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

2024

Open to Public Inspection

A For the 2024 calendar year, or tax year beginning 01-01-2024 , and ending 12-31-2024

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 $ 57,140,663

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 2024 (Part V, line 2a)	**5**	224
6	Total number of volunteers (estimate if necessary)	**6**	1,037,379
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	0
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	**7b**	0

		Prior Year	Current Year
Revenue			
8	Contributions and grants (Part VIII, line 1h)	58,781,460	55,448,288
9	Program service revenue (Part VIII, line 2g)	597,509	161,381
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	748,982	1,155,120
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	523,995	351,737
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	60,651,946	57,116,526
Expenses			
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	741,000	1,267,030
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)	18,804,442	22,190,680
16a	Professional fundraising fees (Part IX, column (A), line 11e)	740,205	857,201
b	Total fundraising expenses (Part IX, column (D), line 25) 3,479,027		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	35,046,030	32,192,558
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	55,331,677	56,507,469
19	Revenue less expenses. Subtract line 18 from line 12	5,320,269	609,057

		Beginning of Current Year	End of Year
Net Assets or Fund Balances			
20	Total assets (Part X, line 16)	23,196,191	23,297,960
21	Total liabilities (Part X, line 26)	2,419,202	1,978,082
22	Net assets or fund balances. Subtract line 21 from line 20	20,776,989	21,319,878

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: 2025-04-15
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) 583-6001

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 $ 43,124,820 including grants of $ 1,267,030) (Revenue $ 161,381)

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** 43,124,820

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		No
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	106		
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**	224		
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 the 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, RI, SC, TN, 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) JASON POST DIRECTOR	0.50	X						0	0	0
(2) MICHAEL BEST DIRECTOR	0.50	X						0	0	0
(3) HOWARD WOLFSON DIRECTOR & CHAIRPERSON AS OF 5/21/24	0.50	X		X				0	0	0
(4) DENNIS WALCOTT DIRECTOR	0.50	X						0	0	0
(5) RICHARD K DESCHERER DIRECTOR & CHAIRPERSON THRU 3/23/24	0.50	X		X				0	0	0
(6) JOHN FEINBLATT PRESIDENT	15.00			X				0	0	0
(7) MICHAEL BROUILLARD SECRETARY/TREASURER, CFO	20.00			X				0	0	0
(8) MATTHEW MCTIGHE COO & EXECUTIVE VICE PRESIDENT	40.00				X			416,985	0	27,228
(9) CHARLES KELLY POLITICAL AFFAIRS SENIOR VICE PRESIDENT	40.00					X		409,988	0	45,843
(10) NICHOLAS SUPLINA LAW & POLICY SENIOR VICE PRESIDENT	40.00					X		344,988	0	41,060
(11) ZOE SEGAL-REICHLIN SVP, DEPUTY COO & GENERAL COUNSEL	40.00					X		329,888	0	52,769
(12) MONISHA HENLEY GOVERNMENT AFFAIRS SENIOR VICE PRESIDENT	40.00					X		326,251	0	39,949
(13) STACEY LIPSON COMMUNICATIONS CHIEF PUBLIC AFFAIRS OFFICER	40.00					X		264,988	0	51,660

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)								2,093,088	0	258,509

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 76

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**3**		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	**4**	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	**5**		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
GELLER & COMPANY LLC PO BOX 1510 NEW YORK, NY 10150	FINANCIAL AND ADVISORY SERVICES	4,573,246
DUPONT HOTEL PROJECT OWNER LLC 1919 CONNECTICUT AVENUE NW WASHINGTON, DC 20009	LODGING AND ACCOMODATION	1,903,094
VENABLE LLP 750 E PRATT STREET SUITE 900 BALTIMORE, MD 21202	LEGAL SERVICES	1,232,746
ANNE LEWIS STRATEGIES LLC 650 MASSACHUSETTS AVENUE NW SUITE WASHINGTON, DC 20001	FUNDRAISING STRATEGIC CONSULTING	1,041,513
ALLEGIANCE FUNDRAISING LLC PO BOX 9132 FARGO, ND 58160	FUNDRAISING STRATEGIC CONSULTING	835,159

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 40

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	55,448,288			
g Noncash contributions included in lines 1a - 1f:$ 1g	24,137			
h **Total.** Add lines 1a-1f	55,448,288			
Program Service Revenue — 2a CONFERENCE AND OTHER INCOME	Business Code 541900	161,381	161,381	
b				
c				
d				
e				
f All other program service revenue.				
g **Total.** Add lines 2a–2f.	161,381			
3 Investment income (including dividends, interest, and other similar amounts)		1,155,204		1,155,204
4 Income from investment of tax-exempt bond proceeds				
5 Royalties		335,669		335,669
6a Gross rents 6a (i) Real	(ii) Personal			
b Less: rental expenses 6b				
c Rental income or (loss) 6c				
d Net rental income or (loss)				
7a Gross amount from sales of assets other than inventory 7a (i) Securities	24,053 (ii) Other			
b Less: cost or other basis and sales expenses 7b	24,137			
c Gain or (loss) 7c	-84			
d Net gain or (loss)		-84		-84
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 — 11a PRIOR YEAR REFUNDS	Business Code 900099	16,068		16,068
b				
c				
OtherRevenueMiscAmt				
d All other revenue				
e **Total.** Add lines 11a–11d		16,068		
12 **Total revenue.** See instructions		57,116,526	161,381	0 1,506,857

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	1,267,030	1,267,030		
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	275,820	92,124	91,848	91,848
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	16,669,443	14,147,381	2,149,394	372,668
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	543,991	461,287	69,992	12,712
9 Other employee benefits	3,388,524	2,959,494	371,433	57,597
10 Payroll taxes	1,312,902	1,139,947	146,110	26,845
11 Fees for services (non-employees):				
a Management				
b Legal	1,235,614	1,043,723	159,438	32,453
c Accounting	4,690,686		4,690,686	
d Lobbying	3,988,341	3,988,341		
e Professional fundraising services. See Part IV, line 17	857,201			857,201
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)	3,419,433	2,986,285	299,657	133,491
12 Advertising and promotion	1,645,827	870,827		775,000
13 Office expenses	753,287	277,722	473,146	2,419
14 Information technology	857,238	500,924	341,597	14,717
15 Royalties				
16 Occupancy	424,818	424,818		
17 Travel	3,343,316	3,244,632	53,285	45,399
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,446,206	2,267,043	77,904	101,259
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	188,539	148,108	33,593	6,838
23 Insurance	230,459	12,048	218,411	
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	6,998,681	6,998,681		
b POSTAGE AND PRINTING	703,439	81,029	1,561	620,849
c BANK & CREDIT CARD FEES	474,764	550	474,214	
d DATA ACQUISITION	415,603	197,972		217,631
e All other expenses	376,307	14,854	251,353	110,100
25 **Total functional expenses.** Add lines 1 through 24e	56,507,469	43,124,820	9,903,622	3,479,027
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	2,570,651	1	786,960
	2	Savings and temporary cash investments	17,508,161	2	19,318,682
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	634,965	4	619,510
	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	545,751	9	910,104
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 1,238,134			
	b	Less: accumulated depreciation — 10b: 635,814	247,562	10c	602,320
	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	433,437	14	269,530
	15	Other assets. See Part IV, line 11	1,255,664	15	790,854
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)	23,196,191	16	23,297,960
Liabilities	17	Accounts payable and accrued expenses	981,685	17	1,063,190
	18	Grants payable	11,500	18	6,000
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	1,426,017	25	908,892
	26	**Total liabilities.** Add lines 17 through 25	2,419,202	26	1,978,082
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	20,776,989	27	21,319,878
	28	Net assets with donor restrictions		28	
		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	20,776,989	32	21,319,878
	33	Total liabilities and net assets/fund balances	23,196,191	33	23,297,960

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	57,116,526
2	Total expenses (must equal Part IX, column (A), line 25)	2	56,507,469
3	Revenue less expenses. Subtract line 2 from line 1	3	609,057
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	20,776,989
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-66,168
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column	10	21,319,878

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)
(Rev. January 2025)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

Name of the organization
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.)

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

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

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

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

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

Name of organization	**Employer identification number**
EVERYTOWN FOR GUN SAFETY ACTION FUND INC	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 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 2024 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 ▶ $ 11,024,075

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 $ 4,025,394

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $ 6,998,681

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b $ 11,024,075

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) ADDISON PETERSON FOR ANTIOCH CITY COUNCIL DISTRICT 3 2024	5409 MOUNTAIN RIDGE WAY ANTIOCH,CA 94531	93-4571162	250	
(2) AILINA CARONA FOR STATE REPRESENTATIVE	17 KILKHAM COURT MOUNT JULIET,TN 37122	93-2448082	500	
(3) ALISON KAMHI FOR PALO ALTO SCHOOL BOARD 2024	511 OLMSTED ROAD STANFORD,CA 94305	99-3246910	500	
(4) ALL TOGETHER COLORADO	PO BOX 102673 DENVER,CO 80250	85-3959470	50,000	
(5) ALLISON GORMAN FOR TN HOUSE	400 TREMONT STREET CHATTANOOGA,TN 37405	88-1637803	500	
(6) ARIZONA DEMOCRATIC PARTY	PO BOX 36123 PHOENIX,AZ 85067	86-0125308	50,000	
(7) ALYSSA BLACK	PO BOX 9141 ESSEX,VT 05451	99-9999999	500	
(8) AMANDA COCHRANE	PO BOX 23 ST JOHNSBURY,VT 05819	99-9999999	500	
(9) ATLAS FOR NEVADA	1121 BOBBY BASIN AVENUE HENDERSON,NV 89014	93-4590751	1,000	
(10) BARUTH SENATE	145 STARR FARM ROAD BURLINGTON,VT 05408	99-9999999	1,000	
(11) BETH HELFRICH FOR NC	PO BOX 771 DAVIDSON,NC 28036	93-3648243	1,000	
(12) BOB FERGUSON FOR GOVERNOR	PO BOX 22169 SEATTLE,WA 98122	01-0699595	2,400	
(13) BRIAN EGOLF SPEAKER FUND	PO BOX 27066 ALBUQUERQUE,NM 87125	82-1094444	30,000	
(14) BRIAN FOR UTAH	875 SOUTH DONNER WAY APT 1504 SALT LAKE CITY,UT 84108	93-4359646	2,500	
(15) CAMPAIGN TO ELECT MICHELLE TAFOYA	1535 DRAKE SW LOS LUNAS,NM 87031	99-1928909	250	
(16) CAMPAIGN TO ELECT ROCHELLE NGUYEN	PO BOX 26025 LAS VEGAS,NV 89126	83-2881476	1,000	
(17) CAMPBELL FOR STATE SENATE	PO BOX 330302 NASHVILLE,TN 37203	84-4712682	1,000	
(18) CATHERINE STEFANI FOR ASSEMBLY 2024	312 CLAY STREET SUITE 300 OAKLAND,CA 94607	92-2633794	500	
(19) CAVANAUGH FOR NEBRASKA	916 SOUTH 58TH STREET OMAHA,NE 68106	84-2110715	500	
(20) CHAMBERS FOR SENATE 2024	515 S FIGUEROA STREET SUITE 1110 LOS ANGELES,CA 90071	92-3809312	500	
(21) CHARITY FOR VERMONT	PO BOX 92 RICHMOND,VT 05477	88-2169327	1,000	
(22) CHARLOTTE LITTLE FOR HD68	10018 ERLITZ DRIVE NORTHWEST ALBUQUERQUE,NM 87114	87-4531764	5,500	
(23) CINDY MURPHY-SALOMONE FOR PARKLAND CITY COMMISSIONER DISTRICT 3	9762 CLEMMONS STREET PARKLAND,FL 33076	99-9999999	500	
(24) CINDY NAVA FOR NEW MEXICO	PO BOX 5328 BERNALILLO,NM 87004	99-1186684	2,500	
(25) CITIZENS FOR DON HOUSE	51 SUN LAKE DRIVE BELMONT,NH 03220	84-4675332	500	
(26) CITIZENS FOR JACKIE WILLIAMSON	PO BOX 13 WHEATON,IL 60187	88-3515945	1,000	
(27) CITIZENS FOR KARINA VILLA	PO BOX 457 WEST CHICAGO,IL 60186	81-4820548	1,000	
(28) CITIZENS FOR KIM ZITO	1013 CASSIDY DRIVE MANHATTAN,KS 66502	88-2166929	500	
(29) CITIZENS FOR MARY MAHADY	803 N FRONT STREET MCHENRY,IL 60050	45-5500577	1,000	
(30) COLE 4 VA	PO BOX 73 FREDERICKSBURG,VA 22404	83-2479832	1,250	
(31) COLLECTIVE SUPER PAC	PO BOX 15320 WASHINGTON,DC 20003	47-5665620	25,000	
(32) COLORADO SUPPORTS CRIME VICTIM SERVICES	4246 E 98TH PL THORNTON,CO 80229	99-3886969	15,000	
(33) COLORADO WAY FORWARD	PO BOX 100912 DENVER,CO 80250	92-3861115	50,000	
(34) COMMITTEE TO ELECT AMANDA COLLINS	8732 HOLLINGSFIELD DRIVE KNOXVILLE,TN 37922	88-2118450	250	
(35) COMMITTEE TO ELECT APRIL DOBSON	3321 SE 20TH AVENUE PORTLAND,OR 97202	99-3889566	1,000	
(36) COMMITTEE TO ELECT CLAIRE KEMPNER	PO BOX 32 GRIMESLAND,NC 27837	93-4892568	1,000	
(37) COMMITTEE TO ELECT DALLAS HARRIS	8020 S RAINBOW BLVD SUITE 100 271 LAS VEGAS,NV 89139	83-2730935	5,000	
(38) COMMITTEE TO ELECT DANIELE MONROE-MORENO	5575 SIMMONS STREET 154 NORTH LAS VEGAS,NV 89031	47-3050235	1,000	
(39) COMMITTEE TO ELECT DEBRA ALTSCHILLER	15 APPLE WAY STRATHAM,NH 03885	88-0842289	500	
(40) COMMITTEE TO ELECT ELAINE MARZOLA	2420 TILDEN WAY HENDERSON,NV 89074	84-3621010	1,000	
(41) COMMITTEE TO ELECT GABBY BEGAY FOR NM HOUSE	PO BOX 6 SANTA CLARA,NM 88026	99-2946832	2,500	
(42) COMMITTEE TO ELECT JODY MADEIRA	2151 W TOBACCO ROAD BLOOMINGTON,IN 47403	99-1164419	500	
(43) COMMITTEE TO ELECT JOVAN JACKSON	1851 RENADA CIRCLE NORTH LAS VEGAS,NV 89030	99-1918737	500	
(44) COMMITTEE TO ELECT JOY GARRATT 2024	10308 MARIN DRIVE NORTHWEST ALBUQUERQUE,NM 87114	82-3061789	3,500	
(45) COMMITTEE TO ELECT KRISTEN MOYER AS REGISTER OF DEEDS	304 S CENTRAL AVENUE BELMONT,NC 28012	93-4953781	500	
(46) COMMITTEE TO ELECT LEIGH COULTER	3024 BEECH COURT INDIAN TRAIL,NC 28079	99-3765048	250	
(47) COMMITTEE TO ELECT LOREE PEERY	PO BOX 1151 SPIRIT LAKE,ID 83869	99-1347239	1,000	
(48) COMMITTEE TO ELECT MELANIE RENFEW-HEBERT	23 COLLEGE ROAD MANCHESTER,NH 03102	85-2278612	250	
(49) COMMITTEE TO ELECT NICOLE CANNIZZARO	361 SOUBRETTE COURT LAS VEGAS,NV 89145	47-4860402	7,000	
(50) COMMITTEE TO ELECT SANDRA JAUREGUI	7582 LAS VEGAS BLVD SOUTH 118 LAS VEGAS,NV 89123	47-5675506	9,500	
(51) COMMITTEE TO ELECT STEVEN YEAGER	10120 W FLAMINGO ROAD SUITE 4162 LAS VEGAS,NV 89147	46-4680743	7,000	
(52) COMMITTEE TO ELECT TAMEKA HENRY	1221 STAR MEADOW DRIVE NORTH LAS VEGAS,NV 89030	84-5085867	500	
(53) COMMONWEALTH VICTORY FUND	1021 EAST CARY STREET SUITE 1275 RICHMOND,VA 23219	54-1971319	3,500	
(54) CONSERVATION PAC	PO BOX 12671 RALEIGH,NC 27605	81-3264321	15,000	
(55) CYNTHIA 4 NM HOUSE	8731 SPRINGHILL DRIVE NORTHWEST ALBUQUERQUE,NM 87114	88-0900019	2,500	
(56) DACIA FOR OREGON	3321 SE 20TH AVENUE PORTLAND,OR 97202	84-4270914	1,000	
(57) DANIEL DIDECH CAMPAIGN COMMITTEE	PO BOX 4959 BUFFALO GROVE,IL 60089	82-3395930	1,000	
(58) DANIELSEN FOR ASSEMBLY	12 NORTH STATE ROUTE 17 SUITE 320 PARAMUS,NJ 07652	47-5137956	1,000	
(59) DAWN STEVENSON	4527 SOUTH VISTA MONTANA WAY WEST VALLEY CITY,UT 84128	81-1300265	500	
(60) DELAWARE SENATE MAJORITY CAUCUS CAMPAIGN COMMITTEE	56 RIVER WOODS DRIVE WILMINGTON,DE 19809	87-0936911	24,500	
(61) DEMOCRATIC MAYORS ASSOCIATION	529 14TH STREET NW SUITE 1206 WASHINGTON,DC 20045	52-1535470	45,000	
(62) DEMOCRATIC MUNICIPAL OFFICIALS	815 BLACK LIVES MATTER PLAZA NW SUI WASHINGTON,DC 20005	03-0393091	25,000	
(63) DEMOCRATS FOR THE ILLINOIS HOUSE	10055 ROOSEVELT ROAD SUITE A WESTCHESTER,IL 60154	86-2496217	20,000	
(64) DEOS FOR DAVIS CITY COUNCIL 2024	2112 FORTUNA COURT DAVIS,CA 95616	93-3891858	150	
(65) DEVINE FOR SENATE	1419 RICHLAND ST COLUMBIA,SC 29201	93-2980718	1,000	
(66) DIANA HONIG FOR 4CD GOVERNING BOARD WARD 2 2024	4180 TREAT BLVD STE N CONCORD,CA 94518	99-3872621	250	
(67) DIANA MAIER FOR MARIN COUNTY WATER BOARD 2024	49 INVERNESS DRIVE SAN RAFAEL,CA 94901	99-4325510	250	
(68) DIANA SHOEMAKER CAMPAIGN FOR MANATEE COUNTY COMMISSION	1820 76TH STREET WEST BRADENTON,FL 34209	93-3195474	500	
(69) DOLAN AND LERNER FOR NEW PROVIDENCE	48 LANCELOT DRIVE BERKELEY HEIGHTS,NJ 07922	99-2349142	500	
(70) DOMINIQUE KING FOR ANTIOCH CITY COUNCIL 2024	333 WEST SAN CARLOS STREET SUITE 6 SAN JOSE,CA 95110	93-3395938	500	
(71) EFO BENJAMIN WEISMAN	PO BOX 91 BOONTON,NJ 07005	88-0824637	500	
(72) EFO LOUIS D GREENWALD FOR ASSEMBLY	2240 15 ROUTE 70 CHERRY HILL,NJ 08002	22-3565484	2,400	
(73) ELECT AMANDA EDWARDS	PO BOX 184 WEAVERVILLE,NC 28787	82-3931299	500	
(74) ELECT EMERY CUSD TRUSTEE 2024	3288 ADAMS AVENUE SUITE 16713 SAN DIEGO,CA 92176	93-4926805	500	
(75) ELECT FRANK BURNS CHANGE FOR THE 21ST	1 OAK AVENUE NEWARK,DE 19711	88-3158673	600	
(76) ELECT JAMILA TAYLOR	PO BOX 3996 FEDERAL WAY,WA 98063	83-3917287	600	
(77) ELECT SARAH BAGLEY	PO BOX 66 ALEXANDRIA,VA 22313	86-1843604	500	
(78) ELECT TERRI NILES	6400 NORTHEAST HIGHWAY 99 G334 VANCOUVER,WA 98665	85-1088587	1,000	
(79) ELECTION FUND OF CRAIG COUGHLIN	12 NORTH STATE ROUTE 17 SUITE 320 PARAMUS,NJ 07652	01-0930328	4,000	
(80) ELI WOODY FOR KANSAS	1228 N 94TH TERRACE 2212 KANSAS CITY,KS 66112	99-2080472	500	
(81) ELLEN BAKER FOR NPBCID SEAT 4	5673 WHIRLAWAY ROAD PALM BEACH GARDENS,FL 33418	85-1373527	250	
(82) ERIN BRADY FOR WILLISTON	48 BROOKSIDE DRIVE WILLISTON,VT 05495	92-0307672	250	
(83) EVERYTOWN FOR GUN SAFETY VICTORY FUND	PO BOX 4184 NEW YORK,NY 10163	81-3928802	5,500,000	
(84) EVERYTOWN FOR GUN SAFETY VICTORY FUND STATE COMMITTEE	PO BOX 4184 NEW YORK,NY 10163	85-2959895	125,721	
(85) FEATHERSTON FOR KANSAS	PO BOX 113447 OVERLAND PARK,KS 66282	84-3238850	500	
(86) FLORIDA HOUSE DEMOCRATIC CAMPAIGN COMMITTEE	PO BOX 1701 TALLAHASSEE,FL 32303	88-3971726	90,000	
(87) FRIENDS & FAMILY OF NABEELA SYED	PO BOX 1128 PALATINE,IL 60078	87-1219707	1,000	
(88) FRIENDS FOR ANGIE	10580 NORTH MCCARRAN BLVD 115-345 RENO,NV 89503	01-0944627	1,000	
(89) FRIENDS FOR JENNIFER	PO BOX 3042 GLENVIEW,IL 60025	82-2450388	1,000	
(90) FRIENDS OF ABBY SANCHEZ	107 BAY HAMMOCK LANE LONGWOOD,FL 32779	99-2300440	500	
(91) FRIENDS OF BEACH PACE	985 NORTHEAST CREEKSEDGE DRIVE HILLSBORO,OR 97124	88-0600685	1,000	
(92) FRIENDS OF BEN BOWMAN	9390 SW JULIA PLACE TIGARD,OR 97224	88-2685485	1,000	
(93) FRIENDS OF BOB MORGAN	PO BOX 1074 DEERFIELD,IL 60015	82-1327026	1,000	
(94) FRIENDS OF COURTNEY NERON	3321 SE 20TH AVENUE PORTLAND,OR 97202	83-2042057	1,000	
(95) FRIENDS OF CYNDIE ROMER	105 ENTRE LANE NEWARK,DE 19702	88-1210757	600	
(96) FRIENDS OF DAN RAYFIELD	4806 VIOLA PLACE CORVALLIS,OR 97330	27-1422275	5,000	
(97) FRIENDS OF DARYA FARIVAR	PO BOX 20664 SEATTLE,WA 98102	87-3995740	600	
(98) FRIENDS OF DAVE PAUL	PO BOX 387 OAK HARBOR,WA 98277	82-4743363	600	
(99) FRIENDS OF ELIZABETH CASE	6412 NORTHEAST SOUTHBROOK COURT HILLSBORO,OR 97124	93-2383512	500	
(100) FRIENDS OF ELLY HANAUER FRIEDMAN	2504 MELROSE DRIVE CHAMPAIGN,IL 61820	88-4010978	100	
(101) FRIENDS OF ERICA LARKIN	12 ANDY COURT BLOOMINGTON,IL 61704	93-3566896	500	
(102) FRIENDS OF HEIDI HENRY	2586 N 28TH RD MARSEILLES,IL 61341	88-3668720	1,000	
(103) FRIENDS OF JOE FITZGIBBON	PO BOX 66235 BURIEN,WA 98166	27-2265718	1,200	
(104) FRIENDS OF JOYCE MASON	6615 GRAND AVENUE SUITE 215 GURNEE,IL 60031	82-2188752	1,000	
(105) FRIENDS OF JULES WALTERS	3321 SE 20TH AVENUE PORTLAND,OR 97202	88-2632451	1,000	
(106) FRIENDS OF KELLI WEGENER	5720 WILD ASH LANE CRYSTAL LAKE,IL 60012	82-3322175	500	
(107) FRIENDS OF LACEY BEATY	13820 SW BONNIE BRAE CT BEAVERTON,OR 97005	49-4386849	1,000	
(108) FRIENDS OF LINDA ROBERTSON	415 OAK ST ST CHARLES,IL 60174	88-2960489	1,000	
(109) FRIENDS OF LISA FRAGALA	84 W 19TH AVENUE EUGENE,OR 97401	99-1983387	1,000	
(110) FRIENDS OF LISA REYNOLDS	15764 NW SNOWBUSH LANE PORTLAND,OR 97229	84-3261627	1,000	
(111) FRIENDS OF LOREN SELIG	3 NOBEL K PETERSON DRIVE DURHAM,NH 03825	88-1553326	500	
(112) FRIENDS OF LYNN EDMONDS	5700 BASHFORD CREST LANE RALEIGH,NC 27606	88-1169644	500	
(113) FRIENDS OF MARA GORMAN	601 WEBB ROAD NEWARK,DE 19711	99-3366920	600	
(114) FRIENDS OF MARTI DEUTER	118 N EVERGREEN AVENUE ELMHURST,IL 60126	93-4034038	1,000	
(115) FRIENDS OF MONICA BEARD	130 PEOPLES WAY HOCKESSIN,DE 19707	93-1914246	600	
(116) FRIENDS OF MY-LINH	11900 NE 1ST STREET 300 BELLEVUE,WA 98005	82-4927031	600	
(117) FRIENDS OF NATASHA MARCUS	806 ASHBY DRIVE DAVIDSON,NC 28036	82-4221064	1,000	
(118) FRIENDS OF RITA HARRIS	PO BOX 30265 FORT LAUDERDALE,FL 33303	92-0603018	1,000	
(119) FRIENDS OF SARA KNIZHNIK	PO BOX 5067 VERNON HILLS,IL 60061	87-4123729	500	
(120) FRIENDS OF SHAUNDELLE BROOKS	PO BOX 446 HERMITAGE,TN 37076	99-0776887	1,000	
(121) FRIENDS OF SHELLI YODER	PO BOX 5194 BLOOMINGTON,IN 47407	84-4405639	1,000	
(122) FRIENDS OF TANA SENN	PO BOX 771 MERCER ISLAND,WA 98040	46-3757260	600	
(123) FRIENDS OF TIFFANY STONER	10711 PETE DYE RIDGE ZIONSVILLE,IN 46077	99-3895353	1,000	
(124) FRIENDS OF TINA ORWALL	17837 1ST AVENUE SOUTH PMB 299 NORMANDY PARK,WA 98148	45-3602805	600	
(125) FRIENDS OF TOBIAS READ	3321 SE 20TH AVENUE PORTLAND,OR 97202	20-4265904	1,000	
(126) FRIENDS OF TRACY KATZ MUHL	3710 COMMERCIAL SUITE 5 NORTHBROOK,IL 60062	93-1533518	1,000	
(127) FRIENDS OF VALERIE LONGHURST	111 TUCKAHOE LANE BEAR,DE 19701	46-3607342	600	
(128) FRIENDS OF ZURAYA	PO BOX 41417 ARLINGTON,VA 22204	99-1265437	500	
(129) FRISBY FOR COUNCIL	10 BELMONT CIRCLE TRENTON,NJ 08618	87-4152028	500	
(130) FUTURE PAC HOUSE BUILDERS	6900 SW ATLANTA STREET PORTLAND,OR 97223	93-1123855	7,000	
(131) GAY LYNN BENNION COMMITTEE TO ELECT	6682 CANDLE COVE COTTONWOOD HEIGHTS,UT 84121	99-9999999	1,000	
(132) HEATHER FOR NM SENATE	PO BOX 35267 ALBUQUERQUE,NM 87176	93-3369224	3,100	
(133) HEIMES FOR NEBRASKA	4702 NORTH 183RD STREET ELKHORN,NE 68022	92-2602869	2,000	
(134) HELP LYNN WIN	781 WILLIS STREET GLEN ELLYN,IL 60137	82-4458835	500	
(135) HERNDONFORNM 2024	PO BOX 27724 ALBUQUERQUE,NM 87125	87-1453699	2,500	
(136) HOUSE DEMOCRATIC CAMPAIGN COMMITTEE	PO BOX 9100 SEATTLE,WA 98109	91-6178946	1,200	
(137) HOUSE DEMOCRATIC CAMPAIGN COMMITTEE	PO BOX 414803 KANSAS CITY,MO 64141	81-4882899	10,000	
(138) HOUSE DEMOCRATIC CAUCUS LEADERSHIP PAC	1300 WEST CAPITOL AVENUE LITTLE ROCK,AZ 72201	47-1682917	5,000	
(139) HOUSE DEMOCRATS	PO BOX 9520 WILMINGTON,DE 19809	01-0564528	32,500	
(140) IDAHO DEMOCRATIC LEGISLATIVE CAMPAIGN COMMITTEE	PO BOX 445 BOISE,ID 83701	32-0751731	5,000	
(141) ILLINOIS SENATE DEMOCRATIC FUND	PO BOX 5537 SPRINGFIELD,IL 62705	84-4500158	20,000	
(142) JAMES DALLAS FOR TENNESSEE SENATE 2024	PO BOX 1183 COLUMBIA,TN 38402	93-2989772	250	
(143) JAY SHOOSTER FOR STATE REPRESENTATIVE	102 NORTHEAST 2ND STREET SUITE 107 BOCA RATON,FL 33432	93-3140377	1,000	
(144) JD SPAIN SR FOR ARLINGTON COUNTY BOARD	PO BOX 41964 ARLINGTON,VA 22204	88-4322101	1,000	
(145) JEAN JOSEY FOR DUBLIN MAYOR 2024	6937 VILLAGE PARKWAY 2359 DUBLIN,CA 94568	92-2286455	500	
(146) JEANNINE WISNOSKY STEHLIN FOR CULVER CITY COUNCIL 2024	249 EAST OCEAN BOULEVARD SUITE 670 LONG BEACH,CA 90802	93-2618771	500	
(147) JEN DAY FOR NEBRASKA	15708 REDWOOD STREET OMAHA,NE 68136	84-3918008	1,000	
(148) JETT BLACK FOR CITY COUNCIL 2024	104 N ALISOS STREET SANTA BARBARA,CA 93103	93-3349452	250	
(149) JO ELLA FOR KANSAS	PO BOX 14534 LENEXA,KS 66285	83-4595437	500	
(150) JOEL LEVI FOR INDIANA	263 ALVOR COURT CICERO,IN 46034	92-3981121	1,000	
(151) JOHN HARABEDIAN FOR ASSEMBLY 2024	16633 VENTURA BLVD 1008 ENCINO,CA 91436	93-2762981	500	
(152) JOHN MACCARTHY FOR DISTRICT 27	620 RUTHERFORD STREET GREENVILLE,SC 29609	92-3110375	500	
(153) JONATHAN SMITH COUNTY CLERK CANDIDATE	2526 SE COLORADO AVE TOPEKA,KS 66605	99-3167806	250	
(154) JONI4TN46	1071 HOLLAND RIDGE WAY LEBANON,TN 37090	92-3655800	500	
(155) JOSH THOMAS FOR DELEGATE	PO BOX 922 GAINESVILLE,VA 20156	88-2362450	1,250	
(156) JOYCE CRAIG FOR NH	PO BOX 3893 MANCHESTER,NH 03105	92-3571316	5,000	
(157) JUDY JUSTICE FOR BOARD OF EDUCATION	4621 NORWICH ROAD WILMINGTON,NC 28405	82-2194534	250	
(158) KANNAN FOR VIRGINIA	41767 HEINZ COURT BRAMBLETON,VA 20148	33-1729730	5,000	
(159) KANSANS FOR A DEMOCRATIC HOUSE	PO BOX 2083 TOPEKA,KS 66601	48-1078411	5,000	
(160) KANSAS SENATE DEMOCRATS COMMITTEE	PO BOX 1811 TOPEKA,KS 66601	86-6121244	5,000	
(161) KATHERINE MCCANN	82 TRILLIUM HILL MONTPELIER,VT 05602	88-2331426	250	
(162) LENA NIRK 4NH	60 SCENIC DRIVE UNIT 6 GILFORD,NH 03249	93-4677107	500	
(163) LISA HENRY FOR MOUNTAIN VIEW WHISMAN SCHOOL BOARD 2024	555 BORANDA COURT MOUNTAIN VIEW,CA 94040	99-3441219	250	
(164) MAAHS FOR CITY COUNCIL 2024	249 EAST OCEAN BLVD 670 LONG BEACH,CA 90802	99-3186631	500	
(165) MAINE HOUSE DEMOCRATIC CAMPAIGN COMMITTEE	PO BOX 2021 AUGUSTA,ME 04338	22-2695883	20,000	
(166) MAINE SENATE DEMOCRATIC CAMPAIGN COMMITTEE	PO BOX 2207 AUGUSTA,ME 04338	01-0478979	45,000	
(167) MAJORITY FORWARD	PO BOX 1491 JEFFERSON CITY,MO 65102	81-4537836	10,000	
(168) MALIA HERMAN FOR TOWNSHIP COMMITTEE	6 SOUTH CRESCENT MAPLEWOOD,NJ 07040	99-2321635	250	
(169) MARIA FOR 52	125 CARRIAGE ROAD NORTH BARRINGTON,IL 60010	36-4877606	1,000	
(170) MARIAN MATTHEWS FOR HD27 2024	PO BOX 21256 ALBUQUERQUE,NM 87154	84-3178321	3,000	
(171) MARSHA S STURDEVANT	5172 STONEHAVEN DRIVE BIRMINGHAM,AL 35244	92-3950230	250	
(172) MARTHA GUERRERO FOR MAYOR 2024	4931 GIBBONS DRIVE CARMICHAEL,CA 95608	93-4275269	500	
(173) MARTIN HICKEY FOR SENATE DISTRICT 20 (2024)	6119 BUFFALO GRASS CT NE ALBUQUERQUE,NM 87111	84-2758903	2,500	
(174) MARY BETH CANTY FOR ILLINOIS	14 E NORTHWEST HIGHWAY ARLINGTON HEIGHTS,IL 60004	87-0945495	1,000	
(175) MARY ELLEN FOR HCPS	PO BOX 1911 HENDERSONVILLE,NC 28793	87-1254571	500	
(176) MARYLAND DEMOCRATIC PARTY - ADMINISTRATIVE ACCOUNT	275 WEST STREET 70 ANNAPOLIS,MD 21401	52-0908106	10,000	
(177) MATT VILARDEBO FOR SOUTH CAROLINA	106 PEBBLE CREEK CROSSING FORT MILL,SC 29715	99-1008561	500	
(178) MAX TUCHMAN CAMPAIGN	1742 WEST FLAGLER STREET MIAMI,FL 33135	92-3737902	1,000	
(179) MCDONALD FOR KANSAS	15050 WEST 138TH 4742 OLATHE,KS 66063	93-4789443	500	
(180) MCNALLY FOR INDIANA	275 MEDICAL DRIVE PO BOX 456 CARMEL,IN 46082	88-3063737	1,000	
(181) MELANIE LEVESQUE	2 MCDANIELS DRIVE BROOKLINE,NH 03033	38-4313104	1,000	
(182) MEREDITH FOR NEW MEXICO 2024	1412 STAGECOACH LN SE ALBUQUERQUE,NM 87123	84-4896500	3,100	
(183) MEYER FOR DELAWARE	PO BOX 494 HOCKESSIN,DE 19707	87-3439157	1,200	
(184) MICHELLE 4 SANDOVAL 2024	656 VALLEY MEADOWS RIO RANCHO,NM 87144	88-1165333	5,000	
(185) MIDDLE OF THE ROAD PAC	PO BOX 4504 OVERLAND PARK,KS 66204	93-2003567	20,000	
(186) MIGUELAILLE PIERRE	4164 INVERRARY DRIVE 501 LAUDERHILL,FL 33319	99-9999999	250	
(187) MIKE FOR VERMONT LTD	PO BOX 459 WINOOSKI,VT 05404	88-2205938	1,000	
(188) NADARIUS CLARK FOR DELEGATE	PO BOX 829 SUFFOLK,VA 23439	86-1399122	1,250	
(189) NATALIE FOR NEW MEXICO	8705 HORACIO PLACE NORTHEAST ALBUQUERQUE,NM 87111	81-1088398	2,500	
(190) NATHAN SMALL FOR STATE HOUSE 2024	1320 FOURTH ST LAS CRUCES,NM 88005	81-1988401	3,000	
(191) NATIONAL DEMOCRATIC COUNTY OFFICIALS	1116 PARK ST NE WASHINGTON,DC 20002	52-2120677	15,000	
(192) NC DEMOCRATIC LEADERSHIP COMMITTEE	301 HILLSBOROUGH STREET SUITE 950 RALEIGH,NC 27603	83-2983359	250,000	
(193) NEVADA ASSEMBLY DEMOCRATIC CAUCUS	6675 S TENAYA WAY 200 LAS VEGAS,NV 89113	88-0205213	35,000	
(194) NEVADA SENATE DEMOCRATS	3540 W SAHARA AVENUE BOX 263 LAS VEGAS,NV 89102	88-0316606	30,000	
(195) NEVADANS FOR KARL CATARATA	3152 JEVONDA AVENUE HENDERSON,NV 89044	88-1065927	500	
(196) NEW HAMPSHIRE DEMOCRATIC PARTY	105 N STATE STREET CONCORD,NH 03301	02-0125560	1,000	
(197) NEW HAMPSHIRE SENATE DEMOCRATIC CAUCUS	105 NORTH STATE STREET CONCORD,NH 03301	02-0473096	20,000	
(198) NEW MEXICANS FOR SARAH	PO BOX 13114 LAS CRUCES,NM 88013	99-4339479	2,500	
(199) NEW MEXICO SENATE DEMOCRATS	313 MOON STREET NORTHEAST ALBUQUERQUE,NM 87123	82-1045511	30,000	
(200) NH HOUSE DEMOCRATIC VICTORY CAMPAIGN COMMITTEE	PO BOX 1292 CONCORD,NH 03302	14-1906794	50,000	
(201) NICK BROWN FOR ATTORNEY GENERAL	401 2ND AVENUE SOUTH SUITE 303 SEATTLE,WA 98104	93-2152124	2,400	
(202) NICOLE FOR NC	4029 MOORLAND DRIVE CHARLOTTE,NC 28226	93-4916132	1,000	
(203) NYS DEMOCRATIC ASSEMBLY CAMPAIGN COMMITTEE	107 WASHINGTON AVENUE SUITE 1LL ALBANY,NY 12207	13-3041656	5,000	
(204) OUR DEMOCRACY	1742 W FLAGLER STREET MIAMI,FL 33135	83-4150475	1,000	
(205) OUR FUTURE PAC	31 SPRING STREET BURLINGTON,VT 05401	99-9999999	4,480	
(206) PAM4KANSAS	8905 WEST 157TH STREET OVERLAND PARK,KS 66221	88-2658464	500	
(207) PATEL FOR ASSEMBLY 2024	5445 MADISON AVENUE SACRAMENTO,CA 95841	92-1686962	500	
(208) PEOPLE FOR LAURA FAVER DIAS	781 WEST TRAIL N GRAYSLAKE,IL 60030	87-4505256	1,000	
(209) PEOPLE FOR POPE (2024)	10460 CALLE LEON NW ALBUQUERQUE,NM 87114	84-3070475	1,000	
(210) PEOPLE FOR YASMIN	PO BOX 7437 TACOMA,WA 98417	87-3173541	600	
(211) PHOEBE SHIN VENKAT FOR FOSTER CITY COUNCIL 2024	784 VESPUCCI LANE FOSTER CITY,CA 94404	99-0582612	500	
(212) PILAR SCHIAVO FOR ASSEMBLY 2024	1700 TRIBUTE ROAD SUITE 201 SACRAMENTO,CA 95815	92-1563373	500	
(213) POSKIN4KS	12924 HOWE DRIVE LEAWOOD,KS 66209	84-2678915	500	
(214) PROKOP FOR LEGISLATURE	2340 JENNA LANE LINCOLN,NE 68512	93-4196734	500	
(215) QUICK FOR LEGISLATURE	1019 KENNEDY DRIVE GRAND ISLAND,NE 68803	47-4433645	500	
(216) RACHEL GRAGE FOR FL HD 16	23 30TH AVENUE SOUTH JACKSONVILLE BEACH,FL 32250	93-4296212	1,000	
(217) RAY NEWMAN	25 CHARLOTTE AVENUE NASHUA,NH 03064	83-1235123	500	
(218) REBECCA BAUER-KAHAN FOR ASSEMBLY 2024	1700 TRIBUTE ROAD SUITE 201 SACRAMENTO,CA 95815	92-1094600	500	
(219) RE-ELECT ALLISON TANT FOR HD 9	2800 SOUTH ADAMS STREET UNIT 5651 TALLAHASSEE,FL 32314	86-1494430	1,000	
(220) ROBIN BARTLEMAN	16427 SAPPHIRE PLACE WESTON,FL 33331	84-3979972	1,000	
(221) SANCHEZ FOR MONTEREY PARK CITY COUNCIL 2024	12501 IMPERIAL HIGHWAY SUITE 200 NORWALK,CA 90650	88-2856371	500	
(222) SARAH 4 OR HOUSE	1600 NW ARTHUR AVENUE CORVALLIS,OR 97330	93-4404000	1,000	
(223) SARAH CENTINEO FOR LEGISLATURE	1709 CHILDS ROAD EAST BELLEVUE,NE 68005	92-3767781	500	
(224) SCUTARI FOR SENATE	12 CELLAR AVENUE CLARK,NJ 07066	22-3632480	4,000	
(225) SENATE DEMOCRATIC LEADERSHIP FUND	9500 SW BARBUR BOULEVARD SUITE 230 PORTLAND,OR 97219	20-4673386	7,000	
(226) SHEA BACKUS COMMITTEE TO ELECT	2251 NORTH RAMPART BLVD 587 LAS VEGAS,NV 89128	82-3716164	1,000	
(227) SHELLEY BERKLEY FOR MAYOR	9709 CAMDEN HILLS DR LAS VEGAS,NV 89135	92-1592110	1,000	
(228) SOUTH CAROLINA HOUSE DEMOCRATIC CAUCUS	BLATT BUILDING ROOM 335A PO BOX 120 COLUMBIA,SC 29211	57-0969662	12,000	
(229) SUE NEWMAN	25 CHARLOTTE AVENUE NASHUA,NH 03064	99-9999999	500	
(230) TARA SREEKRISHNAN FOR ASSEMBLY 2024	22215 QUINTERNO COURT CUPERTINO,CA 95014	93-4658147	500	
(231) TEAM BROADMAN	750 NW CHARBONNEAU STREET SUITE 20 BEND,OR 97703	93-3772446	1,000	
(232) TEAM STAVA MURRAY	2136 PRIMROSE LANE NAPERVILLE,IL 60565	82-3081534	1,000	
(233) TENNESSEE HOUSE DEMOCRATIC CAUCUS	425 REP JOHN LEWIS WAY N SUITE 662 NASHVILLE,TN 37243	62-0911028	30,000	
(234) THOMAS CHITTENDEN FOR STATE SENATE	1600 DORSET STREET SOUTH BURLINGTON,VT 05403	85-0527783	500	
(235) TIMOTHY HORRIGAN CAMPAIGN COMMITTEE	7A FACULTY ROAD DURHAM,NH 03824	26-2841700	500	
(236) TODD ACHILLES FOR IDAHO	PO BOX 8912 BOISE,ID 83707	93-4883557	1,000	
(237) TRACY CLARK FOR NC	17 FLAGSHIP COVE GREENSBORO,NC 27455	99-4573218	500	
(238) VERMONT DEMOCRATIC PARTY	73 MAIN STREET SUITE 400 MONTPELIER,VT 05602	03-0199446	5,180	
(239) VICKY FOR NM	PO BOX 16731 ALBUQUERQUE,NM 87191	93-4024020	4,800	
(240) VIRGINA FUTURE GENERATIONS PAC	PO BOX 3604 RICHMOND,VA 23235	88-3993002	4,000	
(241) VIRGINIA LEGISLATIVE BLACK CAUCUS	PO BOX 15512 RICHMOND,VA 23227	54-1570027	500	
(242) VOTE FOR KATHLEEN 2024	3115 MAY CIRCLE SOUTHEAST ALBUQUERQUE,NM 87124	87-4788517	2,500	
(243) VOTE FOR VALERIE	455 CAROLINA CIRCLE WINSTON SALEM,NC 27104	93-4731131	500	
(244) VOTE LIZ BERRY	PO BOX 9100 SEATTLE,WA 98109	84-4023836	600	
(245) WARE FOR KANSAS	1444 NORTH PERRY AVENUE WICHITA,KS 67203	83-2729894	1,000	
(246) WASHINGTON SENATE DEMOCRATIC CAMPAIGN	5628 AIRPORT WAY SOUTH SUITE 108 SEATTLE,WA 98108	46-2614068	1,200	
(247) WENDY E N THOMAS	10 WILDCAT FALLS DRIVE MERRIMACK,NH 03054	99-9999999	500	
(248) WILLIAM TARVER CAMPAIGN FUND	70 COTTONWOOD CIRCLE BATAVIA,IL 60510	88-0787224	500	
(249) ZUCKERMAN FOR VT	PO BOX 9354 SOUTH BURLINGTON,VT 05407	47-5674951	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) 2021	(b) 2022	(c) 2023	(d) 2024	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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)

(Rev. January 2025)
Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
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		318,046	109,915
d Equipment	100,696		58,661	42,035
e Other	709,477		259,107	450,370
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* . . ▶				602,320

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

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

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

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

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

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

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
LEASE LIABILITIES	908,892
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 25.)* ▶	908,892

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	57,773,042
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	656,516		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	656,516
3	Subtract line **2e** from line **1**			3	57,116,526
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	57,116,526

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	57,230,153
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	656,516		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	656,516
3	Subtract line **2e** from line **1**			3	56,573,637
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	-66,168		
c	Add lines **4a** and **4b**			4c	-66,168
5	Total expenses. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18.)			5	56,507,469

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 XII, LINE 4B - OTHER ADJUSTMENTS:	LOSS ON DISPOSAL OF FIXED ASSETS -66,168.

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE G (Form 990) (Rev. January 2025)

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

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	**(iii)** 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	12,212,900	263,657	11,949,243
2	LISA PRESTA 163 FOREST SIDE AVENUE SAN FRANCISCO, CA 94127	IN-PERSON SOLICITATION		No	1,646,000	20,308	1,625,692
3	JACKIE BROT-WEINBERG 11 CYPRESS DRIVE WOODBURY, NY 11797	IN-PERSON SOLICITATION		No	292,000	7,980	284,020
4	GIVEBRIDGE INC 550 WEST VAN BUREN STREET SUITE 11 CHICAGO, IL 60607	IN-PERSON SOLICITATION		No	80,590	231,063	-150,473
5	ALLEGIANCE FUNDRAISING LLC PO BOX 9132 FARGO, ND 58160	FUNDRAISING STRATEGIC CONSULTING		No	0	616,322	-616,322
6	ANNE LEWIS STRATEGIES LLC 650 MASSACHUSETTS AVENUE NW SUITE 5 WASHINGTON, DC 20001	FUNDRAISING STRATEGIC CONSULTING		No	0	218,760	-218,760
7	SEA CHANGE STRATEGIES LLC 7409 BIRCH AVENUE TAKOMA PARK, MD 20912	FUNDRAISING STRATEGIC CONSULTING		No	0	133,650	-133,650
8							
9							
10							
Total ▶					14,231,490	1,491,740	12,739,750

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 $89,160. 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)

(Rev. January 2025)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
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) DEVELOPMENT NOW FOR CHICAGO 2045 W GRAND AVENUE STE B PMB 31638 CHICAGO,IL 60612	87-3817002	501C6	0	250,000			2024 DEMOCRATIC NATIONAL CONVENTION SPONSORSHIP
(2) HECKBENT INC PO BOX 5423 LOUISVILLE,KY 40255	99-0832023	501C4	0	100,000			GENERAL OPERATING SUPPORT
(3) NATIONAL HISPANIC CAUCUS OF STATE LEGISLATORS 1444 I STREET NORTHWEST SUITE 900 WASHINGTON,DC 20005	84-1168319	501C3	0	70,000			GENERAL OPERATING SUPPORT
(4) NCSL FOUNDATION FOR STATE LEGISLATURES PO BOX 17474 DENVER,CO 80217	74-2232576	501C3	0	67,500			NAPACSL & QUAD CAUCUS RECEPTION SPONSORSHIP, NCSL FOUNDATION CAP CIRCLE SPONSORSHIP
(5) THE COUNCIL OF STATE GOVERNMENTS LTD 1776 AVENUE OF THE STATES LEXINGTON,KY 40511	36-6000818	501C3	0	65,000			ADOLESCENT MENTAL HEALTH SPONSORSHIP, GENERAL OPERATING SUPPORT
(6) BOARD OF LATINO LEGISLATIVE LEADERS 815A BRAZOS 65 AUSTIN,TX 78701	20-2075553	501C3	0	50,000			GENERAL OPERATING SUPPORT
(7) UNITED STATES CONFERENCE OF MAYORS 1620 I STREET NW SUITE 400 WASHINGTON,DC 20006	53-0196642	501C3	0	50,000			GENERAL OPERATING SUPPORT
(8) AMERICA VOTES 1155 CONNECTICUT AVENUE NW STE 600 WASHINGTON,DC 20036	26-4568349	501C4	0	45,000			GENERAL OPERATING SUPPORT
(9) CONGRESSIONAL HISPANIC CAUCUS INSTITUTE INC 1128 16TH STREET NW WASHINGTON,DC 20036	52-1114225	501C3	0	45,000			CHCI LEADERSHIP CONFERENCE AND ANNUAL GALA SPONSORSHIP
(10) CONGRESSIONAL BLACK CAUCUS POLITICAL EDUCATION AND LEADERSHIP 413 NEW JERSEY AVENUE SOUTHEAST WASHINGTON,DC 20003	52-2270607	501C4	0	40,000			GENERAL OPERATING SUPPORT & MPC POLICY SESSION SPONSORSHIP
(11) MAJORITY RISING NC PO BOX 4174 CARY,NC 27519	87-4783603	501C4	0	40,000			GENERAL OPERATING SUPPORT
(12) CONGRESSIONAL BLACK CAUCUS FOUNDATION INC 1720 MASSACHUSETTS AVE NW WASHINGTON,DC 20036	52-1160561	501C3	0	35,000			ANNUAL LEGISLATIVE CONFERENCE PHOENIX AWARDS
(13) WESTERN	84-0747227	GOV'T	0	35,000			WESTERN

GOVERNORS ASSOCIATION 1700 BROADWAY SUITE 500 DENVER,CO 80290							GOVERNORS ASSOCIATION SPONSORSHIP
(14) NATIONAL GOVERNORS ASSOCIATION CENTER FOR BEST PRACTICES 444 N CAPITAL STREET NW SUITE 267 WASHINGTON,DC 20001	23-7391796	501C3	0	30,000			NGA 2024 SPONSORSHIP
(15) NEW YORK LAW SCHOOL 185 WEST BROADWAY NEW YORK,NY 10013	13-5645885	501C3	0	27,000			NYLS FELLOWSHIP
(16) EMERGE ACTION FUND 4 EMBARCADERO CENTER SUITE 1400 SAN FRANCISCO,CA 94111	83-1787883	501C4	0	25,000			2024 LEADERS EMERGE SPONSORSHIP
(17) HUMAN RIGHTS CAMPAIGN INC 1640 RHODE ISLAND AVE NW WASHINGTON,DC 20036	52-1243457	501C4	0	25,000			HRC NATIONAL DINNER SPONSORSHIP
(18) NATIONAL BLACK CAUCUS OF STATE LEGISLATORS 444 N CAPITOL STREET NW SUITE 622 WASHINGTON,DC 20001	52-1218832	501C3	0	25,000			CORPORATE ROUND TABLE ANNUAL DUES
(19) PEOPLE FOR THE AMERICAN WAY FOUNDATION 1101 15TH STREET NW SUITE 600 WASHINGTON,DC 20005	13-3065716	501C3	0	25,000			2024 YOUNG ELECTED OFFICIALS NATIONAL CONVENING SPONSORSHIP
(20) WOMEN IN GOVERNMENT RELATIONS INC 1818 PARMENTER STREET SUITE 300 MIDDLETON,WI 53562	52-1081459	501C6	0	23,500			WGR EMPOWERMENT NETWORK SPONSORSHIP, WGR LEADERSHIP & ADVOCACY NETWORKING RECEPTION SPONSORSHIP
(21) STATE DEMOCRACY ACTION FUND 1225 EYE STREET NW SUITE 1250 WASHINGTON,DC 20005	81-4100201	501C4	0	23,000			GENERAL OPERATING SUPPORT
(22) NATIONAL LEAGUE OF CITIES 660 NORTH CAPITOL STREET NW STE 450 WASHINGTON,DC 20001	53-0226780	501C4	0	20,000			CORPORATE PARTNER EXECUTIVE BENEFIT 2024 SPONSORSHIP
(23) AFRICAN AMERICAN MAYORS ASSOCIATION 80 M STREET SE SUITE 1 WASHINGTON,DC 20003	46-5593933	501C3	0	15,000			GENERAL OPERATING SUPPORT
(24) ASIAN PACIFIC AMERICAN INSTITUTE FOR CONGRESSIONAL STUDIES INC 1444 I STREET NW SUITE 700 WASHINGTON,DC 20005	52-1917903	501C3	0	15,000			APAICS GALA SPONSORSHIP
(25) HIGHER HEIGHTS FOR AMERICA 147 PRINCE STREET BROOKLYN,NY 11201	45-3211706	501C4	0	15,000			ESSENCE FEST OF CULTURE SUNDAY BRUNCH SPONSORSHIP, SUNDAY BRUNCH IN GA EVENT SPONSORSHIP
(26) STAY SOLID YOUTH MENTAL BEHAVIORAL HEALTH AWARENESS INC 10229 CAMPUS WAY SOUTH LARGO,MD 20774	84-4129533	501C3	0	15,000			SPONSORSHIP OF THE MOTIVATE OUR FUTURE SUMMIT
(27) EQUALITY CALIFORNIA 1150 SOUTH OLIVE STREET FLOOR 10 LOS ANGELES,CA 90015	95-4708781	501C4	0	12,000			LA 25TH ANNIVERSARY EQUALITY AWARD SPONSORSHIP
(28) DOLORES HUERTA	46-2478028	501C4	0	10,000			GENERAL

ACTION FUND PO BOX 2244 BAKERSFIELD,CA 93303							OPERATING SUPPORT
(29) FLORIDA CAUCUS OF BLACK STATE LEGISLATORS FOUNDATION 400 NORTH ADAMS STREET SUITE B TALLAHASSEE,FL 32301	59-3183127	501C3	0	10,000			GENERAL OPERATING SUPPORT
(30) GRAND RAPIDS AREA COMMUNITY ENGAGEMENT FUND PO BOX 10030 LANSING,MI 48901	82-4955173	501C4	0	10,000			GENERAL OPERATING SUPPORT
(31) HISPANIC FEDERATION INC 55 EXCHANGE PLACE SUITE 501 NEW YORK,NY 10005	13-3573852	501C3	0	10,000			2024 HISPANIC FEDERATION GALA SPONSORSHIP
(32) LGBTQ VICTORY INSTITUTE INC 1225 I STREET NW SUITE 525 WASHINGTON,DC 20005	52-1835268	501C3	0	10,000			GENERAL OPERATING SUPPORT
(33) MICHIGAN EMPOWERMENT FUND PO BOX 12353 LANSING,MI 48901	93-4752486	501C4	0	8,000			GENERAL OPERATING SUPPORT
(34) NATIONAL FOUNDATION FOR WOMEN LEGISLATORS 5434 CHIEFTAIN CIRCLE ALEXANDRIA,VA 22312	52-1480785	501C3	0	6,000			2024 ROUND TABLE SPONSORSHIP

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 19

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 15

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)

(Rev. January 2025)

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

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 KELLY POLITICAL AFFAIRS SENIOR VICE PRESID	**(i)**	409,988	0	0	4,783	41,060	455,831	0
	(ii)	0	0	0	0	0	0	0
2 MATTHEW MCTIGHE COO & EXECUTIVE VICE PRESIDENT	**(i)**	409,988	0	6,997	13,207	14,021	444,213	0
	(ii)	0	0	0	0	0	0	0
3 NICHOLAS SUPLINA LAW & POLICY SENIOR VICE PRESIDENT	**(i)**	344,988	0	0	0	41,060	386,048	0
	(ii)	0	0	0	0	0	0	0
4 ZOE SEGAL-REICHLIN SVP, DEPUTY COO & GENERAL COUNSEL	**(i)**	329,888	0	0	11,709	41,060	382,657	0
	(ii)	0	0	0	0	0	0	0
5 MONISHA HENLEY GOVERNMENT AFFAIRS SENIOR VICE PRESI	**(i)**	326,251	0	0	10,762	29,187	366,200	0
	(ii)	0	0	0	0	0	0	0
6 STACEY LIPSON COMMUNICATIONS CHIEF PUBLIC AFFAIRS	**(i)**	264,988	0	0	10,600	41,060	316,648	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)
(Rev. January 2025)
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 instructions and the latest information.

OMB No. 1545-0047

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	2024 WAS A YEAR OF LIFE-SAVING ACTION, MAKING BIPARTISAN PROGRESS ACROSS THE COUNTRY. THIS YEAR, EVERYTOWN, ALONGSIDE MOMS DEMAND ACTION AND STUDENTS DEMAND ACTION VOLUNTEERS, HELPED PASS 110 GUN SAFETY POLICIES, INCLUDING LAWS REQUIRING SECURE STORAGE OF FIREARMS, STRENGTHENING STATE BACKGROUND CHECK LAWS, CRACKING DOWN ON GHOST GUNS, AND INCREASING FUNDING FOR COMMUNITY VIOLENCE INTERVENTION PROGRAMS. WE ALSO DEFEATED 253 DANGEROUS, GUN LOBBY-BACKED BILLS. DURING THE ELECTION SEASON, EVERYTOWN WORKED TO KEEP BUILDING THE BENCH OF THE NEXT GENERATION OF LAWMAKERS. MOMS DEMAND ACTION VOLUNTEERS RAN FOR OFFICE AT EVERY LEVEL OF GOVERNMENT, AND WON. OVERALL, 3,300 GUN SENSE CANDIDATES WERE ELECTED INTO OFFICE UP AND DOWN THE BALLOT DURING THE 2023-24 ELECTION CYCLE, INCLUDING 333 OF OUR VERY OWN MOMS DEMAND ACTION VOLUNTEERS. MARKING TWO YEARS SINCE THE 2022 PASSAGE OF THE BIPARTISAN SAFER COMMUNITIES ACT, EVERYTOWN, MOMS DEMAND ACTION AND STUDENTS DEMAND ACTION CELEBRATED THE FINALIZATION OF A FEDERAL RULE THAT CLOSED LOOPHOLES IN OUR BACKGROUND CHECK SYSTEM. IN JUNE, AT EVERYTOWN'S 11TH ANNUAL GUN SENSE UNIVERSITY IN WASHINGTON, D.C., THE PRESIDENT ADDRESSED MOMS DEMAND ACTION AND STUDENTS DEMAND ACTION VOLUNTEERS AND SURVIVORS OF GUN VIOLENCE FROM ALL 50 STATES AND WASHINGTON, D.C. AS THEY GATHERED TO SHARE BEST PRACTICES, PARTICIPATE IN TRAINING SESSIONS ABOUT EFFECTIVE ORGANIZING AND MORE. ADDITIONALLY, CONFERENCE ATTENDEES TOOK TO CAPITOL HILL FOR OUR LARGEST FEDERAL ADVOCACY DAY AND ASKED MEMBERS OF CONGRESS TO TAKE MEANINGFUL ACTION TO ADDRESS OUR NATION'S GUN VIOLENCE CRISIS.
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:	LOSS ON DISPOSAL OF FIXED ASSETS -66,168.
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)

(Rev. January 2025)

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

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	5,500,000	CASH
(2) EVERYTOWN FOR GUN SAFETY VICTORY FUND STATE COMMITTEE LLC	B	125,721	CASH
(3) EVERYTOWN FOR GUN SAFETY VICTORY FUND	Q	957,749	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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