Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

2021

Open to Public Inspection

A For the 2021 calendar year, or tax year beginning 01-01-2021 , and ending 12-31-2021

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

C Name of organization
FWDUS INC

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) | Room/suite
PO BOX 34506

City or town, state or province, country, and ZIP or foreign postal code
WASHINGTON, DC 20043

D Employer identification number
46-2223015

E Telephone number
(202) 424-0675

G Gross receipts $ 65,150,482

F Name and address of principal officer:
TODD SCHULTE
PO BOX 34506
WASHINGTON,DC 20043

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

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. See instructions.

H(c) Group exemption number ▶

I Tax-exempt status: ☐ 501(c)(3) ☑ 501(c) (4) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.FWD.US

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

L Year of formation: 2013

M State of legal domicile: DE

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
FWD.US, INC. ORGANIZES CONSTITUENCIES AROUND THE COUNTRY TO SUPPORT POLICY CHANGES THAT CREATE OPPORTUNITY AND UNLOCK AMERICA'S POTENTIAL THROUGH COMPREHENSIVE IMMIGRATION REFORM AND CRIMINAL JUSTICE REFORM.

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	**3**	5
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	3
5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	**5**	108
6	Total number of volunteers (estimate if necessary)	**6**	2
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	0
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	**7b**	0

			Prior Year	Current Year
Revenue	**8**	Contributions and grants (Part VIII, line 1h)	24,718,930	64,733,495
	9	Program service revenue (Part VIII, line 2g)	218,192	399,146
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	25,981	17,841
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	24,963,103	65,150,482
Expenses	**13**	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	6,904,373	7,554,894
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	7,275,809	8,590,810
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	105,000	138,000
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶239,223		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	10,984,846	20,219,216
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	25,270,028	36,502,920
	19	Revenue less expenses. Subtract line 18 from line 12	-306,925	28,647,562

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	**20**	Total assets (Part X, line 16)	26,057,638	54,494,409
	21	Total liabilities (Part X, line 26)	2,606,149	2,284,750
	22	Net assets or fund balances. Subtract line 21 from line 20	23,451,489	52,209,659

Part II Signature Block

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

Sign Here

▶ Signature of officer — Date 2022-11-15

▶ TODD SCHULTE PRESIDENT
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
		2022-11-15		P00635175

Firm's name ▶ CLIFTONLARSONALLEN LLP — Firm's EIN ▶ 41-0746749

Firm's address ▶ 901 NORTH GLEBE ROAD SUITE 200
ARLINGTON, VA 22203 — Phone no. (571) 227-9500

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

FWD.US, INC. ORGANIZES CONSTITUENCIES AROUND THE COUNTRY TO SUPPORT POLICY CHANGES THAT CREATE OPPORTUNITY AND UNLOCK AMERICA'S POTENTIAL THROUGH COMPREHENSIVE IMMIGRATION REFORM AND CRIMINAL JUSTICE REFORM.

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

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☑ 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 $ 33,062,128 including grants of $ 7,554,894) (Revenue $ 399,146)

FWD.US, INC. BUILT A GRASSROOTS MOBILIZATION THAT CONNECTS HUNDREDS OF THOUSANDS OF AMERICANS THROUGH A TECHNOLOGY-BASED CAMPAIGN IN SUPPORT OF IMMIGRATION REFORM, AND IN SUPPORT FOR FIXING OUR BROKEN CRIMINAL JUSTICE SYSTEM THROUGH POLICY CHANGE AT THE STATE, FEDERAL, AND LOCAL LEVEL. THIS INCLUDED FACE-TO-FACE EVENTS, ON-LINE COMMUNICATIONS, EARNED MEDIA, PAID MEDIA AND COALITION BUILDING. IN ADDITION, FWD.US, INC. DEVELOPED ON-LINE TECHNOLOGY TO IMPROVE ITS COMMUNICATIONS, ITS PARTICIPANT'S COMMUNICATIONS WITH EACH OTHER, AND THE EFFECTIVENESS OF FWD.US, INC.'S GRASSROOTS MOBILIZATION.

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

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

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

(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses** ▶ 33,062,128

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		No
2	Is the organization required to complete *Schedule B, Schedule of Contributors*? See instructions.	2	Yes	
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		No
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		No
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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D,* Part III	8		No
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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? *If "Yes," complete Schedule D, Part V*	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D,* Part VI.	11a	Yes	
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		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		No
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		No
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		No
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		No
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	Yes	
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		No
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		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	

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		No
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	Yes	
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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L,* Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L,* Part I	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		No
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		No
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):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		No
c	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		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		No
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		
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		No
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	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	84		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	

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

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** 108			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	**2b**	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year? . . .	**3a**		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O* . . .	**3b**		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	**4a**		No
b	If "Yes," enter the name of the foreign country: ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .	**5a**		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	**5b**		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	**5c**		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . .	**6a**	Yes	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	**6b**	Yes	
7	**Organizations that may receive deductible contributions under section 170(c).**			
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	**7a**		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	**7b**		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	**7c**		
d	If "Yes," indicate the number of Forms 8282 filed during the year **7d**			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	**7e**		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	**7f**		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	**7g**		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization 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.**			
a	Did the sponsoring organization make any taxable distributions under section 4966?	**9a**		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .	**9b**		
10	**Section 501(c)(7) organizations.** Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 . . . **10a**			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . **10b**			
11	**Section 501(c)(12) organizations.** Enter:			
a	Gross income from members or shareholders **11a**			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) **11b**			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	**12a**		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. **12b**			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**			
a	Is the organization licensed to issue qualified health plans in more than one state? . . . . . **Note.** See the instructions for additional information the organization must report on Schedule O.	**13a**		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans **13b**			
c	Enter the amount of reserves on hand **13c**			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	**14a**		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .	**14b**		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year?	**15**		No
16	Is the organization subject to the section 4968 excise tax on net investment income? . . If "Yes," complete Form 4720, Schedule O.	**16**		No
17	**Section 501(c)(21) organizations.** Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? . . If "Yes," complete Form 6069.	**17**		

Part VI **Governance, Management, and Disclosure.** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

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

Section A. Governing Body and Management

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

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

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

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Form 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.

☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶BINA SURGEON PO BOX 34506 WASHINGTON, DC 20043 (202) 424-0675

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, 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, or 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 nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) COREY WIGGINS DIRECTOR	5.00 3.00	X						32,508	17,496	0
(2) LORELLA PRAELI DIRECTOR	4.00 0.00	X						28,196	0	0
(3) FELICIA ESCOBAR DIRECTOR UNTIL JAN 26, 2021	4.00 0.00	X						4,167	0	0
(4) DAVID PLOUFFE DIRECTOR	2.00 2.00	X						0	0	0
(5) ANDREW PINCUS DIRECTOR	4.00 2.00	X						0	0	0
(6) ERIKA ROTTENBERG DIRECTOR	2.00 2.00	X						0	0	0
(7) TODD SCHULTE PRESIDENT	32.00 18.00			X				295,940	162,810	46,432
(8) SURIN RAMKISSOON COO & TREASURER	34.00 16.00			X				165,113	76,462	43,427
(9) ALIDA GARCIA VP OF ADVOCACY & SECRETARY	35.00 15.00			X				143,694	62,236	48,367
(10) CAMMIE CROFT CHIEF COMMUNITY OFFICER	30.00 10.00					X		221,472	73,428	48,612
(11) ZOE TOWNS VP OF CRIMINAL JUSTICE REF	28.00 12.00					X		210,387	90,085	27,632
(12) MARK DELICH DIRECTOR OF CONGRESSIONAL	40.00 0.00					X		264,940	0	46,052
(13) CHRISTOPHER COGER HEAD OF TECHNOLOGY	30.00 10.00					X		184,016	60,057	33,131
(14) PETER BOOGAARD COMMUNICATIONS DIRECTOR	28.00 12.00					X		153,599	67,939	45,161

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
1b Sub-Total . . . . . ▶										
c Total from continuation sheets to Part VII, Section A . . . . ▶										
d Total (add lines 1b and 1c) . . . . . ▶								1,704,032	610,513	338,814

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 ▶ 4 4

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**3**		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	**4**	Yes	
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**		No

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
PLUS COMMUNICATIONS LLC PO BOX 16504 ALEXANDRIA, VA 22302	GRASSROOTS/GRASSTOPS ORGANIZING AND COMM	2,978,742
HILLTOP PUBLIC SOLUTIONS 1000 POTOMAC STREET NW 500 WASHINGTON, DC 20007	GRASSROOTS/GRASSTOPS ORGANIZING AND COMM	2,181,727
CONTROL POINT GROUP LLC 458 NEW JERSEY AVENUE SE WASHINGTON, DC 20003	POLICYMAKER CONTACT TOOLS	1,020,206
TARGETED PLATFORM MEDIA LLC 1291 HOLLYWOOD AVE ANNAPOLIS, MD 21403	PAID MEDIA	1,002,160
WINNING CONNECTIONS INC 317 PENNSYLVANIA AVE SE 2ND FLOOR WASHINGTON, DC 20003	PHONE OUTREACH SERVICES	990,786

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 4 4

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants, and OtherAmt Similar Amounts	1a Federated campaigns . .	1a			
	b Membership dues . .	1b			
	c Fundraising events . .	1c			
	d Related organizations	1d			
	e Government grants (contributions)	1e			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	64,733,495		
	g Noncash contributions included in lines 1a - 1f:$	1g			
	h **Total.** Add lines 1a-1f . . . . . ▶		64,733,495		

Program Service Revenue	Business Code				
2a RESEARCH SERVICES	900099	399,146	399,146		
b					
c					
d					
e					
f All other program service revenue.					
g **Total.** Add lines 2a–2f. . . . . ▶	399,146				

Other Revenue					
3 Investment income (including dividends, interest, and other similar amounts)		17,841			17,841
4 Income from investment of tax-exempt bond proceeds ▶					
5 Royalties . . . . . ▶					

		(i) Real	(ii) Personal
6a Gross rents	6a		
b Less: rental expenses	6b		
c Rental income or (loss)	6c		
d Net rental income or (loss) . . . . . ▶			

		(i) Securities	(ii) Other
7a Gross amount from sales of assets other than inventory	7a		
b Less: cost or other basis and sales expenses	7b		
c Gain or (loss)	7c		
d Net gain or (loss) . . . . . ▶			

8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18	8a	
b Less: direct expenses	8b	
c Net income or (loss) from fundraising events . . ▶		

9a Gross income from gaming activities. See Part IV, line 19 . . .	9a	
b Less: direct expenses	9b	
c Net income or (loss) from gaming activities . . ▶		

10a Gross sales of inventory, less returns and allowances . .	10a	
b Less: cost of goods sold . .	10b	
c Net income or (loss) from sales of inventory . . ▶		

Miscellaneous Revenue	Business Code				
11a					
b					
c					
d All other revenue					
e **Total.** Add lines 11a–11d . . . . . ▶					
12 **Total revenue.** See instructions . . . . . ▶		65,150,482	399,146	0	17,841

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	7,554,894	7,554,894		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	763,004	553,564	174,533	34,907
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	5,933,302	4,897,485	998,544	37,273
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	330,265	286,333	41,872	2,060
9 Other employee benefits	1,058,006	907,179	141,583	9,244
10 Payroll taxes	506,233	430,119	70,657	5,457
11 Fees for services (non-employees):				
a Management				
b Legal	533,393	50,000	483,393	
c Accounting	124,946		124,946	
d Lobbying	1,594,801	1,594,801		
e Professional fundraising services. See Part IV, line 17	138,000			138,000
f Investment management fees	6,368		6,368	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	10,312,221	9,554,802	757,419	
12 Advertising and promotion	5,616,365	5,616,365		
13 Office expenses	184,727	162,159	20,408	2,160
14 Information technology	852,774	705,887	140,794	6,093
15 Royalties				
16 Occupancy	285,085	242,221	39,791	3,073
17 Travel	181,591	113,432	68,159	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	337,666	282,117	55,545	4
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	79,380	67,445	11,079	856
23 Insurance	8,907	7,568	1,243	96
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a MEMBERSHIP DUES	45,401	35,000	10,401	
b BANK FEES	39,193	50	39,143	
c REGISTRATIONS & LICENSE	16,398	707	15,691	
d				
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	36,502,920	33,062,128	3,201,569	239,223
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing		8,835	1	31,012
	2	Savings and temporary cash investments		19,223,215	2	13,622,997
	3	Pledges and grants receivable, net		1,000,000	3	36,600,728
	4	Accounts receivable, net		177,690	4	159,047
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		182,499	9	320,357
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 481,934			
	b	Less: accumulated depreciation	10b 351,357	198,363	10c	130,577
	11	Investments—publicly traded securities			11	2,518,689
	12	Investments—other securities. See Part IV, line 11			12	
	13	Investments—program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		5,267,036	15	1,111,002
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)		26,057,638	16	54,494,409
Liabilities	17	Accounts payable and accrued expenses		1,977,482	17	2,184,750
	18	Grants payable			18	100,000
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		628,667	25	0
	26	**Total liabilities.** Add lines 17 through 25		2,606,149	26	2,284,750
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ▶ ☑ and complete lines 27, 28, 32, and 33.**				
	27	Net assets without donor restrictions		5,880,560	27	15,588,932
	28	Net assets with donor restrictions		17,570,929	28	36,620,727
		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building or equipment fund			30	
	31	Retained earnings, endowment, accumulated income, or other funds			31	
	32	Total net assets or fund balances		23,451,489	32	52,209,659
	33	Total liabilities and net assets/fund balances		26,057,638	33	54,494,409

Part XI Reconcilliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	65,150,482
2	Total expenses (must equal Part IX, column (A), line 25)	2	36,502,920
3	Revenue less expenses. Subtract line 2 from line 1	3	28,647,562
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	23,451,489
5	Net unrealized gains (losses) on investments	5	10,008
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	100,600
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column	10	52,209,659

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	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	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☐ Separate basis ☑ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

Additional Data

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Software ID:

Software Version:

Form 990, Special Condition Description:

Special Condition Description

SCHEDULE C
(Form 990)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.
▶Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then
- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then
- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then
- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of the organization	Employer identification number
FWDUS INC	46-2223015

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."

2 Political campaign activity expenditures. See instructions ▶ $ 200,000

3 Volunteer hours for political campaign activities. See instructions 0

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 $

2 Enter the amount of any excise tax incurred by organization managers under section 4955 $

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $ 200,000

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b $ 200,000

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☑ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	**(b)** Address	**(c)** EIN	**(d)** Amount paid from filing organization's funds. If none, enter -0-.	**(e)** Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1) PAC FOR JUSTICE	PO BOX 79113 NEW ORLEANS,LA 70179	85-2603613		200,000
2				
3				
4				
5				
6				

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing organization's totals	**(b)** Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a. If zero or less, enter -0-.		
i Subtract line 1f from line 1c. If zero or less, enter -0-.		

If the amount on line 1e, column (a) or (b) is:	**The lobbying nontaxable amount is:**
Not over $500,000	20% of the amount on line 1e.
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000.
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000.
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000.
Over $17,000,000	$1,000,000.

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	**(a)** 2018	**(b)** 2019	**(c)** 2020	**(d)** 2021	**(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					

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

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

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

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

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

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

Return Reference	Explanation
PART I-A, LINE 1:	IN 2021, FWD.US CONTINUED TO ADVOCATE FOR IMMIGRATION AND CRIMINAL JUSTICE REFORMS.
SCHEDULE C PART I-C LINE 4	FWD.US HAS NET INVESTMENT INCOME OF ZERO. ACCORDING TO THE INSTRUCTIONS FOR THE 1120-POL THE RETURN IS NOT REQUIRED TO BE FILED.

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
FWDUS INC

Employer identification number
46-2223015

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

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

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d	

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

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

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

(ii) Assets included in Form 990, Part X ▶ $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

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

a ☐ Public exhibition

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange programs

e ☐ Other .....

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

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

Part IV Escrow and Custodial Arrangements.

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

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

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

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

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII . . . . ☐

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions . . .					
c Net investment earnings, gains, and losses					
d Grants or scholarships . . .					
e Other expenditures for facilities and programs . . .					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶ .....

b Permanent endowment ▶ .....

c Term endowment ▶ .....

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

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

	Yes	No
(i) Unrelated organizations . . . . . **3a(i)**		
(ii) Related organizations . . . . . **3a(ii)**		
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? **3b**		

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		303,850	200,291	103,559
d Equipment		178,084	151,066	27,018
e Other				
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* . . ▶				130,577

Part VII **Investments - Other Securities.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 11b.See Form 990, Part X, line 12.

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

Part VIII **Investments - Program Related.**
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX **Other Assets.**
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

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

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

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

Part XI **Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total revenue. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12.)			5	

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

1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total expenses. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18.)			5	

Part XIII

Supplemental Information

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

Return Reference	Explanation
PART X, LINE 2:	FWD.US, INC. RECEIVED A TAX DETERMINATION LETTER FROM THE INTERNAL REVENUE SERVICE (IRS) IN MARCH 2021 IN WHICH IT WAS DETERMINED TO BE EXEMPT UNDER SECTION 501(C)(4). NO PROVISION FOR INCOME TAXES IS REQUIRED AS OF DECEMBER 31, 2021 AND 2020, AS THE ORGANIZATION HAD NO NET UNRELATED BUSINESS INCOME. THE ORGANIZATION'S TAX RETURNS ARE SUBJECT TO REVIEW AND EXAMINATION BY FEDERAL AND STATE AUTHORITIES. THE ORGANIZATION IS NOT AWARE OF ANY ACTIVITIES THAT WOULD JEOPARDIZE ITS TAX EXEMPT STATUS.

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE G (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ **Attach to Form 990 or Form 990-EZ.**

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
FWDUS INC

Employer identification number
46-2223015

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

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- **a** ☐ Mail solicitations
- **b** ☐ Internet and email solicitations
- **c** ☐ Phone solicitations
- **d** ☑ In-person solicitations
- **e** ☐ Solicitation of non-government grants
- **f** ☐ Solicitation of government grants
- **g** ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☑ **Yes** ☐ **No**

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? **Yes**	**No**	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col. **(i)**	**(vi)** Amount paid to (or retained by) organization
1 NEGAR TAYYAR 710 E 22ND STREET 303 OAKLAND, CA 20015	FUNDRAISING		No	0	48,000	-48,000
2 ROBERT STOWE 32 ATHENS STREET SAN FRANCISCO, CA 94112	FUNDRAISING		No	0	90,000	-90,000
3						
4						
5						
6						
7						
8						
9						
10						
Total . . . . . ▶					138,000	-138,000

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.

CA, NY

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

		(a) Event #1 (event type)	(b) Event #2 (event type)	(c) Other events (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	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 line 3, column (d) ▶				

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

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

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? . . . . . ☐ **Yes** ☐ **No**

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . . ☐ **Yes** ☐ **No**

13 Indicate the percentage of gaming activity conducted in:

a	The organization's facility	**13a**	%
b	An outside facility	**13b**	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . . ☐ **Yes** ☐ **No**

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ _____ and the amount of gaming revenue retained by the third party ▶ $ _____.

c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . . ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

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

Return Reference	Explanation
SCHEDULE G. PART IV	THE ORGANIZATION RETAINED THE SERVICES OF TWO PROFESSIONAL FUNDRAISERS TO DEVELOP PROSPECTING LISTS AND STRATEGIES TO SUPPORT THE ORGANIZATION IN ITS FUNDRAISING EFFORTS. ALL SOLICITATIONS WERE CONDUCTED BY OR IN PARTNERSHIP WITH THE ORGANIZATION'S STAFF. GIVEN THE NATURE OF THESE SERVICES, THE ORGANIZATION DOES NOT ATTRIBUTE SPECIFIC PROCEEDS TO THESE FUNDRAISERS.

Additional Data

Return to Form

Software ID:

Software Version:

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ **Attach to Form 990.**
▶ **Go to *www.irs.gov/Form990* for the latest information.**

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
FWDUS INC

Employer identification number
46-2223015

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) ADHIKAAR FOR HUMAN RIGHTS AND SOCIAL JUSTICE 71-07 WOODSIDE AVENUE WOODSIDE,NY 11377	20-3384725	501(C)3	20,000	0			IMMIGRATION ADVOCACY GRANT
(2) AFRICAN COMMUNITIES TOGETHER 127 WEST 127TH STREET SUITE 221 NEW YORK,NY 10027	46-1689772	501(C)3	20,000	0			IMMIGRATION ADVOCACY GRANT
(3) ALIENTO EDUCATION FUND 2264 S DEERFIELD LANE GILBERT,AZ 85295	84-4749451	501(C)3	94,000	0			IMMIGRATION EDUCATION GRANT
(4) AMERICA IS BETTER 10 G STREET NE SUITE 500 WASHINGTON,DC 20002	26-4718617	501(C)4	450,000	0			IMMIGRATION ADVOCACY GRANT
(5) AMERICAN BUSINESS IMMIGRATION COALITION ACTION 1801 S ASHLAND AVENUE CHICAGO,IL 60608	83-3243718	501(C)4	150,000	0			IMMIGRATION ADVOCACY GRANT
(6) AMERICAN CONSERVATIVE UNION 1199 NORTH FAIRFAX STREET SUITE 500 ALEXANDRIA,VA 22314	52-0810813	501(C)4	375,000	0			CRIMINAL JUSTICE ADVOCACY GRANT
(7) AMERICAN FRIENDS SERVICE COMMITTEE 1501 CHERRY STREET PHILADELPHIA,PA 19102	23-1352010	501(C)3	10,000	0			CRIMINAL JUSTICE ADVOCACY GRANT
(8) AMERICA'S VOICE 1050 17TH STREET NW SUITE 490 WASHINGTON,DC 20036	20-0748404	501(C)4	200,000	0			IMMIGRATION ADVOCACY GRANT
(9) ASIAN PACIFIC AMERICAN INSTITUTE FOR CONGRESSIONAL STUDIES 1001 CONNECTICUT AVENUE NW SUITE 320 WASHINGTON,DC 20036	52-1917903	501(C)3	10,000	0			IMMIGRATION ADVOCACY GRANT
(10) BIPARTISAN POLICY CENTER ACTION INC 1225 I STREET NW SUITE 1000 WASHINGTON,DC 20005	26-1299114	501(C)4	90,000	0			IMMIGRATION ADVOCACY GRANT
(11) CARE IN ACTION INC 45 BROADWAY SUITE 320 NEW YORK,NY 10006	46-4605470	501(C)4	100,000	0			IMMIGRATION ADVOCACY GRANT
(12) CASA DE MARYLAND INC 8151 15TH AVENUE HYATTSVILLE,MD 20783	52-1372972	501(C)3	50,000	0			IMMIGRATION ADVOCACY GRANT
(13) CASA IN ACTION INC 8151 15TH AVENUE HYATTSVILLE,MD 20783	27-2145405	501(C)4	200,000	0			IMMIGRATION ADVOCACY GRANT
(14) CENTER FOR AMERICAN PROGRESS 1333 H STREET NW 10TH FLOOR WASHINGTON,DC 20005	30-0192708	501(C)3	45,000	0			IMMIGRATION ADVOCACY GRANT
(15) CENTER FOR COMMUNITY ALTERNATIVES 115 EAST JEFFERSON STREET SUITE 200 SYRACUSE,NY 13202	16-1395992	501(C)3	110,000	0			CRIMINAL JUSTICE ADVOCACY GRANT
(16) COALITION FOR THE AMERICAN DREAM PO BOX 34506 WASHINGTON,DC 20043	82-2718452	501(C)4	375,000	0			IMMIGRATION ADVOCACY GRANT
(17) COLORADO IMMIGRANT RIGHTS COALITION 2525 WEST ALAMEDA AVENUE SUITE 100 DENVER,CO 80219	73-1675486	501(C)3	10,000	0			IMMIGRATION EDUCATION GRANT
(18) DREAM BIG NEVADA 1149 S MARYLAND PKWY LAS VEGAS,NV 89104	82-2765806	501(C)3	50,000	0			IMMIGRATION EDUCATION GRANT
(19) EMPOWER MISSISSIPPI 1000 NORTHPARK DRIVE RIDGELAND,MS 39157	46-4253610	501(C)4	250,000	0			CRIMINAL JUSTICE ADVOCACY GRANT
(20) FAMILY ACTION NETWORK MOVEMENT 100 NE 84TH STREET MIAMI,FL 33138	65-0334201	501(C)3	20,000	0			IMMIGRATION EDUCATION GRANT
(21) FLIC VOTES INC 2800 BISCAYNE BLVD SUITE 300 MIAMI,FL 33137	81-2185907	501(C)4	100,000	0			IMMIGRATION ADVOCACY GRANT
(22) GOOD CAUSES INC 272 BROADWAY MENANDS,NY 12204	14-1813190	501(C)3	15,000	0			IMMIGRATION EDUCATION GRANT
(23) GREATER HOUSTON PARTNERSHIP 701 AVENIDA DE LAS AMERICAS SUITE 900 HOUSTON,TX 77010	76-0267896	501(C)6	20,000	0			IMMIGRATION ADVOCACY GRANT
(24) INTERNATIONAL RESCUE COMMITTEE 122 EAST 42ND STREET NEW YORK,NY 10148	13-5660870	501(C)3	50,000	0			IMMIGRATION EDUCATION GRANT
(25) INTERNET MARKETING ASSOCIATION 10 MAR DEL RAY SAN CLEMENTE,CA 92673	45-0999033	C-CORP	10,000	0			IMMIGRATION SPONSORSHIP
(26) JUSTICE ACTION CENTER PO BOX 27280 LOS ANGELES,CA 90027	83-3991239	501(C)3	10,000	0			IMMIGRATION EDUCATION GRANT
(27) LA UNION DEL PUEBLO ENTERO P O BOX 188 SAN JUAN,TX 78589	93-1029197	501(C)3	70,700	0			IMMIGRATION EDUCATION GRANT
(28) LATIN AMERICAN ASSOCIATION 2750 BUFORD HWY NE ATLANTA,GA 30324	58-1237316	501(C)3	10,000	0			IMMIGRATION EDUCATION GRANT
(29) LIVING UNITED FOR CHANGE IN ARIZONA (LUCHA) 5716 N 19TH AVENUE PHOENIX,AZ 85015	27-1398645	501(C)4	75,000	0			IMMIGRATION ADVOCACY GRANT
(30) LUPE VOTES PO BOX 188 SAN JUAN,TX 78589	85-2786747	501(C)4	100,000	0			IMMIGRATION ADVOCACY GRANT
(31) MAKE THE ROAD STATES 301 GROVE STREET BROOKLYN,NY 11237	84-3988830	501(C)3	35,000	0			IMMIGRATION EDUCATION GRANT
(32) NAACP - MS STATE CONFERENCE 1072 JR LYNCH STREET SUITE 10 JACKSON,MS 39203	64-6025998	501(C)4	150,000	0			CRIMINAL JUSTICE ADVOCACY GRANT
(33) NATIONAL CENTER FOR CIVIC INNOVATION 121 AVENUE OF THE AMERICAS 6TH FLOOR NEW YORK,NY 10013	02-0590588	501(C)3	100,000	0			IMMIGRATION EDUCATION GRANT
(34) NATIONAL RELIGIOUS CAMPAIGN AGAINST TOURTURE PO BOX 91820 WASHINGTON,DC 20090	20-8832485	501(C)3	10,000	0			CRIMINAL JUSTICE EDUCATION GRANT
(35) NEO PHILANTHROPY INC 45 WEST 36TH STREET 6TH FLOOR NEW YORK,NY 10018	13-3191113	501(C)3	60,000	0			CRIMINAL JUSTICE EDUCATION GRANT
(36) NEW HOUR FOR WOMEN AND CHILDREN - LI INC 1725 BRENTWOOD ROAD BLDG 2 BRENTWOOD,NY 11717	47-4718783	501(C)3	110,000	0			CRIMINAL JUSTICE EDUCATION GRANT
(37) NEW VENTURE FUND 1828 L STREET NW SUITE 300-A WASHINGTON,DC 20036	20-5806345	501(C)4	250,000	0			CRIMINAL JUSTICE ADVOCACY GRANT
(38) NEW YORK COMMUNITIES FOR CHANGE INC 470 VANDERBILT AVENUE 9TH FLOOR BROOKLYN,NY 11238	27-1359103	501(C)4	115,000	0			CRIMINAL JUSTICE ADVOCACY GRANT
(39) NEW YORK STATE IMMIGRANT ACTION FUND INC 131 33RD STREET SUITE 610 NEW YORK,NY 10001	61-1613175	501(C)4	85,000	0			IMMIGRATION ADVOCACY GRANT
(40) NORTH TEXAS COMMISSION 8445 FREEPORT PARKWAY SUITE 640 IRVING,TX 75063	75-1364760	501(C)6	30,000	0			IMMIGRATION ADVOCACY GRANT
(41) OKLAHOMANS FOR CRIMINAL JUSTICE REFORM ACTION INC 304 NW 5TH BOX 2055 OKLAHOMA CITY,OK 73102	82-4661308	501(C)4	100,160	0			CRIMINAL JUSTICE ADVOCACY GRANT
(42) PAC FOR JUSTICE PO BOX 79113 NEW ORLEANS,LA 70179	85-2603613	527	200,000	0			CRIMINAL JUSTICE ADVOCACY GRANT
(43) PAROLE PREPARATION PROJECT 168 CANAL STREET 6TH FLOOR NEW YORK,NY 10013	82-1096572	501(C)3	110,000	0			CRIMINAL JUSTICE EDUCATION GRANT
(44) RIO GRANDE VALLEY PARTNERSHIP 322 S MISSOURI AVENUE WESLACO,TX 78596	74-1012454	501(C)6	20,000	0			IMMIGRATION ADVOCACY GRANT
(45) SIXTEEN THIRTY FUND 1201 CONNECTICUT AVENUE NW SUITE 300 WASHINGTON,DC 20036	26-4486735	501(C)4	2,000,000	0			IMMIGRATION ADVOCACY GRANT
(46) SOCIAL AND ENVIRONMENTAL ENTREPRENEURS 23564 CALABASAS ROAD SUITE 201 CALABASAS,CA 91302	95-4116679	501(C)3	235,500	0			CRIMINAL JUSTICE EDUCATION GRANT
(47) STATE BUSINESS EXECUTIVES 5404 BACKLICK WOODS COURT SPRINGFIELD,VA 22151	85-4035633	501(C)4	175,000	0			IMMIGRATION ADVOCACY GRANT
(48) TEXAS ASSOCIATION OF BUSINESS 316 W 12TH STREET SUITE 200 AUSTIN,TX 78701	74-0944130	501(C)6	40,000	0			IMMIGRATION ADVOCACY GRANT
(49) TEXAS BUSINESS LEADERSHIP COUNCIL 515 CONGRESS AVENUE SUITE 2240 AUSTIN,TX 78701	75-2580060	501(C)6	30,000	0			IMMIGRATION ADVOCACY GRANT
(50) TEXAS NURSERY & LANDSCAPE ASSOCIATION 7730 S IH-35 FRONTAGE ROAD 6621 AUSTIN,TX 78745	74-1192009	501(C)6	40,000	0			IMMIGRATION ADVOCACY GRANT
(51) TEXAS RESTAURANT ASSOCIATION 512 E RIVERSIDE DRIVE 250 AUSTIN,TX 78704	74-0921350	501(C)6	50,000	0			IMMIGRATION ADVOCACY GRANT
(52) THE NISKANEN CENTER FOR PUBLIC POLICY 820 FIRST STREET NE 675 WASHINGTON,DC 20002	47-4946572	501(C)4	125,000	0			IMMIGRATION ADVOCACY GRANT
(53) THE PRAXIS PROJECT INC 1001 CONNECTICUT AVENUE NW SUITE 201 WASHINGTON,DC 20036	30-0044814	501(C)3	10,000	0			IMMIGRATION EDUCATION GRANT
(54) VAIL VALLEY PARTNERSHIP 97 MAIN STREET SUITE E201 EDWARDS,CO 81632	84-0535997	501(C)3	10,000	0			IMMIGRATION EDUCATION GRANT
(55) VOCAL-NY 80A FOURTH AVENUE BROOKLYN,NY 11217	13-4094385	501(C)3	300,000	0			CRIMINAL JUSTICE ADVOCACY GRANT
(56) VOTERS ORGANIZED TO EDUCATE 4930 WASHINGTON AVENUE NEW ORLEANS,LA 70125	27-1370327	501(C)4	15,000	0			CRIMINAL JUSTICE ADVOCACY GRANT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 26

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 30

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

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

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

Return Reference	Explanation
PART I, LINE 2:	WHEN A GRANT IS MADE FOR GENERAL PURPOSES, THE ORGANIZATIONS' NAME, GRANT AMOUNT, CONTACT INFORMATION AND TAX EXEMPT STATUS IS MAINTAINED IN FWD.US, INC.'S RECORDS. IF GRANTS ARE MADE WITH RESTRICTIVE PURPOSES, THESE RESTRICTIONS ARE ALSO DOCUMENTED.

Additional Data

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Software ID:

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Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
FWDUS INC

Employer identification number
46-2223015

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate 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 idemnification and gross-up payments ☐ Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?	**2**	Yes	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	☐ Compensation committee ☐ Written employment contract			
	☐ Independent compensation consultant ☑ Compensation survey or study			
	☐ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	**5a**		No
b	Any related organization?	**5b**		No
	If "Yes," on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	**6a**		No
b	Any related organization?	**6b**		No
	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 in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported on Form 990, Part VII, paid or accured 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**		No
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	**9**		

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 are not 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.

(A) Name and Title		(B) Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 TODD SCHULTE PRESIDENT	(i)	287,190	8,750	0	11,764	18,189	325,893	0
	(ii)	162,810	0	0	6,472	10,007	179,289	0
2 CAMMIE CROFT CHIEF COMMUNITY OFFICER	(i)	217,222	4,250	0	14,645	21,863	257,980	0
	(ii)	73,428	0	0	4,855	7,249	85,532	0
3 ZOE TOWNS VP OF CRIMINAL JUSTICE REF	(i)	201,387	9,000	0	13,654	5,694	229,735	0
	(ii)	90,085	0	0	5,846	2,438	98,369	0
4 MARK DELICH DIRECTOR OF CONGRESSIONAL	(i)	258,190	6,750	0	19,488	26,564	310,992	0
	(ii)	0	0	0	0	0	0	0
5 SURIN RAMKISSOON COO & TREASURER	(i)	158,863	6,250	0	13,328	16,354	194,795	0
	(ii)	76,462	0	0	6,172	7,573	90,207	0
6 CHRISTOPHER COGER HEAD OF TECHNOLOGY	(i)	180,016	4,000	0	12,496	12,483	208,995	0
	(ii)	60,057	0	0	4,078	4,074	68,209	0
7 PETER BOOGAARD COMMUNICATIONS DIRECTOR	(i)	149,599	4,000	0	13,520	17,792	184,911	0
	(ii)	67,939	0	0	5,980	7,869	81,788	0
8 ALIDA GARCIA VP OF ADVOCACY & SECRETARY	(i)	134,944	8,750	0	13,166	20,584	177,444	0
	(ii)	62,236	0	0	5,702	8,915	76,853	0

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.

Return Reference	Explanation
PART II	AS REFLECTED ON SCHEDULE R., FWD.US, INC. SHARES PAID EMPLOYEES WITH FWD.US EDUCATION FUND, INC., A RELATED 501(C)(3) TAX-EXEMPT ORGANIZATION, PURSUANT TO A SHARED SERVICES AGREEMENT BETWEEN THE TWO ORGANIZATIONS. FWD.US, INC. ACTS AS A COMMON PAYMASTER FOR CERTAIN EMPLOYEES OF THE TWO ORGANIZATIONS. CERTAIN EMPLOYEES ALLOCATE THEIR TIME BETWEEN THE TWO ORGANIZATIONS, AND FWD.US EDUCATION FUND, INC. REIMBURSES FWD.US, INC. FOR FWD.US EDUCATION FUND, INC.'S ALLOCABLE SHARE OF SALARY AND BENEFITS EXPENSE. FWD.US, INC. HAS REPORTED THE COMPENSATION AND BENEFITS ATTRIBUTABLE TO IT ON ROW (I) OF THIS SCHEDULE. COMPENSATION ATTRIBUTABLE TO FWD.US EDUCATION FUND, INC. IS REPORTED ON ROW (II) OF THIS SCHEDULE.

Additional Data

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SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
FWDUS INC

Employer identification number
46-2223015

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1A	THE ORGANIZATION HAS TWO CLASSES OF DIRECTORS. CERTAIN ACTIONS MAY NOT BE TAKEN WITHOUT THE PRIOR WRITTEN CONSENT OR AFFIRMATIVE VOTE OF ONE OF THE CLASSES.
FORM 990, PART VI, SECTION A, LINE 6	FWD.US HAS ONE CLASS OF VOTING MEMBERS WITHIN THE MEANING OF DELAWARE GENERAL CORPORATION LAW AND ONE MEMBER WITHIN THAT CLASS.
FORM 990, PART VI, SECTION A, LINE 7A	THE SOLE MEMBER OF THE ORGANIZATION MAY APPOINT TWO OF THE ORGANIZATION'S DIRECTORS.
FORM 990, PART VI, SECTION A, LINE 7B	THE SOLE MEMBER OF THE ORGANIZATION MAY APPOINT TWO OF THE ORGANIZATION'S DIRECTORS AND REMOVE THE DIRECTORS
FORM 990, PART VI, SECTION A, LINE 8B	THE ORGANIZATION DOES NOT HAVE ANY COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE BOARD.
FORM 990, PART VI, SECTION B, LINE 11B	THE RETURN WILL BE REVIEWED BY THE PRESIDENT, CHIEF OPERATING OFFICER, LEGAL COUNSEL, THE AUDIT COMMITTEE, AND COPIES PROVIDED TO ALL DIRECTORS OF THE ORGANIZATION PRIOR TO SUBMITTING TO THE INTERNAL REVENUE SERVICE.
FORM 990, PART VI, SECTION B, LINE 12C	THE BOARD OF DIRECTORS IS RESPONSIBLE FOR MONITORING COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY. THE POLICY APPLIES TO EACH DIRECTOR, OFFICER, MEMBER OF A COMMITTEE WITH BOARD-DELEGATED POWERS, AND KEY EMPLOYEE. THE PRESIDENT REVIEWS THE TRANSACTION AND IN THE EVENT OF A POTENTIAL CONFLICT OF INTEREST, ADVISES THE BOARD OF DIRECTORS OF APPROPRIATE ACTION WITH REGARD TO THE CONFLICT. A POTENTIALLY CONFLICTED PERSON MAY MAKE A PRESENTATION AT THE BOARD OR COMMITTEE MEETING WHERE THE MATTER IS DELIBERATED, BUT AFTER SUCH PRESENTATION, HE/SHE MUST LEAVE THE MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT THAT RESULTS IN THE POSSIBLE CONFLICT OF INTEREST.
FORM 990, PART VI, SECTION B, LINE 15A	THE BOARD OF DIRECTORS REVIEWED AND APPROVED THE PRESIDENT'S SALARY AFTER CONSIDERING EXECUTIVE SALARY LEVELS AT COMPARABLE ORGANIZATIONS.
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.
FORM 990, PART IX, LINE 11G	GRASSROOTS, GRASSTOPS, AND COALITION ORGANIZING: PROGRAM SERVICE EXPENSES 2,756,070. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 2,756,070. RESEARCH AND POLLING: PROGRAM SERVICE EXPENSES 466,636. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 466,636. COMMUNITY DEVELOPMENT, DESIGN, AND RESEARCH: PROGRAM SERVICE EXPENSES 2,570,089. MANAGEMENT AND GENERAL EXPENSES 536,575. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 3,106,664. POLICYMAKER CONTACT TOOLS: PROGRAM SERVICE EXPENSES 1,873,713. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 1,873,713. COMMUNICATIONS: PROGRAM SERVICE EXPENSES 1,888,294. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 1,888,294. STAFF TRAINING, MANAGEMENT COACHING, OTHER: PROGRAM SERVICE EXPENSES 0. MANAGEMENT AND GENERAL EXPENSES 220,844. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 220,844.

Additional Data

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SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
FWDUS INC

Employer identification number
46-2223015

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) COUNCIL FOR AMERICAN JOB GROWTH LLC 410 1ST STREET SE STE 310 WASHINGTON, DC 20003 46-2488181	IMMIGRATION REFORM	DE	0	26,564	FWDUS INC
(2) AMERICANS FOR CONSERVATIVE DIRECTION LLC 1826 JEFFERSON PLACE NW WASHINGTON, DC 20036 46-2461564	IMMIGRATION REFORM	DE	375,025	1,914	FWDUS INC

Part II **Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
(1) WELCOMEUS INC PO BOX 34506 WASHINGTON, DC 20043 46-4681722	CELEBRATE IMMIGRANT HISTORY	DE	501(C)(3)	LINE 7	FWDUS INC	Yes	
(2) FWDUS EDUCATION FUND INC PO BOX 34506 WASHINGTON, DC 20043 82-0962378	EDUCATE THE PUBLIC ABOUT IMMIGRATION AND CRIMINAL JUSTICE POLICY AND REFORM	DE	501(C)(3)	LINE 7	N/A		No
(3) CHAN ZUCKERBERG INITIATIVE FOUNDATION 314 LYTTON AVE PALO ALTO, CA 94301 45-5002209	GRANTMAKING	CA	501(C)(3)	PF	N/A		No
(4) CHAN ZUCKERBERG INITIATIVE ADVOCACY 314 LYTTON AVE PALO ALTO, CA 94301 81-3742328	SOCIAL WELFARE	CA	501(C)(4)		N/A		No
(5) CHAN ZUCKERBERG BIOHUB 499 ILLINOIS ST SAN FRANCISCO, CA 94158 81-1669175	MEDICAL RESEARCH	CA	501(C)(3)	LINE 4	N/A		No
(6) THE PRIMARY SCHOOL LAB 2086 CLARKE AVE EAST PALO ALTO, CA 94303 36-4858582	EDUCATION	CA	501(C)(4)		N/A		No
(7) THE PRIMARY SCHOOL - EAST PALO ALTO 2086 CLARKE AVE EAST PALO ALTO, CA 94303 47-3334579	EDUCATION	CA	501(C)(3)	LINE 2	N/A		No
(8) GRADIENT LEARNING 340 S LEMON AVE 6119 WALNUT, CA 91789 35-2645251	EDUCATION	CA	501(C)(3)	LINE 7	N/A		No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)META PLATFORMS INC 1601 WILLOW RD MENLO PARK, CA 94025 20-1665019	SOCIAL MEDIA	DE		C					No

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

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

		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	**1a**		No
b Gift, grant, or capital contribution to related organization(s)	**1b**		No
c Gift, grant, or capital contribution from related organization(s)	**1c**	Yes	
d Loans or loan guarantees to or for related organization(s)	**1d**		No
e Loans or loan guarantees by related organization(s)	**1e**		No
f Dividends from related organization(s)	**1f**		No
g Sale of assets to related organization(s)	**1g**		No
h Purchase of assets from related organization(s)	**1h**		No
i Exchange of assets with related organization(s)	**1i**		No
j Lease of facilities, equipment, or other assets to related organization(s)	**1j**		No
k Lease of facilities, equipment, or other assets from related organization(s)	**1k**		No
l Performance of services or membership or fundraising solicitations for related organization(s)	**1l**		No
m Performance of services or membership or fundraising solicitations by related organization(s)	**1m**		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	**1n**	Yes	
o Sharing of paid employees with related organization(s)	**1o**	Yes	
p Reimbursement paid to related organization(s) for expenses	**1p**		No
q Reimbursement paid by related organization(s) for expenses	**1q**	Yes	
r Other transfer of cash or property to related organization(s)	**1r**		No
s Other transfer of cash or property from related organization(s)	**1s**		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	**(b)** Transaction type (a-s)	**(c)** Amount involved	**(d)** Method of determining amount involved

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

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

(a) Name, address, and EIN of entity	**(b)** Primary activity	**(c)** Legal domicile (state or foreign country)	**(d)** Predominant income (related, unrelated, excluded from tax under sections 512-514)	**(e)** Are all partners section 501(c)(3) organizations?		**(f)** Share of total income	**(g)** Share of end-of-year assets	**(h)** Disproportionate allocations?		**(i)** Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	**(j)** General or managing partner?		**(k)** Percentage ownership
				Yes	**No**			**Yes**	**No**		**Yes**	**No**	

Part VII Supplemental Information

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

Return Reference	Explanation
PART VII	ONE OF THE MANAGERS OF CHAN ZUCKERBERG INITIATIVE, LLC ("CZI") ALSO HAS A CONTROLLING INTEREST IN SEVERAL PASSIVE INVESTMENT VEHICLES. THESE INVESTMENT VEHICLES, THE TAX-EXEMPT ENTITIES DISCLOSED UNDER PART II ABOVE, AND META PLATFORMS INC AS DISCLOSED UNDER PART IV ABOVE, MAY TECHNICALLY BE CONSIDERED 'RELATED ORGANIZATIONS" OF FWD.US FOR IRS FORM 990 REPORTING PURPOSES THROUGH THEIR RELATIONSHIP WITH ONE OF CZI'S MANAGERS, GIVEN CZI'S RELATIONSHIP WITH FWD.US. EACH OF THESE DISCLOSED ENTITIES IS OTHERWISE UNAFFILIATED WITH AND DOES NOT CONTROL FWD.US.

Additional Data

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