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

2023

Open to Public Inspection

A For the 2023 calendar year, or tax year beginning 01-01-2023 , and ending 12-31-2023

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

C Name of organization
EVERYTOWN FOR GUN SAFETY ACTION FUND INC

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) PO BOX 4184 | Room/suite

City or town, state or province, country, and ZIP or foreign postal code
NEW YORK, NY 10163

D Employer identification number
20-8802884

E Telephone number
(646) 324-8250

G Gross receipts $ 60,673,508

F Name and address of principal officer:
JOHN FEINBLATT
PO BOX 4184
NEW YORK,NY 10163

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.EVERYTOWN.ORG

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

L Year of formation: 2007

M State of legal domicile: DE

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
THE PRIMARY ACTIVITY OF EVERYTOWN FOR GUN SAFETY ACTION FUND IS TO PROMOTE GUN SAFETY LEGISLATION AND INITIATIVES AND REDUCE GUN VIOLENCE THROUGH THE EDUCATION OF POLICY-MAKERS, THE PRESS, AND THE PUBLIC ABOUT THE CONSEQUENCES OF GUN VIOLENCE AND ORGANIZING COMMUNITIES IN SUPPORT OF GUN SAFETY.

Activities & Governance

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**	4
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	4
5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)	**5**	234
6	Total number of volunteers (estimate if necessary)	**6**	1,771,647
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

Revenue

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	65,049,593	58,781,460
9	Program service revenue (Part VIII, line 2g)	280,468	597,509
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	175,171	748,982
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	185,760	523,995
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	65,690,992	60,651,946

Expenses

13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	998,300	741,000
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)	18,227,964	18,804,442
16a	Professional fundraising fees (Part IX, column (A), line 11e)	412,344	740,205
b	Total fundraising expenses (Part IX, column (D), line 25) 4,764,069		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	40,353,595	35,046,030
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	59,992,203	55,331,677
19	Revenue less expenses. Subtract line 18 from line 12	5,698,789	5,320,269

Net Assets or Fund Balances

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	18,487,295	23,196,191
21	Total liabilities (Part X, line 26)	3,088,994	2,419,202
22	Net assets or fund balances. Subtract line 21 from line 20	15,398,301	20,776,989

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: 2024-11-05
JOHN FEINBLATT 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
				P00739411

Firm's name GELLER & COMPANY LLC — Firm's EIN 13-4149326

Firm's address PO BOX 1510
NEW YORK, NY 10150 — Phone no. (212) 583-6000

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:

THE PRIMARY ACTIVITY OF EVERYTOWN FOR GUN SAFETY ACTION FUND IS TO PROMOTE GUN SAFETY LEGISLATION AND INITIATIVES AND REDUCE GUN VIOLENCE THROUGH THE EDUCATION OF POLICY-MAKERS, THE PRESS, AND THE PUBLIC ABOUT THE CONSEQUENCES OF GUN VIOLENCE AND ORGANIZING COMMUNITIES IN SUPPORT OF GUN SAFETY.

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 $ 40,859,275 including grants of $ 741,000) (Revenue $ 597,509)

SEE SCHEDULE O.

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** 40,859,275

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	Yes	
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	Yes	
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	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	Yes	
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	Yes	
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		No
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		No
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	Yes	
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	116		
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		Yes	

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**	234		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			**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? If "Yes," see instructions and file Form 4720, Schedule N.			**15**	No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.			**16**	No
17	**Section 501(c)(21) organizations.** Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? 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**	4		
b	Enter the number of voting members included in line 1a, above, who are independent	**1b**	4		
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**		No
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**	Yes	
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**	Yes	
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**	Yes	
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**	Yes	
	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 AL, AR, CA, FL, GA, HI, IL, KS, KY, MA, MD, MN, MO, MS, NC, NH, NJ, NM, NY, OR, PA, SC, TN, UT, VA, WV, WI

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: MICHAEL BROUILLARD CO GELLER & COMPANY LLC PO BOX 1510 NEW YORK, NY 10150 (212) 583-6000

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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)						(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
		Individual trustee or director	Institutional Trustee;	Officer	Key employee	Highest compensated employee	Former			
(1) RICHARD K DESCHERER DIRECTOR & CHAIRPERSON	0.50	X		X				0	0	0
(2) DENNIS WALCOTT DIRECTOR	0.50	X						0	0	0
(3) JASON POST DIRECTOR	0.50	X						0	0	0
(4) MICHAEL BEST DIRECTOR	0.50	X						0	0	0
(5) JOHN FEINBLATT PRESIDENT	15.00			X				0	0	0
(6) MICHAEL BROUILLARD SECRETARY/TREASURER,CFO	20.00			X				0	0	0
(7) MATTHEW MCTIGHE COO & EXECUTIVE VICE PRESI	40.00				X			396,078	0	25,482
(8) NICHOLAS SUPLINA LAW & POLICY SENIOR VICE PRESIDENT	40.00					X		323,530	0	36,077
(9) CHARLES B KELLY POLITICAL AFFAIRS SENIOR VICE PRESIDENT	40.00					X		390,613	0	40,957
(10) ZOE L SEGAL-REICHLIN OPERATIONS & GENERAL COUNSEL SENIOR VICE PRESIDENT	40.00					X		300,946	0	47,397
(11) STACEY MERA LIPSON COMMUNICATIONS CHIEF PUBLIC AFFAIRS OFFICER	40.00					X		244,788	0	45,869
(12) LINDSAY CLARIDA CHIEF ADVOCACY CAMPAIGN OFFICER	40.00					X		224,422	0	34,200

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)						(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
		Individual trustee or director	**Institutional Trustee;**	Officer	Key employee	Highest compensated employee	Former			
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								1,880,377	0	229,982

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 69

		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*		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*	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*		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
GELLER & COMPANY LLC PO BOX 1510 NEW YORK, NY 10150	FINANCIAL AND ADVISORY SERVICES	4,531,789
ANNE LEWIS STRATEGIES LLC 650 MASSACHUSETTS AVENUE NW SUITE WASHINGTON, DC 20001	FUNDRAISING STRATEGIC CONSULTING, ADVERT	2,750,868
VENABLE LLP 750 E PRATT STREET SUITE 900 BALTIMORE, MD 21202	LEGAL SERVICES	1,884,811
HYATT REGENCY MCCORMICK PLACE CHICAGO 2233 S MARTIN LUTHER KING DRIVE CHICAGO, IL 60616	LODGING AND ACCOMMODATION	1,240,802
WATERFRONT STRATEGIES INC 3050 K STREET NW SUITE 100 WASHINGTON, DC 20007	ADVERTISING	1,078,958

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 45

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	58,781,460		
g Noncash contributions included in lines 1a - 1f:$	1g	21,562		
h **Total.** Add lines 1a-1f				58,781,460
Program Service Revenue	Business Code			
2a CONFERENCE AND OTHER INCOME	541900	302,159	302,159	
b OTHER PROGRAM SERVICE	900099	295,350	295,350	
c				
d				
e				
f All other program service revenue.				
g **Total.** Add lines 2a–2f.	597,509			
3 Investment income (including dividends, interest, and other similar amounts)		748,986		748,986
4 Income from investment of tax-exempt bond proceeds				
5 Royalties		428,611		428,611
	(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	21,558			
b Less: cost or other basis and sales expenses 7b	21,562			
c Gain or (loss) 7c	-4			
d Net gain or (loss)		-4		-4
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 . .				
Other Revenue	Business Code			
11a PRIOR YEAR REFUNDS	900099	95,384		95,384
b				
c				
d All other revenue				
e **Total.** Add lines 11a–11d		95,384		
OtherRevenueMiscAmt				
12 **Total revenue.** See instructions		60,651,946	597,509	0 1,272,977

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	741,000	741,000		
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	262,048	87,524	87,262	87,262
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	14,264,083	12,302,466	1,639,987	321,630
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	441,735	389,056	42,992	9,687
9 Other employee benefits	2,697,376	2,360,831	291,375	45,170
10 Payroll taxes	1,139,200	1,005,953	109,863	23,384
11 Fees for services (non-employees):				
a Management				
b Legal	1,893,972	1,612,648	229,930	51,394
c Accounting	4,580,389		4,580,389	
d Lobbying	4,573,860	4,573,860		
e Professional fundraising services. See Part IV, line 17	740,205			740,205
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	3,531,796	3,145,152	317,708	68,936
12 Advertising and promotion	3,646,591	1,419,591		2,227,000
13 Office expenses	845,426	261,902	582,824	700
14 Information technology	791,290	472,496	315,857	2,937
15 Royalties				
16 Occupancy	431,969	431,969		
17 Travel	3,134,489	2,733,964	349,353	51,172
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,735,196	1,542,011	53,662	139,523
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	294,333	251,396	34,855	8,082
23 Insurance	219,013	12,020	206,993	
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 POLITICAL CONTRIBUTIONS	7,425,850	7,425,850		
b BANK & CREDIT CARD FEES	648,269	550	647,719	
c POSTAGE AND PRINTING	630,063	63,418	3,950	562,695
d DATA ACQUISITION	340,056	25,492		314,564
e All other expenses	323,468	126	213,614	109,728
25 **Total functional expenses.** Add lines 1 through 24e	55,331,677	40,859,275	9,708,333	4,764,069
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		6,920,994	1	2,570,651
	2	Savings and temporary cash investments		7,856,147	2	17,508,161
	3	Pledges and grants receivable, net		50,000	3	
	4	Accounts receivable, net		628,719	4	634,965
	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		526,195	9	545,751
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 793,547			
	b	Less: accumulated depreciation	10b 545,985	338,604	10c	247,562
	11	Investments—publicly traded securities			11	
	12	Investments—other securities. See Part IV, line 11			12	
	13	Investments—program-related. See Part IV, line 11			13	
	14	Intangible assets		453,097	14	433,437
	15	Other assets. See Part IV, line 11		1,713,539	15	1,255,664
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)		18,487,295	16	23,196,191
Liabilities	17	Accounts payable and accrued expenses		1,135,798	17	981,685
	18	Grants payable		30,000	18	11,500
	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		1,923,196	25	1,426,017
	26	**Total liabilities.** Add lines 17 through 25		3,088,994	26	2,419,202
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		15,336,936	27	20,776,989
	28	Net assets with donor restrictions		61,365	28	0
		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		15,398,301	32	20,776,989
	33	Total liabilities and net assets/fund balances		18,487,295	33	23,196,191

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	60,651,946
2	Total expenses (must equal Part IX, column (A), line 25)	2	55,331,677
3	Revenue less expenses. Subtract line 2 from line 1	3	5,320,269
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	15,398,301
5	Net unrealized gains (losses) on investments	5	108,419
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-50,000
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column	10	20,776,989

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		No
	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 Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	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 B

(Form 990)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Name of the organization
EVERYTOWN FOR GUN SAFETY ACTION FUND INC

Employer identification number
20-8802884

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	☐ 501(c)( ) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☐ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

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

Special Rules

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

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

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

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization	Employer identification number
EVERYTOWN FOR GUN SAFETY ACTION FUND INC	20-8802884

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
RESTRICTED	,	$ RESTRICTED	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)

Name of organization
EVERYTOWN FOR GUN SAFETY ACTION FUND INC

Employer identification number
20-8802884

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

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

Name of organization
EVERYTOWN FOR GUN SAFETY ACTION FUND INC

Employer identification number
20-8802884

Part III ***Exclusively*** **religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this information once. See instructions.)** ▶ $ ____________

Use duplicate copies of Part III if additional space is needed.

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

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
-	

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

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
-	

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

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
-	

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

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
-	

Additional Data

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Software ID:

Software Version:

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

2022

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
EVERYTOWN FOR GUN SAFETY ACTION FUND INC	20-8802884

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 ▶ $ 11,240,732

3 Volunteer hours for political campaign activities. See instructions

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 $ 3,814,882

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $ 7,425,850

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b $ 11,240,732

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) APRIL FOR ALGONKIAN	PO BOX 651261 STERLING,VA 20165	88-4352438	500	
(2) ARIZONA DEMOCRATIC PARTY	2910 N CENTRAL AVE PHOENIX,AZ 85012	86-0125308	5,000	
(3) BODDYE FOR SUPERVISOR	PO BOX 8285 WOODBRIDGE,VA 22195	83-1863961	750	
(4) BUDDY DYER CAMPAIGN	PO BOX 540322 ORLANDO,FL 32854	27-4760575	1,000	
(5) CAREN FITZPATRICK FOR SENATE	PO BOX 334 NORTHFIELD,NJ 08225	93-2686993	1,000	
(6) CATHY MOORE FOR SEATTLE CITY COUNCIL	PO BOX 27601 SEATTLE,WA 98165	92-3290613	300	
(7) CLARKE FOR SENATE	PO BOX 585 LAKE HOPATCONG,NJ 07849	86-1234671	1,000	
(8) COMMITTEE TO BACK ZACH	PO BOX 1515 LEESBURG,VA 20177	93-1812830	1,000	
(9) COMMITTEE TO ELECT DESHUNDRA	15903 BRAWNER DRIVE DUMFRIES,VA 22025	92-1488413	1,000	
(10) COMMITTEE TO ELECT EMILIE HUNT	2204 WILLIAM DRIVE VALPARAISO,IN 46385	92-2145191	1,000	
(11) COMMITTEE TO ELECT PATRICK CONNICK	PO BOX 208 GRETNA,LA 70054	64-0951214	1,000	
(12) COMMITTEE TO ELECT ROYCE DUPLESSIS	1527 SOUTH RAMPART STREET NEW ORLEANS,LA 70113	82-3342202	1,000	
(13) COMMITTEE TO ELECT SHAMAIYE HAYNES	2908 TUCKASEEGEE ROAD CHARLOTTE,NC 28208	92-1038743	500	
(14) DALIA FOR SUPERVISOR	216 ASHTON DRIVE YORKTOWN,VA 23690	83-4451415	250	
(15) DEBORAH VILLIO CAMPAIGN	5440 DAVID DRIVE KENNER,LA 70065	83-3134705	1,000	
(16) DEMOCRATIC LEGISLATIVE CAMPAIGN COMMITTEE	1225 I STREET NW SUITE 1250 WASHINGTON,DC 20005	52-1870839	50,000	
(17) DEMOCRATIC MAYORS ASSOCIATION	1660 L STREET NW SUITE 501 WASHINGTON,DC 20036	52-1535470	17,500	
(18) DEMOCRATIC MUNICIPAL OFFICIALS	815 BLACK LIVES MATTER PLAZA NW STE WASHINGTON,DC 20005	03-0393091	20,000	
(19) DEMOCRATIC STATE CENTRAL COMMITTEE OF LA	PO BOX 4385 BATON ROUGE,LA 70821	72-0748953	2,000	
(20) DEMOCRATS FOR MOUNT OLIVE 2023	30 LAMERSON CIRCLE BUDD LAKE,NJ 07828	92-3752194	500	
(21) DIANE AND JORDAN FOR LEONIA BOROUGH COUNCIL	95 VAN ORDEN AVENUE LEONIA,NJ 07605	93-2356862	200	
(22) DUSTIN J MILLER CAMPAIGN FUND	1565 SOUTH MARKET STREET OPELOUSAS,LA 70570	81-1108444	1,000	
(23) EFO LOUIS D GREENWALD FOR ASSEMBLY	2240-15 ROUTE 70 CHERRY HILL,NJ 08002	22-3565484	2,000	
(24) ELECT ATOOSA REASER	PO BOX 651052 STERLING,VA 20165	88-3064006	1,000	
(25) ELECT CHRISTY CLARK	PO BOX 3323 HUNTERSVILLE,NC 28070	82-3957055	500	
(26) ELECT MERCEDES AGUIRRE	101 HARDWICK LANE WAYNE,NJ 07470	93-2663748	200	
(27) ELECT PAM STUART	704 228TH AVENUE NORTHEAST APT 263 SAMMAMISH,WA 98074	92-3739124	500	
(28) ELECTION FUND OF LUCY WALTER COMMISSIONER	34 VAN DUYN DRIVE EWING,NJ 08618	87-2755889	200	
(29) EMERGE AMERICA	4 EMBARCADERO CENTER SUITE 1400 SAN FRANCISCO,CA 94111	90-0787684	5,000	
(30) ERIKA FOR LOUDOUN	PO BOX 4207 LEESBURG,VA 20177	88-2297573	1,000	
(31) ERIN MENDENHALL FOR SALT LAKE CITY MAYOR	PO BOX 521385 SALT LAKE CITY,UT 84152	83-4256525	1,000	
(32) EVERYTOWN FOR GUN SAFETY VICTORY FUND	PO BOX 4184 NEW YORK,NY 10163	81-3928802	7,000,000	
(33) FRIENDS FOR ELECT VICTORIA LUEVANOS	201 PRITCHARD ROAD VIRGINIA BEACH,VA 23452	87-4620042	1,000	
(34) FRIENDS OF ANNE FOR AT LARGE	25 CATOCTIN CIRCLE SOUTHEAST SUITE LEESBURG,VA 20177	92-3196655	500	
(35) FRIENDS OF BETH DAVIDSON	8 SUGARHILL ROAD NYACK,NY 10960	92-2000934	400	
(36) FRIENDS OF BONNIE LIMBIRD	2019 WEST 71ST STREET PRAIRIE VILLAGE,KS 66208	83-3396359	500	
(37) FRIENDS OF DON SCOTT	355 CRAWFORD STREET 704 PORTSMOUTH,VA 23704	84-1773321	25,000	
(38) FRIENDS OF DUSTIN REIDY	PO BOX 38174 ALBANY,NY 12203	83-3410176	500	
(39) FRIENDS OF JARED BEHR	410 JERICHO TURNPIKE SUITE 200 JERICHO,NY 11753	92-3426895	500	
(40) FRIENDS OF JESSICA SCHNEIDER	PO BOX 74262 NORTH CHESTERFIELD,VA 23236	88-4368997	500	
(41) FRIENDS OF KAREN KEYS-GAMARRA	2688 LINDA MARIE DRIVE OAKTON,VA 22124	92-2720750	1,000	
(42) FRIENDS OF LAURA JANE COHEN	PO BOX 273 BURKE,VA 22009	92-0869653	1,000	
(43) FRIENDS OF LAURA TEKRONY	PO BOX 281 ALDIE,VA 20105	92-0359776	1,000	
(44) FRIENDS OF MONICA FERGUSON	56 MERIWETHER TRAIL CONGERS,NY 10920	92-3113310	500	
(45) FRIENDS OF RUTH WALTER	1 NORMANDY ROAD BRONXVILLE,NY 10708	82-0901642	500	
(46) FRIENDS OF RYAN KENNEDY FOR HOPEWELL BOROUGH MAYOR	104 WEST BROAD STREET HOPEWELL,NJ 08525	46-2398995	500	
(47) FRIENDS OF SHAWYN PATTERSON-HOWARD	405 SOUTH 3RD AVENUE MOUNT VERNON,NY 10550	83-3690550	1,800	
(48) FRIENDS OF SYLVIA GLASS	20826 GLADWYNE COURT ASHBURN,VA 20147	83-1586456	500	
(49) FRIENDS OF TINA KOTEK	PO BOX 42307 PORTLAND,OR 97242	20-4689019	5,000	
(50) HEALEY DRISCOLL INAUGURAL COMMITTEE	202 BONHAM ROAD DEDHAM,MA 02026	92-1079542	5,000	
(51) HENSON FOR VIRGINIA	PO BOX 4026 WOODBRIDGE,VA 22194	88-0634041	1,000	
(52) JARRIS TAYLOR FOR DELEGATE	PO BOX 922 YORKTOWN,VA 23692	92-3403158	1,000	
(53) JB INAUGURATION COMMITTEE 2023	611 PENNSYLVANIA AVE SE SUITE 143 WASHINGTON,DC 20003	92-1359383	5,000	
(54) JENNIFER WOOFTER FOR DELEGATE	801 COURT STREET SUITE 101 LYNCHBURG,VA 24504	93-1695957	1,000	
(55) JEREMY RODDEN FOR HD90	1225 CHERRYTREE LANE CHESAPEAKE,VA 23320	93-2054304	1,000	
(56) JOSHUA COLE FOR DELEGATE	1138 JAMES MADISON CIRCLE FREDERICKSBURG,VA 22405	83-2479832	1,000	
(57) JULI BRISKMAN FOR SUPERVISOR	PO BOX 650343 STERLING,VA 20165	83-1784874	1,000	
(58) JULIE FOR LENEXA	10121 HALSEY STREET LENEXA,KS 66215	83-3387950	500	
(59) KANNAN FOR DELEGATE	22575 LEANNE TERRACE 308 ASHBURN,VA 20148	87-4591353	1,000	
(60) KEANE AND DOLAN FOR NEW PROVIDENCE COUNCIL	54 MIDVALE DRIVE NEW PROVIDENCE,NJ 07974	92-3461537	500	
(61) KELLY TOLAND INAUGURAL 2023	PO BOX 4507 OVERLAND PARK,KS 66204	92-1094628	3,100	
(62) KHANOO & SHARMA FOR STATE OFFICE	109 WINDING HILL DRIVE HACKETTSTOWN,NJ 07840	93-1563188	1,000	
(63) KIM FOR RENTON MAYOR	754 HOQUIAM PLACE NORTHEAST RENTON,WA 98059	92-3380809	500	
(64) KINCANNON FOR KNOXVILLE	941 ELEANOR STREET KNOXVILLE,TN 37917	83-1091101	1,000	
(65) LA LEGISLATIVE BLACK CAUCUS PAC	PO BOX 44244 BATON ROUGE,LA 70802	68-0674388	2,000	
(66) LAUFER FOR DELEGATE	2539 SUMMIT RIDGE TRAIL CHARLOTTESVILLE,VA 22911	88-2589512	1,000	
(67) LEIRION FOR LINCOLN MAYOR	1932 SOUTH 24TH STREET LINCOLN,NE 68502	83-2568838	1,000	
(68) MARLA DECKER FOR HOBOKEN CITY COUNCIL WARD 2	1500 GARDEN STREET APT 2G HOBOKEN,NJ 07030	93-1339519	250	
(69) MARTY FOR DELEGATE	PO BOX 6366 LEESBURG,VA 20178	92-1551840	1,000	
(70) MICHIGAN DEMOCRATIC STATE CENTRAL COMMITTEE	606 TOWNSEND STREET LANSING,MI 48933	38-1323848	20,000	
(71) NADARIUS CLARK FOR DELEGATE	PO BOX 829 SUFFOLK,VA 23439	86-1399122	50,000	
(72) NANCY FRY CAMPAIGN	5341 FLAMINGO PLACE COCONUT CREEK,FL 33073	88-4343064	1,000	
(73) NATIONAL DEMOCRATIC COUNTY OFFICIALS	PO BOX 40238 WASHINGTON,DC 20016	52-2120677	15,000	
(74) NEW JERSEY SENATE DEMOCRATIC MAJORITY	311 WEST HENRY STREET LINDEN,NJ 07036	27-4757751	20,000	
(75) NJ DEMOCRATIC ASSEMBLY CAMPAIGN COMMITTEE	12 NORTH STATE ROUTE 17 SUITE 320 PARAMUS,NJ 07652	20-4354327	20,000	
(76) ONE MINNESOTA INAUGURAL COMMITTEE	620 WESLEY COMMONS DRIVE SUITE 28 MINNEAPOLIS,MN 55427	83-2517291	5,000	
(77) ONE TOUGH MOTHER	2277 MASSEY ROAD MEMPHIS,TN 38119	84-3415092	500	
(78) PUJA FOR DULLES	PO BOX 393 ALDIE,VA 20105	88-3381391	1,000	
(79) REAGAN FOR OLATHE	17673 WEST 156TH STREET OLATHE,KS 66062	92-1814737	500	
(80) SHANTELL ROCK FOR WOODBRIDGE DISTRICT SCHOOLS	2459 BATTERY HILL CIRCLE WOODBRIDGE,VA 22191	92-1299117	500	
(81) SHAPIRO-DAVIS INAUGURATION	1617 JFK BOULEVARD SUITE 1650 PHILADELPHIA,PA 19103	92-1042075	5,000	
(82) SHAVONDA SUMTER FOR ASSEMBLY	190 VREELAND AVENUE PATERSON,NJ 07504	45-1280348	500	
(83) SIMONDS FOR DELEGATE	PO BOX 1952 NEWPORT NEWS,VA 23601	82-2426732	1,000	
(84) STEVEN REED FOR MONTGOMERY	575 S LAWRENCE STREET MONTGOMERY,AL 36104	83-2868560	1,000	
(85) SUPPORTERS OF STEPHANIE CRANDALL	10007 WINDING CREEK LANE FORT WAYNE,IN 46804	92-1042688	1,000	
(86) SUSANNA JOHNSON FOR SHERIFF	9010 MARKET PLACE PMB 123 LAKE STEVENS,WA 98258	92-0877803	1,200	
(87) TAMPA STRONG	701 SOUTH HOWARD AVENUE SUITE 106-8 TAMPA,FL 33606	82-2106298	1,000	
(88) TANK FOR SHERIFF	3150 ORLEANS STREET UNIT 31338 BELLINGHAM,WA 98228	92-0973977	1,200	
(89) VERLINA REYNOLDS-JACKSON FOR ASSEMBLY	705 GREENWOOD AVENUE TRENTON,NJ 08609	82-4277728	1,000	
(90) VERMONT DEMOCRATIC PARTY	73 MAIN STREET SUITE 400 MONTPELIER,VT 05602	03-0199446	6,000	
(91) VIRGINIA HOUSE DEMOCRATS	1021 EAST CARY STREET SUITE 1275 RICHMOND,VA 23219	75-3164111	25,000	
(92) VIRGINIA SENATE DEMOCRATIC CAUCUS	PO BOX 842 RICHMOND,VA 23218	54-1198977	60,000	
(93) CAMERONPAC	PO BOX 55399 METAIRIE,LA 70055	47-1307698	1,000	

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.		

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.

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-.		

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) 2019	(b) 2020	(c) 2021	(d) 2022	(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	Yes	
2	Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		No
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		No

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:	EVERYTOWN FOR GUN SAFETY ACTION FUND MADE CONTRIBUTIONS TO CANDIDATES AND POLITICAL COMMITTEES AS WELL AS COMMUNICATIONS RELATED TO PROMOTING THE ELECTION OF CANDIDATES WHO SUPPORT THE ENACTMENT OF COMMON-SENSE PUBLIC SAFETY MEASURES TO MAKE OUR COMMUNITIES SAFER FROM GUN VIOLENCE AND WHO WILL ENFORCE STRONGER GUN SAFETY LAWS.

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

2022

Open to Public Inspection

Name of the organization
EVERYTOWN FOR GUN SAFETY ACTION FUND INC

Employer identification number
20-8802884

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 July 25, 2006, 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	427,961		260,210	167,751
d Equipment	58,661		58,661	0
e Other	306,925		227,114	79,811
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* . . ▶				247,562

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)RIGHT OF USE ASSETS	1,255,664
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* ▶	1,255,664

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	
LEASE LIABILITIES	1,426,017
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 25.)* ▶	1,426,017

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	61,861,555
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	108,419		
b	Donated services and use of facilities	2b	1,151,190		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	-50,000		
e	Add lines **2a** through **2d**			2e	1,209,609
3	Subtract line **2e** from line **1**			3	60,651,946
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total revenue. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12.)			5	60,651,946

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	56,482,867
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	1,151,190		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	1,151,190
3	Subtract line **2e** from line **1**			3	55,331,677
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total expenses. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18.)			5	55,331,677

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:	THE FUND RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF THOSE TAX POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED.
PART XI, LINE 2D - OTHER ADJUSTMENTS:	ONE-TIME ADJUSTMENT FOR UNRECOVERED ACCOUNTS RECEIVABLE -50,000.

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

2023

Open to Public Inspection

Name of the organization
EVERYTOWN FOR GUN SAFETY ACTION FUND INC

Employer identification number
20-8802884

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	CAPITAL STRATEGIES 3111 VIA DOLCE 601 MARINA DEL REY, CA 90292	IN-PERSON SOLICITATION		No	10,754,831	175,942	10,578,889
2	LISA PRESTA 163 FOREST SIDE AVENUE SAN FRANCISCO, CA 94127	IN-PERSON SOLICITATION		No	1,152,285	33,644	1,118,641
3	O'BRIEN GARRETT 1200 G STREET NW SUITE 700 WASHINGTON, DC 20005	FUNDRAISING STRATEGIC CONSULTING		No	798,963	315,766	483,197
4	JACKIE BROT-WEINBERG 11 CYPRESS DRIVE WOODBURY, NY 11797	IN-PERSON SOLICITATION		No	321,910	12,000	309,910
5	ALLEGIANCE FUNDRAISING LLC PO BOX 9132 FARGO, ND 58160	FUNDRAISING STRATEGIC CONSULTING		No	265,273	295,472	-30,199
6	ANNE LEWIS STRATEGIES LLC 650 MASSACHUSETTS AVENUE NW SUITE 5 WASHINGTON, DC 20001	FUNDRAISING STRATEGIC CONSULTING		No	0	377,705	-377,705
7	SEA CHANGE STRATEGIES LLC 7409 BIRCH AVENUE TAKOMA PARK, MD 20912	FUNDRAISING STRATEGIC CONSULTING		No	0	110,935	-110,935
8	BOYSENBERRY STRATEGIES LLC 1804 BAY STREET SE WASHINGTON, DC 20003	FUNDRAISING STRATEGIC CONSULTING		No	0	45,600	-45,600
9	BLUE WAVE POLITICAL PARTNERS LLC 401 SECOND AVENUE SOUTH SUITE 303 SEATTLE, WA 98104	IN-PERSON SOLICITATION		No	0	12,000	-12,000
10							
Total . . . . . ▶					13,293,262	1,379,064	11,914,198

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.

AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, MA, MD, ME, MI, MO, MN, MS, NV, NC, ND, NH, NJ, NM, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV

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 I, LINE 2B, COLUMN (V)	THE AGREEMENT WITH ANNE LEWIS STRATEGIES LLC INCLUDED SERVICES TO PLACE AND MANAGE DIGITAL ADVERTISING. THIS AGREEMENT INCLUDED SEPARATE PROVISIONS FOR AD BUY EXPENSES TO BE PAID TO DIGITAL ADVERTISING PLATFORMS AND THE VENDOR'S PROFESSIONAL FUNDRAISING FEES RELATED TO THE PLANNING AND PLACEMENT OF THE ADS. EVERYTOWN PAID A MEDIA ADVERTISING FEE OF $256,205. EVERYTOWN ALSO HAD A SEPARATE AGREEMENT WITH ANNE LEWIS STRATEGIES LLC FOR DATA ACQUISITION.

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

2023

Open to Public Inspection

Name of the organization
EVERYTOWN FOR GUN SAFETY ACTION FUND INC

Employer identification number
20-8802884

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) AFRICAN AMERICAN MAYORS ASSOCIATION 660 N CAPITOL STE 450 WASHINGTON,DC 20001	46-5593933	501C3	0	15,000			GENERAL OPERATING SUPPORT
(2) AMERICA VOTES 1155 CONNECTICUT AVENUE NW STE 600 WASHINGTON,DC 20036	26-4568349	501C4	0	45,000			GENERAL OPERATING SUPPORT
(3) BOARD OF LATINO LEGISLATIVE LEADERS 815A BRAZOS 65 AUSTIN,TX 78701	20-2075553	501C3	0	25,000			GENERAL OPERATING SUPPORT
(4) CONGRESSIONAL BLACK CAUCUS POLITICAL EDUCATION AND LEADERSHIP INSTITUTE 413 NEW JERSEY AVENUE SOUTHEAST WASHINGTON,DC 20003	52-2270607	501C4	0	30,500			GENERAL OPERATING SUPPORT & ANNUAL POLICY CONFERENCE SPONSORSHIP
(5) EQUALITY CALIFORNIA INC 555 W 5TH STREET FLOOR 35 LOS ANGELES,CA 90013	95-4708781	501C4	0	10,000			LA EQUALITY AWARDS 2023 SPONSORSHIP
(6) HUMAN RIGHTS CAMPAIGN INC 1640 RHODE ISLAND AVE NW WASHINGTON,DC 20036	52-1243457	501C4	0	10,000			2023 HUMAN RIGHTS CAMPAIGN SPONSORSHIP
(7) ILLINOIS LEGISLATIVE BLACK CAUCUS FOUNDATION PO BOX 10243 SPRINGFIELD,IL 62791	36-4478169	501C3	0	10,000			GENERAL OPERATING SUPPORT
(8) LGBTQ VICTORY INSTITUTE INC 1225 I STREET NW SUITE 525 WASHINGTON,DC 20005	52-1835268	501C3	0	10,000			2023 NATIONAL PARTNERSHIP & GENERAL OPERATING SUPPORT
(9) MASSACHUSETTS COALITION TO PREVENT GUN VIOLENCE INC 11 BEACON STREET SUITE 722 BOSTON,MA 02108	84-5092934	501C3	0	18,000			GENERAL SUPPORT FOR MVP PROGRAM & 8TH ANNUAL PEACE MVP AWARDS SPONSORSHIP
(10) NATIONAL BLACK CAUCUS OF STATE LEGISLATORS 444 N CAPITOL STREET NW SUITE 622 WASHINGTON,DC 20001	52-1218832	501C3	0	15,000			GENERAL OPERATING SUPPORT
(11) NATIONAL HISPANIC CAUCUS OF STATE LEGISLATORS 1444 I STREET NORTHWEST SUITE 900 WASHINGTON,DC 20005	84-1168319	501C3	0	35,000			GENERAL OPERATING SUPPORT
(12) NATIONAL LEAGUE OF CITIES 660 NORTH CAPITOL	53-0226780	501C4	0	20,000			NLC SPONSORSHIP FOR 2023 EVENT

STREET NW NO 4 WASHINGTON,DC 20001							
(13) NCSL FOUNDATION FOR STATE LEGISLATURES 7700 EAST FIRST PLACE DENVER,CO 80230	74-2232576	501C3	0	50,000			NATIONAL CAUCUS OF NATIVE AMERICAN LEGISLATORS SPONSORSHIP
(14) OUR KIDS DESERVE BETTER 927 DOUGLAS AVENUE NASHVILLE,TN 37206	93-2605727	501C4	0	10,000			GENERAL OPERATING SUPPORT
(15) ROAD TO MICHIGAN'S FUTURE PO BOX 12248 LANSING,MI 48901	84-4298056	501C4	0	200,000			GENERAL OPERATING SUPPORT
(16) SAFE SCHOOLS SAFE COMMUNITIES OREGON 715 NW HOYT STREET 6536 PORTLAND,OR 97228	88-3710827		0	10,000			DONATION TO BALLOT MEASURE COMMITTEE
(17) STATE SOLUTIONS INC 1747 PENNSYLVANIA AVENUE NW SUITE 250 WASHINGTON,DC 20006	45-3092150	501C4	0	50,000			MEMBERSHIP DUES
(18) THE COUNCIL OF STATE GOVERNMENTS LTD 1776 AVENUE OF THE STATES LEXINGTON,KY 40511	36-6000818	501C3	0	62,500			CSG WEST ANNUAL MEETING SPONSORSHIP, GENERAL OPERATING SUPPORT & SSL RECEPTION IN RALEIGH SPONSORSHIP
(19) THE US CONFERENCE OF MAYORS 1620 I STREET NW WASHINGTON,DC 20006	53-0196642	501C3	0	25,000			GENERAL OPERATING SUPPORT
(20) VOICES FOR A SAFER TENNESSEE 4117 HILLSBORO PIKE SUITE 103-320 NASHVILLE,TN 37215	92-3584070	501C4	0	50,000			GENERAL OPERATING SUPPORT
(21) WOMEN IN GOVERNMENT RELATIONS INC 908 KING STREET SUITE 320 ALEXANDRIA,VA 22314	52-1081459	501C6	0	20,000			WGR EMPOWERMENT NETWORK SPONSORSHIP

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 10

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 11

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:	THE ORGANIZATION MAINTAINS COPIES OF THE AGREEMENTS AND MONITORS EACH GRANTEE'S PERFORMANCE.

Additional Data

Return to Form

Software ID:

Software Version:

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

2023

Open to Public Inspection

Name of the organization
EVERYTOWN FOR GUN SAFETY ACTION FUND INC

Employer identification number
20-8802884

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**	Yes	
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**		No
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 CHARLES B KELLY POLITICAL AFFAIRS SENIOR VICE PRESID	**(i)**	390,613	0	0	4,880	36,077	431,570	0
	(ii)	0	0	0	0	0	0	0
2 MATTHEW MCTIGHE COO & EXECUTIVE VICE PRESI	**(i)**	387,280	0	8,798	13,061	12,421	421,560	0
	(ii)	0	0	0	0	0	0	0
3 NICHOLAS SUPLINA LAW & POLICY SENIOR VICE PRESIDENT	**(i)**	323,530	0	0	0	36,077	359,607	0
	(ii)	0	0	0	0	0	0	0
4 ZOE L SEGAL-REICHLIN OPERATIONS & GENERAL COUNSEL SENIOR	**(i)**	300,946	0	0	11,320	36,077	348,343	0
	(ii)	0	0	0	0	0	0	0
5 STACEY MERA LIPSON COMMUNICATIONS CHIEF PUBLIC AFFAIRS	**(i)**	244,788	0	0	9,792	36,077	290,657	0
	(ii)	0	0	0	0	0	0	0
6 LINDSAY CLARIDA CHIEF ADVOCACY CAMPAIGN OFFICER	**(i)**	224,422	0	0	8,533	25,667	258,622	0
	(ii)	0	0	0	0	0	0	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 I, LINE 1A	FIRST CLASS TRAVEL WAS OCCASIONALLY USED BY THE PRESIDENT AND A LIMITED NUMBER OF THE EXECUTIVE MANAGEMENT TEAM, IN ACCORDANCE WITH THE ORGANIZATION'S DOCUMENTED TRAVEL & EXPENSE POLICY AND AS APPROVED BY THE CHIEF FINANCIAL OFFICER. THE COSTS OF SUCH TRAVEL FOR BUSINESS PURPOSES WERE PROPERLY EXCLUDED FROM TAXABLE COMPENSATION.

Additional Data

Return to Form

Software ID:

Software Version:

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

2023

Open to Public Inspection

Name of the organization
EVERYTOWN FOR GUN SAFETY ACTION FUND INC

Employer identification number
20-8802884

Return Reference	Explanation
FORM 990, PART III, LINE 4A, DESCRIPTION OF PROGRAM SERVICE ACCOMPLISHMENTS	2023 WAS A POWER-BUILDING YEAR FOR THE GUN VIOLENCE PREVENTION MOVEMENT AND, IN THE WAKE OF TRAGEDY, WE FORGED NEW PATHS IN OUR FIGHT TO KEEP OUR FAMILIES AND COMMUNITIES SAFE. EVERYTOWN, MOMS DEMAND ACTION AND STUDENTS DEMAND ACTION VOLUNTEERS BUILT ON THE 2022 PASSAGE OF THE BIPARTISAN SAFER COMMUNITIES ACT (BSCA) BY SUCCESSFULLY URGING THE BIDEN-HARRIS ADMINISTRATION TO ISSUE A GAME-CHANGING, NEW RULE CLARIFYING THE DEFINITION OF WHO IS "ENGAGED IN THE BUSINESS" OF SELLING FIREARMS, AND THEREFORE REQUIRED TO GET A LICENSE AND PERFORM BACKGROUND CHECKS ON ALL SALES. IN SEPTEMBER, THE U.S. BUREAU OF ALCOHOL, TOBACCO, AND FIREARMS ("ATF") ANNOUNCED THE "ENGAGED IN THE BUSINESS" PROPOSED RULE TO CLOSE THE ONLINE AND GUN SHOW LOOPHOLE, MOVING THE NATION CLOSER TO BACKGROUND CHECKS ON ALL GUN SALES. DURING THE COMMENT PERIOD, EVERYTOWN SUPPORTERS SUBMITTED OVER 238,000 COMMENTS IN FAVOR OF THE RULE. ON THE ONE YEAR ANNIVERSARY OF PASSAGE OF BSCA, PRESIDENT BIDEN SPOKE AT THE NATIONAL SAFER COMMUNITIES SUMMIT IN HARTFORD, CONNECTICUT, WHICH WAS HOSTED BY EVERYTOWN, MOMS DEMAND ACTION, STUDENTS DEMAND ACTION, AND OTHERS, HIGHLIGHTING THE PROGRESS WE'VE MADE IN THE LAW'S FIRST YEAR. THE WORK DIDN'T STOP THERE. THANKS TO HARD FOUGHT ADVOCACY OF EVERYTOWN, ALONGSIDE MOMS DEMAND ACTION AND STUDENTS DEMAND ACTION VOLUNTEERS, IN STATEHOUSES ACROSS THE COUNTRY, LAWMAKERS PASSED A RECORD-BREAKING 130 GUN SAFETY POLICIES WHILE BLOCKING 95 PERCENT OF THE GUN LOBBY'S DANGEROUS AGENDA, AND ALLOCATING $693 MILLION TO GUN VIOLENCE PREVENTION EFFORTS. IN VIRGINIA, AFTER EVERYTOWN STRATEGICALLY ENGAGED AND INVESTED IN THE STATE, GUN SENSE LEGISLATORS TOOK CONTROL OF THE VIRGINIA HOUSE OF DELEGATES AND MAINTAINED THEIR MAJORITY IN THE VIRGINIA SENATE. NOTABLY, MOMS DEMAND ACTION VOLUNTEERS HAD A RESOUNDING VICTORY IN THE VIRGINIA ELECTION, NOW MAKING UP NEARLY 20 PERCENT OF THE VIRGINIA HOUSE DEMOCRATIC CAUCUS. OVERALL, IN 2023, 162 MOMS DEMAND ACTION VOLUNTEERS RAN FOR OFFICE IN 28 STATES, WITH 96 WINNING THEIR ELECTIONS, SHOWING THE POWER OF MOMS DEMAND ACTION VOLUNTEERS GOING FROM ADVOCATING FOR GOOD POLICY TO WRITING IT. AS MOMS DEMAND ACTION EMBARKED ON ITS 10TH YEAR OF ADVOCACY, WE WELCOMED MORE VOLUNTEERS AND SUPPORTERS TO OUR MOVEMENT THAN EVER BEFORE, WHICH WAS ON FULL DISPLAY DURING OUR 10TH ANNUAL TRAINING CONFERENCE, GUN SENSE UNIVERSITY, THE FIRST IN-PERSON SINCE THE PANDEMIC. THERE, VICE PRESIDENT HARRIS JOINED FOR A SWEEPING CONVERSATION ABOUT THE POWER OF THE GUN SAFETY MOVEMENT AND ILLINOIS GOVERNOR J.B. PRITZKER AND OTHER STATE GUN SENSE LEADERS JOINED VOLUNTEERS ON STAGE TO SIGN LANDMARK LEGISLATION TO HOLD THE GUN INDUSTRY ACCOUNTABLE INTO LAW AND CELEBRATE THE ILLINOIS SUPREME COURT'S RULING TO UPHOLD THE STATE'S ASSAULT WEAPONS BAN, WHICH WAS PASSED IN THE WAKE OF THE HIGHLAND PARK SHOOTING TRAGEDY. OUR MOVEMENT IS LARGER AND MORE DIVERSE THAN EVER BEFORE, AND WE CONTINUED TO SHOW AMERICANS FROM ALL WALKS OF LIFE THAT WE CAN MAKE LIFE-SAVING PROGRESS WHEN WE WORK TOGETHER.
FORM 990, PART VI, SECTION A, LINE 6	THE ORGANIZATION'S BYLAWS PROVIDE THAT THE ORGANIZATION'S BOARD OF DIRECTORS WILL SERVE AS THE MEMBERS OF THE ORGANIZATION.
FORM 990, PART VI, SECTION A, LINE 7A	THE ORGANIZATION'S BYLAWS PROVIDE THAT THE ORGANIZATION'S BOARD OF DIRECTORS WILL SERVE AS THE MEMBERS OF THE ORGANIZATION, WHO WILL ELECT THE MEMBERS OF THE BOARD OF DIRECTORS.
FORM 990, PART VI, SECTION A, LINE 8B	THE CORPORATION HAS NO COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BOARD.
FORM 990, PART VI, SECTION B, LINE 11B	ALL OF THE DIRECTORS WILL BE PROVIDED WITH A COPY OF THE CURRENT YEAR FORM 990 BEFORE THE PRESIDENT SIGNS AND FILES THE RETURN.
FORM 990, PART VI, SECTION B, LINE 12C	THE BOARD OF DIRECTORS REQUIRES FULL DISCLOSURE OF ALL ACTUAL AND POTENTIAL CONFLICTS OF INTEREST. EACH DIRECTOR SHALL DISCLOSE ANY AND ALL FACTS THAT MAY BE CONSTRUED AS A CONFLICT OF INTEREST, BOTH THROUGH AN ANNUAL DISCLOSURE PROCESS AND WHENEVER SUCH ACTUAL OR POTENTIAL CONFLICT OCCURS. THE BOARD OF DIRECTORS WILL DETERMINE WHETHER OR NOT A CONFLICT OF INTEREST EXISTS, AND WHETHER OR NOT SUCH CONFLICT MATERIALLY AND ADVERSELY AFFECTS THE INTERESTS OF EVERYTOWN FOR GUN SAFETY ACTION FUND INC. A DIRECTOR WHOSE POTENTIAL CONFLICT IS UNDER REVIEW MAY NOT DEBATE, VOTE, OR OTHERWISE PARTICIPATE IN SUCH DETERMINATION. IF THE BOARD OF DIRECTORS DETERMINES THAT AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST DOES EXIST, THE BOARD SHALL ALSO DETERMINE AN APPROPRIATE REMEDY.
FORM 990, PART VI, SECTION B, LINE 15	THE BOARD OF DIRECTORS AND THE PRESIDENT HAVE INSTITUTED AN ANNUAL REVIEW AND APPROVAL PROCESS FOR COMPENSATION OF OFFICERS AND KEY EMPLOYEES. THIS PROCESS TAKES INTO ACCOUNT THE ORGANIZATION'S FINANCIAL POSITION AND EVALUATES AVERAGE SALARIES USING COMPARABLE INTERNAL AND EXTERNAL DATA TO ENSURE THAT COMPENSATION IS REASONABLE. OFFICERS WHOSE COMPENSATION IS UNDER REVIEW DO NOT PARTICIPATE IN THE REVIEW AND APPROVAL PROCESS. THE APPROVAL PROCESS INCLUDES CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATION AND DECISION.
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS AND FORM 990S AVAILABLE TO THE PUBLIC ON ITS WEBSITE OR UPON REQUEST. ADDITIONALLY, THE ORGANIZATION'S FORM 1023 IS AVAILABLE UPON REQUEST. ALL REQUESTS FOR REVIEWING THE ORGANIZATION'S DOCUMENTS CAN BE ADDRESSED TO THE ORGANIZATION IN CARE OF GELLER & COMPANY LLC, AS NOTED IN PART VI, SECTION C, QUESTION 20.
FORM 990, PART XI, LINE 9:	OTHER CHANGES IN NET ASSETS -50,000.
FORM 990, PART XII, LINE 2C:	THE BOARD OF DIRECTORS DIRECTLY EXERCISE OVERSIGHT OF THE AUDIT OF FINANCIAL STATEMENTS AND THE SELECTION OF AN INDEPENDENT AUDITOR.
COST SHARING AGREEMENT	THE ORGANIZATION IS PARTY TO A COST SHARING AGREEMENT WITH EVERYTOWN FOR GUN SAFETY SUPPORT FUND, INC. THE PURPOSE OF THE COST SHARING AGREEMENT IS TO MINIMIZE DUPLICATIVE EXPENSES AND TO CARRY OUT THE ORGANIZATIONS' MISSIONS IN AN ECONOMICAL AND EFFICIENT MANNER, WHICH INCLUDES THE SHARING OF EMPLOYEES WHOSE SKILLS AND KNOWLEDGE WILL ASSIST BOTH ORGANIZATIONS, CONSISTENT WITH EACH ORGANIZATION'S TAX EXEMPT PURPOSE.

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

2023

Open to Public Inspection

Name of the organization
EVERYTOWN FOR GUN SAFETY ACTION FUND INC

Employer identification number
20-8802884

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

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	(g) No
(1) EVERYTOWN FEDERAL VICTORY FUND PO BOX 4184 NEW YORK, NY 10163 85-4276951	POLITICAL ACTIVITY	DE	527	N/A	EVERYTOWN FOR GUN SAFETY ACTION FUND INC	Yes	
(2) EVERYTOWN FOR GUN SAFETY VICTORY FUND PO BOX 4184 NEW YORK, NY 10163 81-3928802	POLITICAL ACTIVITY	DE	527	N/A	EVERYTOWN FOR GUN SAFETY ACTION FUND INC	Yes	
(3) EVERYTOWN FOR GUN SAFETY VICTORY FUND STATE COMMITTEE LLC PO BOX 4184 NEW YORK, NY 10163 85-2959895	POLITICAL ACTIVITY	DE	527	N/A	EVERYTOWN FOR GUN SAFETY VICTORY FUND	Yes	

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? Yes	(h) Disproprtionate allocations? No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) General or managing partner? No	(k) Percentage ownership

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	(i) Section 512(b)(13) controlled entity? 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	Yes	
c Gift, grant, or capital contribution from related organization(s)	1c		No
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		No
o Sharing of paid employees with related organization(s)	1o		No
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	Yes	
s Other transfer of cash or property from related organization(s)	1s	Yes	

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
(1) EVERYTOWN FOR GUN SAFETY VICTORY FUND	B	7,000,000	CASH

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) 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		Yes	No	

Part VII Supplemental Information

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

Return Reference	Explanation

Additional Data

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