCRACY. TO WE HELP CHANGEMAKERS MAXIMIZE THEIR IMPACT BY PROVIDING OPERATIONAL SUPPORT WHILE ALLOWING THEM TO FOCUS ON ADVANCING THEIR CORE MISSIONS.

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

EXPENSES \$ 1,792,010. INCLUDING GRANTS OF \$ 1,522,836. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 3:

SIXTEEN THIRTY FUND CONTRACTED WITH ARABELLA **ADVISORS PROFESSIONAL** SERVICES FIRM THAT SUPPORTS PHILANTHROPISTS, IMPACT INVESTORS, AND NONPROFIT ORGANIZATIONS, TO PROVIDE BUSINESS AND ADMINISTRATIVE SERVICES UNDER AN ADMINISTRATIVE AGREEMENT. IN THAT CAPACITY, ARABELLA SUPPLIES THE SYSTEMS AND SERVICES TO ENSURE COMPLIANCE WITH FEDERAL, STATE AND LOCAL REGULATIONS RELATED TO CHARITABLE SOLICITATION AND PROVIDES HR COMPLIANCE SUPPORT AND OTHER ADMINISTRATIVE FUNCTIONS FOR SIXTEEN PAYROLL, THIRTY THEREBY ENABLING SIXTEEN THIRTY FUND TO BETTER FURTHER ITS FUND, MISSION AND ACHIEVE IMPACT.

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

UPON RECEIPT OF THE COMPLETED FORM 990 FROM SIXTEEN THIRTY FUND'S THE ORGANIZATION'S MANAGEMENT AND LEGAL COUNSEL INDEPENDENT TAXACCOUNTANT, DRAFT OF THEFORM; ADJUSTMENTS ARE MADE, AS NECESSARY THE REVIEWS A THE BOARD ORGANIZATION THEN SENDS THE COMPLETED FORM 990 TO ALL MEMBERS OF UPON ADDRESSING ALL COMMENTS OF DIRECTORS FOR REVIEW AND COMMENT AND, WITH THE INTERNAL REVENUE SERVICE. 990 IS FILED

2A FORM 990, FORM 990 PART V LINE PARTVII SECTION A: NEW VENTURE FUND (AN UNAFFILIATED ORGANIZATION EXEMPT FROM TAX UNDER 501(C)(3)) SECTION IS PAYROLL REPORTING AGENT FOR SIXTEEN THIRTY IRS COMMON PAYMASTER RULES. UNDER THE ARRANGEMENT FUND UNDER THE SIXTEEN THIRTY FUND REIMBURSES NEW VENTURE FUND FOR ITS ALLOCATED SHARE SALARIES AND BENEFITS OF NEW VENTURE FUND**EMPLOYEES** ADDITIONALLY, AND DIRECTLY SIXTEEN THIRTY FUND IS THE PRIMARY PAYROLL REPORTING AGENT ORGANIZATION'S DEDICATED PAID SALARIES AND BENEFITS FOR THE FULLEMPLOYEES.

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

ALL BOARD MEMBERS ARE REQUIRED ANNUALLY TO DISCLOSE ANY CONFLICTS INTEREST. POLICY IS MONITORED AT THE BOARD LEVEL. COVERED INDIVIDUALS THETHE BOARD WHEN THEY HAVE CANNOT VOTE MATTERS BEFORE Α CONFLICT INTHE MATTER DISINTERESTED MEMBERS MUST DETERMINE WHETHER OR TOMTHERE ARE

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

Schedule O (Form 990) (Rev. 12-2024)

LHA 432211 01-15-25

Schedule O (Form 990) 2024 Page 2 Name of the organization **Employer identification number** SIXTEEN THIRTY FUND 26-4486735 SUITABLE ALTERNATIVES TO POTENTIAL TRANSACTIONS THAT CAUSE CONFLICT. IF A COVERED PERSON IS FOUND IN VIOLATION OF THIS POLICY, IT MAY BE CAUSE FOR REMOVAL FROM THE BOARD OF DIRECTORS. FORM 990, PART VI, SECTION B, LINE 15A: COMPENSATION FOR SIXTEEN THIRTY FUND'S PRESIDENT IS REVIEWED BY THE BOARD OF DIRECTORS, WHICH UTILIZES COMPARABILITY DATA TO SUBSTANTIATE THE REASONABLENESS OF THE COMPENSATION PACKAGE. FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL, AR, CA, FL, GA, HI, IL, KS, KY, MA, MD, MN, MS, NC, ND, NH, NJ, NM, NY, OR, PA, RI, SC, TN, UT VA,WI,WV FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC. FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: RETURN OF PRIOR YEAR GRANT EXPENSE 2,800,000. LOSS ON GRANT FUNDS -2,175,000.TOTAL TO FORM 990, PART XI, LINE 9 625,000.