

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2025

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2025 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization ACTION NOW, INC		D Employer identification number 45-4083809
	Doing business as		E Telephone number 713-554-1349
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	1717 WEST LOOP SOUTH		1800
City or town, state or province, country, and ZIP or foreign postal code HOUSTON, TX 77027			G Gross receipts \$ 19,104,199.
F Name and address of principal officer: KELLI RHEE SAME AS C ABOVE			H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
I Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c)(4) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
J Website: N/A			If "No," attach a list. See instructions
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			H(c) Group exemption number
L Year of formation: 2011			M State of legal domicile: TX

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: ACTION NOW INC.'S PHILANTHROPIC WORK TACKLES SOME OF THE MOST PRESSING PROBLEMS IN THE UNITED		
	2 Check this box <input type="checkbox"/> 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	2
	5 Total number of individuals employed in calendar year 2025 (Part V, line 2a)	5	0
	6 Total number of volunteers (estimate if necessary)	6	5
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	10,950,000.	19,000,000.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	63,735.	104,199.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	11,013,735.	19,104,199.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	10,877,253.	17,964,562.
	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)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25)	0.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	69,860.	8,899.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	10,947,113.	17,973,461.
19 Revenue less expenses. Subtract line 18 from line 12	66,622.	1,130,738.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	3,303,803.	4,434,541.
	22 Net assets or fund balances. Subtract line 21 from line 20	0.	0.
		3,303,803.	4,434,541.

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		
	ELIZABETH BANKS, TREASURER				
Paid Preparer Use Only	Preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	JENNIFER BECKER HARRIS	JENNIFER BECKER HARR	05/14/26		P00183358
Preparer Use Only	Firm's name	Firm's EIN		Phone no.	
	CLARK NUBER PS	91-1194016		425-454-4919	
Firm's address					
555 110TH AVE NE, SUITE 700					
BELLEVUE, WA 98004					

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: ACTION NOW INC.'S PHILANTHROPIC WORK TACKLES SOME OF THE MOST PRESSING PROBLEMS IN THE UNITED STATES. WE FOCUS ON CORRECTING SYSTEMIC FAILURES THROUGH EVIDENCE-BASED SOLUTIONS.

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 [X] 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 [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 17,964,562. including grants of \$ 17,964,562.) (Revenue \$) ACTION NOW, INC. INVESTS IN EVIDENCE-BASED SOLUTIONS THAT MAXIMIZE OPPORTUNITY AND MINIMIZE INJUSTICE. ACTION NOW, INC. INVESTS IN SUSTAINABLE CHANGE, BUILDING IT FROM THE GROUND UP BASED ON RESEARCH, DEEP THINKING, AND A STRONG FOUNDATION OF EVIDENCE TO DRIVE PUBLIC CONVERSATION, CRAFT POLICY, AND INSPIRE ACTION THROUGH EDUCATION AND ADVOCACY.

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

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

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 17,964,562.

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)? <i>If "Yes," complete Schedule A</i>		X
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		
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? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
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? <i>If "Yes," complete Schedule D, Part VI</i>		X
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	X	
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? <i>If "Yes," complete Schedule D, Part VIII</i>		X
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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
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)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 22-38 covering various organizational requirements.

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 []

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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

Table with 3 main columns: Question, Yes, No. Rows include questions 2a through 17 regarding employee counts, tax returns, gross income, foreign accounts, prohibited transactions, annual gross receipts, and various organizational requirements.

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

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included on line 1a, above, who are independent; 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?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 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?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 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 on Schedule O.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b 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; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 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?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 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?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed NONE
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[] Own website [X] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
ELIZABETH BANKS - 713-554-1349
1717 WEST LOOP SOUTH, SUITE 1800, HOUSTON, TX 77027

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	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	19,000,000.			
	g	Noncash contributions included in lines 1a-1f	1g	\$			
	h	Total. Add lines 1a-1f		19,000,000.			
Program Service Revenue	2 a	_____	Business Code				
	b	_____					
	c	_____					
	d	_____					
	e	_____					
	f	All other program service revenue					
	g	Total. Add lines 2a-2f					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		104,199.		104,199.	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross rents	6a	(i) Real	(ii) Personal		
	b	Less: rental expenses ...	6b				
	c	Rental income or (loss)	6c				
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	7a	(i) Securities	(ii) Other		
	b	Less: cost or other basis and sales expenses	7b				
	c	Gain or (loss)	7c				
	d	Net gain or (loss)					
8 a	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						
9 a	Gross income from gaming activities. See Part IV, line 19	9a					
b	Less: direct expenses	9b					
c	Net income or (loss) from gaming activities						
10 a	Gross sales of inventory, less returns and allowances	10a					
b	Less: cost of goods sold	10b					
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11 a	_____	Business Code				
	b	_____					
	c	_____					
	d	All other revenue					
	e	Total. Add lines 11a-11d					
12	Total revenue. See instructions		19,104,199.	0.	0.	104,199.	

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 ...	17,949,562.	17,949,562.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	15,000.	15,000.		
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				
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				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (nonemployees):				
a Management				
b Legal	149.		149.	
c Accounting	8,750.		8,750.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a _____				
b _____				
c _____				
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	17,973,461.	17,964,562.	8,899.	0.
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 <input type="checkbox"/> 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 X

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	948,408.	2	1,919,617.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	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		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b		10c
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11	2,355,395.	12	2,514,924.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 33)	3,303,803.	16	4,434,541.	
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	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		25	
	26 Total liabilities. Add lines 17 through 25	0.	26	0.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions		27	
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds	0.	29	0.
	30 Paid-in or capital surplus, or land, building, or equipment fund	0.	30	0.
	31 Retained earnings, endowment, accumulated income, or other funds	3,303,803.	31	4,434,541.
	32 Total net assets or fund balances	3,303,803.	32	4,434,541.
33 Total liabilities and net assets/fund balances	3,303,803.	33	4,434,541.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	19,104,199.
2	Total expenses (must equal Part IX, column (A), line 25)	2	17,973,461.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,130,738.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,303,803.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	4,434,541.

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: <input type="checkbox"/> Cash <input type="checkbox"/> Accrual <input checked="" type="checkbox"/> Other <u>MODIFIED CASH</u> 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? 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 <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? 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 <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
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? If the organization changed either its oversight process or selection process during the tax year, explain on 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?		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

Schedule B (Form 990)

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

Schedule of Contributors

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

OMB No. 1545-0047

Table with 2 columns: Name of the organization (ACTION NOW, INC) and Employer identification number (45-4083809)

Organization type (check one):

- Filers of: Section: Form 990 or 990-EZ [X] 501(c)(4) (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

- [X] 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 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), 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 (entering "N/A" in column (b) instead of the contributor name and address), 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), 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 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization ACTION NOW, INC	Employer identification number 45-4083809
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ <u>19,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization ACTION NOW, INC	Employer identification number 45-4083809
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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
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____

Name of organization ACTION NOW, INC	Employer identification number 45-4083809
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from 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	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D
(Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

ACTION NOW, INC

Employer identification number

45-4083809

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?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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 (for example, recreation or education) Preservation of a 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 Tax 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 on line 2a	2c
d Number of conservation easements included on line 2c 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 2d 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 make 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 program
 - 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 line 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				
d Equipment				
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B)) 0.

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) CREDIT FACILITY	2,514,924.	COST
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	2,514,924.	

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. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

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, line 15, col. (B))	

Part X Other Liabilities

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

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

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

**SCHEDULE I
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization ACTION NOW, INC Employer identification number 45-4083809

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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ABUNDANT HOUSING MA, INC. 50 MILK STREET, 16TH FLOOR BOSTON, MA 02109	85-1886940	501(C)(4)	412,800.	0.			TO EXPAND GRANTEE'S CAPACITY TO SUPPORT STATEWIDE PRO-HOUSING POLICIES IN
ABUNDANT HOUSING MA, INC. 50 MILK STREET, 16TH FLOOR BOSTON, MA 02109	85-1886940	501(C)(4)	16,000.	0.			TO CONDUCT A POLL IN BOSTON, MASSACHUSETTS TO ASSESS SUPPORT FOR A PRO-HOUSING ZONING REFORM
BIPARTISAN POLICY CENTER ACTION INC - 1225 I ST NW STE 900 - WASHINGTON, DC 20005	26-1299114	501(C)(4)	125,000.	0.			TO PROVIDE ADVOCACY AND EDUCATION EFFORTS REGARDING TAX POLICY AND REFORM, POTENTIAL OFFSETS
BOLDLY FORWARD COLORADO 3700 QUEBEC ST UNITY 100 PMB 133 DENVER, CO 80207	83-2448257	501(C)(4)	50,000.	0.			TO PROVIDE GENERAL OPERATING SUPPORT.
CENTENNIAL STATE PROSPERITY PO BOX 6692 DENVER, CO 80206	84-3973327	501(C)(4)	387,446.	0.			TO PROMOTE ACTION TO LOWER HOSPITAL SYSTEM COSTS AND SUPPORT THE PRESCRIPTION DRUG
CITIZEN ACTION OF NEW JERSEY 744 BROAD ST STE 2080 NEWARK, NJ 07102	22-2395222	501(C)(4)	100,000.	0.			TO SUPPORT GRANTEE'S ADVOCACY AND IMPLEMENTATION OF THE PRESCRIPTION DRUG

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

3 Enter total number of other organizations listed in the line 1 table 67.

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

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITIZENS' CLIMATE LOBBY 1330 ORANGE AVENUE #309 CORONADO, CA 92118	26-3521896	501(C)(4)	100,000.	0.			TO SUPPORT GRANTEE'S GENERAL OPERATIONS.
CLEANER ECONOMY COALITION, INC. 1500 K ST NW STE 850 WASHINGTON, DC 20005	99-2948277	501(C)(4)	100,000.	0.			TO PROVIDE GENERAL OPERATING SUPPORT.
CLIMATE SOLUTIONS ACTION FUND 1750 PENNSYLVANIA AVENUE NORTHWEST, UNIT 28043 - WASHINGTON, DC 20006	92-0410812	501(C)(4)	100,000.	0.			TO SUPPORT GRANTEE'S GENERAL OPERATING SUPPORT.
CO2EFFICIENT, LLC 1001 PENNSYLVANIA AVE NW SUITE 7117 WASHINGTON, DC 20004	82-2279926		407,500.	0.			TO SUPPORT GRANTEE'S SPONSORED PROJECT, ELECTRICITY CUSTOMER ALLIANCE, IN BETTER
COMMITTEE TO PROTECT HEALTH CARE 440 BURROUGHS ST STE 158 DETROIT, MI 48202	82-0596008	501(C)(4)	495,000.	0.			TO SUPPORT GRANTEE'S EDUCATION AND ISSUE ADVOCACY ACTIVITIES RELATED TO COMMERCIAL
ENVIRONMENTAL DEFENSE ACTION FUND 257 PARK AVE S NEW YORK, NY 10010	90-0080500	501(C)(4)	250,000.	0.			TO SUPPORT GRANTEE'S ADVOCACY WORK REGARDING PERMITTING REFORM.
FAMILIES AGAINST MANDATORY MINIMUMS - 1100 H ST NW STE 1000 - WASHINGTON, DC 20005	52-1750248	501(C)(4)	750,000.	0.			TO PROMOTE THE GENERAL OPERATING SUPPORT FOR GRANTEE'S SECOND CHANCE ADVOCACY EFFORTS AT THE
FAMILIES USA ACTION 1225 NEW YORK AVE NW STE 800 WASHINGTON, DC 20005	52-1632583	501(C)(4)	50,000.	0.			TO CONTINUE TO DRIVE AND PROTECT EFFECTIVE IMPLEMENTATION OF THE FEDERAL SURPRISE BILLING
FARELLA BRAUN + MARTEL LLP 235 MONTGOMERY STREET, 18TH FLOOR SAN FRANCISCO, CA 94104	94-1527242		549,477.	0.			TO SUPPORT RESEARCH ON ANTICOMPETITIVE CONDUCT IN THE HEALTHCARE INDUSTRY.

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FREEDOM VIRGINIA, INC. 6957 SILVERWOOD COURT NORFOLK, VA 23513	85-1257540	501(C)(4)	65,000.	0.			TO SUPPORT PRESCRIPTION DRUG AFFORDABILITY ADVOCACY, INCLUDING HOLDING LEGISLATOR
FREEDOM VIRGINIA, INC. 6957 SILVERWOOD COURT NORFOLK, VA 23513	85-1257540	501(C)(4)	100,000.	0.			TO SUPPORT PRESCRIPTION DRUG AFFORDABILITY ADVOCACY THROUGH GRASSROOTS AND NEWS MEDIA
FWD US INC 701 8TH ST NW STE 800 WASHINGTON, DC 20001	46-2223015	501(C)(4)	400,000.	0.			TO SUPPORT GRANTEE'S STRATEGIC ADVOCACY AT THE STATE AND FEDERAL LEVELS REGARDING CRIMINAL
GEM STATE HOUSING ALLIANCE PO BOX: 2035 BOISE, ID 83701	93-1391633	501(C)(4)	245,000.	0.			TO SUPPORT GENERAL OPERATING SUPPORT.
GLOBAL HEALTH PAYMENT LLC 1723 WEST JOPPA ROAD TOWSON, MD 21204	45-3652456		75,073.	0.			TO PROVIDE EDUCATION AND RESOURCES AIMED AT BUILDING STATE CAPACITY TO IMPLEMENT HOSPITAL
GREATER GREATER WASHINGTON 80 M ST SE STE 100 WASHINGTON, DC 20003	47-2738753	501(C)(4)	945,198.	0.			TO SCALE UP STATE-LEVEL PRO-HOUSING INITIATIVES IN MARYLAND AND VIRGINIA TO ADVANCE LEGISLATIVE
GREATER GREATER WASHINGTON 80 M ST SE STE 100 WASHINGTON, DC 20003	47-2738753	501(C)(4)	160,542.	0.			TO SUPPORT PRO-HOUSING ADVOCACY CAMPAIGNS AT THE STATE AND LOCAL LEVEL.
ILLINOIS PRISON PROJECT ACTION FUND - 52 W JACKSON BLVD SUITE 452 - CHICAGO, IL 60604	92-2106980	501(C)(4)	150,000.	0.			TO ADVANCE EVIDENCE-BASED SENTENCING REFORMS THAT IMPROVE PUBLIC SAFETY.
INFRASTRATEGIES LLC 2211 MICHELSON DRIVE, SUITE 900 IRVINE, CA 92612	82-4352111		54,520.	0.			TO EXPLORE THE ESTABLISHMENT OF AN ORGANIZATION IN LOS ANGELES THAT WILL CONDUCT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INSIDE HIGHER ED 1150 CONNECTICUT AVE WASHINGTON, DC 20036	80-0093170		55,000.	0.			TO PRODUCE A REPORT AND COMPANION WEBCAST ON THE IMPACT OF THE HIGHER EDUCATION PROVISIONS IN
INSTITUTO DEL DESARROLLO DE LA JUVENTUD - 655 AVE ROBERTO H TODD PMB 132 - SAN JUAN, PR 00907	66-0804193		299,560.	0.			TO ADVANCE SAFETY NET REFORMS IN PUERTO RICO TO EASE THE TRANSITION TO WORK BY REDUCING THE
MARYLAND CITIZENS HEALTH INITIATIVE INC - 2600 SAINT PAUL ST - BALTIMORE, MD 21218	52-2208746	501(C)(4)	212,500.	0.			TO SUPPORT EDUCATION AND ISSUE ADVOCACY ACTIVITIES RELATED TO THE PRESCRIPTION DRUG
MICHIGAN HEALTH PURCHASERS COALITION - 41650 GARDENBROOK RD STE 175 - NOVI, MI 48375-1323	93-3744148	501(C)(4)	292,500.	0.			TO SUPPORT GRANTEE'S EDUCATION AND ISSUE ADVOCACY ACTIVITIES TO ADDRESS HIGH AND RISING
MONTANA PRETRIAL SERVICES LLC 1 N LAST CHANCE GULCH STE 5 HELENA, MT 59601	99-3174602		299,600.	0.			TO EVALUATE MONTANA'S PRE-TRIAL SUPERVISION AND ELECTRONIC MONITORING PRACTICES.
NATIONAL TAXPAYERS UNION 122 C STREET NW SUITE 700 WASHINGTON, DC 20001	52-1009116	501(C)(4)	150,000.	0.			TO COMMISSION A POLLING AND RESEARCH FIRM TO EXPLORE IMPORTANT TOPICS DIRECTLY RELATED TO THE
NEIGHBORS FOR MORE NEIGHBORS 221 1ST AVENUE NORTHEAST MINNEAPOLIS, MN 55413	92-1373657	501(C)(4)	325,000.	0.			TO EXPAND GRANTEE'S CAPACITY AS A STATE-LEVEL, PRO-HOUSING ADVOCACY ORGANIZATION
NEW YORK BIRTH CONTROL ACTION FUND PO BOX 110897 BROOKLYN, NY 11211	84-3505548	501(C)(4)	15,000.	0.			TO SUPPORT ADVOCACY CAMPAIGN TO CATALYZE IMPLEMENTATION OF PHARMACIST PRESCRIBED
NISKANEN CENTER FOR PUBLIC POLICY 1875 CONNECTICUT AVENUE NORTHWEST, WASHINGTON, DC 20009	47-4946572	501(C)(4)	300,000.	0.			TO SUPPORT GRANTEE'S STATE AND FEDERAL ADVOCACY EFFORTS REGARDING A CRIME CONTROL

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OPEN NEW YORK INC 251 LITTLE FALLS DR WILMINGTON, DE 19808	84-3756425	501(C)(4)	500,000.	0.			TO EXPAND GRANTEE'S PRO-HOUSING ADVOCACY EFFORTS IN NEW YORK THROUGH LOCAL AND STATE
OREGON COALITION FOR AFFORDABLE PRESCRIPTIONS - 1001 SE WATER AVE. - PORTLAND, OR 97214	81-5136635	501(C)(4)	220,000.	0.			TO SUPPORT GRANTEE'S ISSUE AND EDUCATIONAL ADVOCACY IN SUPPORT OF AFFORDABLE PRESCRIPTION
OTHRAM, INC. 2829 TECHNOLOGY FOREST BLVD, STE. 1 THE WOODLANDS, TX 77381	83-1835867		556,895.	0.			TO SUPPORT A DNA ANALYSIS PILOT PROGRAM WITH THE HOUSTON POLICE DEPARTMENT (HPD) USING FORENSIC
OVERDRIVE PRODUCTS INC. 447 BROADWAY #371 NEW YORK, NY 10013	93-3928600		300,000.	0.			TO STRENGTHEN COMMUNITY HEALTH AND PUBLIC SAFETY BY PREPARING A RESEARCH STUDY ON WHETHER
PATIENTS FOR AFFORDABLE DRUGS NOW 1155 15TH STREET NW, SUITE 500 WASHINGTON, DC 20005	82-3044855	501(C)(4)	1,750,000.	0.			TO PROVIDE GENERAL OPERATING SUPPORT.
PRODUCCIONES EL RASTRO LLC 1825 PONCE DE LEON CORAL GABLES, FL 33134	82-0791262		75,000.	0.			TO PROVIDE GENERAL OPERATING SUPPORT.
PROGRESSIVE STATE LEADERS COMMITTEE, INC. - 1350 I STREET NORTHWEST, SUITE 300 - WASHINGTON, DC 20005	05-0623909	501(C)(4)	237,854.	0.			TO SUPPORT THE CONVENING OF STATE LEADERS AND OTHER STAKEHOLDERS TO CONSIDER PROGRAMS AND
PUBLIC CITIZEN INC 1600 20TH STREET, N.W. WASHINGTON, DC 20009	23-7104508	501(C)(4)	220,000.	0.			TO DEFEND THE DRUG PRICE NEGOTIATION PROVISIONS IN THE INFLATION REDUCTION ACT (IRA) AND CONTINUING
PUBLIC PRIVATE STRATEGIES, LLC 700 PENNSYLVANIA AVENUE SOUTHEAST WASHINGTON, DC 20003	82-2648213		350,000.	0.			TO SUPPORT GRANTEE'S EDUCATION AND ADVOCACY ON HEALTH CARE PRICES.

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUBLIC PRIVATE STRATEGIES, LLC 700 PENNSYLVANIA AVENUE SOUTHEAST WASHINGTON, DC 20003	82-2648213		250,000.	0.			TO SUPPORT GRANTEE'S EDUCATION, ISSUE ADVOCACY, AND OUTREACH EFFORTS TO IMPLEMENT THE
PUBLIC PRIVATE STRATEGIES, LLC 700 PENNSYLVANIA AVENUE SOUTHEAST WASHINGTON, DC 20003	82-2648213		100,000.	0.			TO DEVELOP AND IMPLEMENT A CAMPAIGN THAT FOCUSES ON EDUCATING CONGRESSIONAL LEADERS AND
RETURN STRONG 304 S JONES BLVD, UNIT 4711 LAS VEGAS, NV 89107	88-0908924	501(C)(3)	55,000.	0.			TO SUPPORT GRANTEE'S EDUCATION AND ADVOCACY EFFORTS AROUND PUBLIC SAFETY REFORM.
SAFETY AND JUSTICE OREGON 221 NW 2ND AVE STE 209 PORTLAND, OR 97209	30-0457438	501(C)(4)	100,000.	0.			TO SUPPORT GRANTEE'S WORK TO REMOVE THE SUNSET CLAUSE FOR THE FAMILY SENTENCING ALTERNATIVE
SHELTERJH PO BOX 2692 JACKSON, WY 83001	81-4453887	501(C)(4)	250,000.	0.			TO EXPAND GRANTEE'S CAPACITY TO SUPPORT PRO-HOUSING POLICIES IN WYOMING.
STAND FOR CHILDREN, INC. 2121 SW BROADWAY #111 PORTLAND, OR 97201	52-2146673	501(C)(4)	85,000.	0.			TO SUPPORT GRANTEE'S ISSUE AND EDUCATIONAL ADVOCACY IN COLORADO REGARDING ELIMINATING
TAKE ACTION MINNESOTA 705 RAYMOND AVE STE 100 SAINT PAUL, MN 55114	20-3338691	501(C)(4)	100,000.	0.			TO IMPLEMENT MINNESOTA'S PRESCRIPTION DRUG AFFORDABILITY BOARD AND ONGOING ADVOCACY AROUND
TEXANS FOR HOUSING 10415 MOURNING DOVE DR AUSTIN, TX 78750	85-3464879	501(C)(4)	350,000.	0.			TO SUPPORTING GRANTEE'S SOCIAL WELFARE ACTIVITIES RELATED TO HOUSING REFORMS IN TEXAS.
TEXANS FOR HOUSING 10415 MOURNING DOVE DR AUSTIN, TX 78750	85-3464879	501(C)(4)	161,500.	0.			TO SUPPORT A PRO-HOUSING ADVOCACY CAMPAIGN AT THE STATE LEVEL.

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THIRD WAY 1025 CONNECTICUT AVE NW STE 400 WASHINGTON, DC 20036	20-1734070	501(C)(4)	257,970.	0.			TO SUPPORT GRANTEE'S EFFORTS TO RESEARCH, DESIGN, AND DISSEMINATE MESSAGING TOOLS TO HELP
TRULEO, INC. 1 E. ERIE ST., SUITE 525-2246 CHICAGO, IL 60611	36-4992894		62,000.	0.			TO SUPPORT A CONVENING OF RESEARCHERS DESIGNED TO SHOW HOW THE GRANTEE'S BODY-WORN CAMERA
UNIFY US 30 N GOULD ST STE R SHERIDAN, WY 82801	93-3340372	501(C)(4)	250,000.	0.			TO IDENTIFY AND ADVANCE COMMON SENSE PUBLIC SAFETY SOLUTIONS AT THE STATE AND FEDERAL LEVEL.
UNITED STATES PUBLIC INTEREST RESEARCH GROUP, INC. - 1543 WAZEE ST. SUITE 460 - DENVER, CO 80202	04-2790740	501(C)(4)	100,000.	0.			TO SUPPORT GRANTEE'S EDUCATION AND ISSUE ADVOCACY EFFORTS REGARDING THE HIGH COST
UNITED STATES PUBLIC INTEREST RESEARCH GROUP, INC. - 1543 WAZEE ST. SUITE 460 - DENVER, CO 80202	04-2790740	501(C)(4)	135,000.	0.			TO SUPPORT GRANTEE'S GRASSROOTS OUTREACH EFFORTS REGARDING SITE-NEUTRAL PAYMENT
UP FOR GROWTH ACTION, INC. 1627 I STREET NORTHWEST WASHINGTON, DC 20006	82-3579775	501(C)(4)	270,900.	0.			TO DEVELOP AND ADVOCATE FOR FEDERAL POLICY PROPOSALS AIMED AT INCREASING THE PRODUCTION
URBAN PHOENIX PROJECT NETWORK 106 WEST OSBORN RD #1142 PHOENIX, AZ 85018	83-2098077	501(C)(4)	400,000.	0.			TO PROVIDE GENERAL OPERATING SUPPORT.
US MARKET INSTITUTE 10150 MARSHALL POND ROAD BURKE, VA 22015	39-2714954	501(C)(4)	250,000.	0.			TO LEVERAGE AN EXISTING NETWORK OF ADMINISTRATION STAFF, CONGRESSIONAL STAFF AND ELECTED
US MARKET INSTITUTE 10150 MARSHALL POND ROAD BURKE, VA 22015	39-2714954	501(C)(4)	698,000.	0.			TO CONTINUE SUPPORT OF GRANTEE'S EDUCATION AND ADVOCACY SURROUNDING SITE-NEUTRAL PRICING

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VERA ACTION INC. 34 35TH STREET SUITE 4-2-A BROOKLYN, NY 11232	85-3897516	501(C)(4)	400,000.	0.			TO CONTINUE GRANTEE'S ADVOCACY WORK AT THE STATE AND FEDERAL LEVEL TO ADVANCE POLICY REFORMS
VOICES OF HEALTH CARE ACTION 8465 W SAHARA AVE SUITE 111 LAS VEGAS, NV 89117	87-4361466	501(C)(4)	130,000.	0.			TO ELEVATE PATIENT VOICES IN SUPPORT OF HEALTHCARE AND PRESCRIPTION DRUG PRICING REFORM.
VOX MEDIA, LLC 1701 RHODE ISLAND AVENUE NORTHWEST WASHINGTON, DC 20036	20-2057273		522,044.	0.			TO SUPPORT AN EXPANSIVE EDITORIAL PROJECT THAT BREAKS DOWN THE CURRENT U.S. INFRASTRUCTURE
WAYPOINT STRATEGY GROUP LLC 3648 13TH ST NW WASHINGTON, DC 20010	39-4562844		45,000.	0.			TO PRODUCE A PRACTITIONER-FOCUSED REPORT THAT CAPTURES LESSONS LEARNED, BEST
WELCOMING NEIGHBORS NETWORK 275 SEVENTH AVE. NEW YORK, NY 10001	99-4813080	501(C)(4)	279,683.	0.			TO SUPPORT GRANTEE'S ADVOCACY EFFORTS TO REMOVE REGULATORY BARRIERS TO EXPAND THE
WREN ACTION GROUP 1408 SINGLETON AVE AUSTIN, TX 78702	33-1929112	501(C)(4)	50,000.	0.			TO SUPPORT GRANTEE'S ORGANIZATIONAL/INTERNAL EFFORTS.
WREN ACTION GROUP 1408 SINGLETON AVE AUSTIN, TX 78702	33-1929112	501(C)(4)	150,000.	0.			TO SUPPORT NEAR TERM LEGISLATIVE ADVOCACY EFFORTS TO ADVANCE ACCESS TO COUNSEL WORK IN TEXAS,
YES ON AFFORDABLE HOUSING 515 EAST 86TH ST #802 NEW YORK, NY 10028	39-4177502	527	250,000.	0.			TO PROVIDE GENERAL SUPPORT FOR BALLOT MEASURES.

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 non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
TO PRODUCE A WHITE PAPER ON INDUSTRIAL POLICY RELATING TO FACTORY-BUILT HOUSING.	1	5,000.	0.		
TO PRODUCE ANALYSIS AND EDITORIAL CONTENT THAT EXPLORES INVESTMENTS IN CARE INFRASTRUCTURE TO MEET THE NEEDS OF FAMILIES ACROSS INCOME DISTRIBUTION.	1	5,000.	0.		
TO PRODUCE ANALYSIS AND EDITORIAL CONTENT THAT EXPLORES INVESTMENTS IN CARE INFRASTRUCTURE TO MEET THE NEEDS OF FAMILIES ACROSS INCOME DISTRIBUTION.	1	5,000.	0.		

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

PART I, LINE 2:

THE GRANT MONITORING PROCESS INCLUDES EXECUTING A GRANT AGREEMENT AS WELL AS FOLLOW-UP COMMUNICATION/CONFIRMATION, TYPICALLY THROUGH THE SUBMISSION OF GRANT REPORTS, THAT ALL FUNDS GRANTED HAVE BEEN OR WILL BE USED FOR THE ORIGINAL PURPOSE OR PROGRAM FOR WHICH THEY WERE GRANTED. IF ACTION NOW, INC. WERE TO RECEIVE INFORMATION INDICATING THAT A DIVERSION OF GRANT FUNDS HAD TAKEN PLACE, ACTION NOW, INC. WOULD REVIEW THE INFORMATION AND INVESTIGATE IF APPROPRIATE. IF ACTION NOW, INC. WERE TO DETERMINE THAT A DIVERSION OCCURRED, IT WOULD TAKE ANY APPROPRIATE STEPS TO OBTAIN REPAYMENT AND WOULD REQUIRE THE GRANTEE TO MAKE ANY NEEDED CHANGES BEFORE MAKING FUTURE GRANTS.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: ABUNDANT HOUSING MA, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO EXPAND GRANTEE'S CAPACITY TO SUPPORT STATEWIDE PRO-HOUSING POLICIES IN MASSACHUSETTS.

NAME OF ORGANIZATION OR GOVERNMENT: ABUNDANT HOUSING MA, INC.

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: TO CONDUCT A POLL IN BOSTON, MASSACHUSETTS TO ASSESS SUPPORT FOR A PRO-HOUSING ZONING REFORM AGENDA.

NAME OF ORGANIZATION OR GOVERNMENT: BIPARTISAN POLICY CENTER ACTION INC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE ADVOCACY AND EDUCATION EFFORTS REGARDING TAX POLICY AND REFORM, POTENTIAL OFFSETS AND ECONOMIC POLICY.

NAME OF ORGANIZATION OR GOVERNMENT: CENTENNIAL STATE PROSPERITY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROMOTE ACTION TO LOWER HOSPITAL SYSTEM COSTS AND SUPPORT THE PRESCRIPTION DRUG AFFORDABILITY BOARD'S EFFORTS TO LOWER MEDICATION PRICES.

NAME OF ORGANIZATION OR GOVERNMENT: CITIZEN ACTION OF NEW JERSEY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT GRANTEE'S ADVOCACY AND IMPLEMENTATION OF THE PRESCRIPTION DRUG AFFORDABILITY COUNCIL.

NAME OF ORGANIZATION OR GOVERNMENT: CO2EFFICIENT, LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT GRANTEE'S SPONSORED PROJECT, ELECTRICITY CUSTOMER ALLIANCE, IN BETTER ALIGNING ELECTRICITY CUSTOMER VOICES ACROSS COMMERCIAL, INDUSTRIAL, TECHNOLOGY, AND RESIDENTIAL SECTORS ADVOCATING IN SUPPORT OF GRID INFRASTRUCTURE AND PERMITTING REFORMS.

NAME OF ORGANIZATION OR GOVERNMENT: COMMITTEE TO PROTECT HEALTH CARE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT GRANTEE'S EDUCATION AND ISSUE ADVOCACY ACTIVITIES RELATED TO COMMERCIAL HEALTH CARE PRICING REFORMS AT THE STATE LEVEL ACROSS MULTIPLE JURISDICTIONS.

NAME OF ORGANIZATION OR GOVERNMENT: FAMILIES AGAINST MANDATORY MINIMUMS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROMOTE THE GENERAL OPERATING SUPPORT FOR GRANTEE'S SECOND CHANCE ADVOCACY EFFORTS AT THE STATE AND FEDERAL LEVEL.

NAME OF ORGANIZATION OR GOVERNMENT: FAMILIES USA ACTION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO CONTINUE TO DRIVE AND PROTECT EFFECTIVE IMPLEMENTATION OF THE FEDERAL SURPRISE BILLING LAW.

NAME OF ORGANIZATION OR GOVERNMENT: FREEDOM VIRGINIA, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT PRESCRIPTION DRUG AFFORDABILITY ADVOCACY, INCLUDING HOLDING LEGISLATOR ROUNDTABLES TO OFFER EDUCATION ON PRESCRIPTION DRUG AFFORDABILITY, PARTICULARLY FOR NEWLY ELECTED LEGISLATORS.

NAME OF ORGANIZATION OR GOVERNMENT: FREEDOM VIRGINIA, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT PRESCRIPTION DRUG AFFORDABILITY ADVOCACY THROUGH GRASSROOTS AND NEWS MEDIA OUTREACH.

NAME OF ORGANIZATION OR GOVERNMENT: FWD US INC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT GRANTEE'S STRATEGIC ADVOCACY AT THE STATE AND FEDERAL LEVELS REGARDING CRIMINAL JUSTICE REFORM AND PUBLIC SAFETY.

NAME OF ORGANIZATION OR GOVERNMENT: GLOBAL HEALTH PAYMENT LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE EDUCATION AND RESOURCES AIMED AT BUILDING STATE CAPACITY TO IMPLEMENT HOSPITAL GLOBAL BUDGETS

Part IV Supplemental Information

(HGB) BY DEVELOPING AND PUBLISHING MODEL LEGISLATION FOR ALL-PAYER HGBS, DEVELOPING AND PUBLISHING A REGULATORY HANDBOOK INCLUDING SUPPLEMENTAL POLICIES WHICH COULD BE PAIRED WITH GLOBAL BUDGETS, AND PROVIDING EDUCATIONAL MATERIALS, RESOURCES AND TECHNICAL ASSISTANCE TO STATES.

NAME OF ORGANIZATION OR GOVERNMENT: GREATER GREATER WASHINGTON

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SCALE UP STATE-LEVEL PRO-HOUSING INITIATIVES IN MARYLAND AND VIRGINIA TO ADVANCE LEGISLATIVE AND EXECUTIVE BRANCH REFORMS.

NAME OF ORGANIZATION OR GOVERNMENT: INFRASTRATEGIES LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO EXPLORE THE ESTABLISHMENT OF AN ORGANIZATION IN LOS ANGELES THAT WILL CONDUCT POLICY RESEARCH AND ANALYSIS TO INFORM DECISION-MAKERS, EDUCATE THE PUBLIC ABOUT COMPLEX TRANSIT AND TRANSPORTATION POLICIES, AND PROPOSE EVIDENCE-BASED SOLUTIONS TO THE REGION'S MOBILITY CHALLENGES.

NAME OF ORGANIZATION OR GOVERNMENT: INSIDE HIGHER ED

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PRODUCE A REPORT AND COMPANION WEBCAST ON THE IMPACT OF THE HIGHER EDUCATION PROVISIONS IN THE ONE BIG BEAUTIFUL BILL ACT.

NAME OF ORGANIZATION OR GOVERNMENT:

INSTITUTO DEL DESARROLLO DE LA JUVENTUD

(H) PURPOSE OF GRANT OR ASSISTANCE: TO ADVANCE SAFETY NET REFORMS IN PUERTO RICO TO EASE THE TRANSITION TO WORK BY REDUCING THE BENEFIT CLIFFS OR SUDDEN DROPS IN BENEFITS THAT KEEP PEOPLE FROM JOINING THE WORKFORCE.

NAME OF ORGANIZATION OR GOVERNMENT:

MARYLAND CITIZENS HEALTH INITIATIVE INC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT EDUCATION AND ISSUE ADVOCACY ACTIVITIES RELATED TO THE PRESCRIPTION DRUG AFFORDABILITY INITIATIVE.

NAME OF ORGANIZATION OR GOVERNMENT: MICHIGAN HEALTH PURCHASERS COALITION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT GRANTEE'S EDUCATION AND ISSUE ADVOCACY ACTIVITIES TO ADDRESS HIGH AND RISING HEALTH CARE COSTS.

NAME OF ORGANIZATION OR GOVERNMENT: NATIONAL TAXPAYERS UNION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO COMMISSION A POLLING AND RESEARCH FIRM TO EXPLORE IMPORTANT TOPICS DIRECTLY RELATED TO THE TAX CUTS AND JOBS ACT OF 2017.

NAME OF ORGANIZATION OR GOVERNMENT: NEIGHBORS FOR MORE NEIGHBORS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO EXPAND GRANTEE'S CAPACITY AS A STATE-LEVEL, PRO-HOUSING ADVOCACY ORGANIZATION THAT CAN HAVE AN IMPACT AT BOTH STATE AND LOCAL LEVELS IN MINNESOTA.

NAME OF ORGANIZATION OR GOVERNMENT: NEW YORK BIRTH CONTROL ACTION FUND

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT ADVOCACY CAMPAIGN TO CATALYZE IMPLEMENTATION OF PHARMACIST PRESCRIBED BIRTH CONTROL IN NEW YORK.

NAME OF ORGANIZATION OR GOVERNMENT: NISKANEN CENTER FOR PUBLIC POLICY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT GRANTEE'S STATE AND FEDERAL ADVOCACY EFFORTS REGARDING A CRIME CONTROL POLICY AGENDA THAT

Part IV Supplemental Information

PRIORITIZES PREVENTION, DETERRENCE, AND SWIFT, CERTAIN, AND FAIR SANCTIONS.

NAME OF ORGANIZATION OR GOVERNMENT: OPEN NEW YORK INC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO EXPAND GRANTEE'S PRO-HOUSING ADVOCACY EFFORTS IN NEW YORK THROUGH LOCAL AND STATE ORGANIZING AND COALITION BUILDING.

NAME OF ORGANIZATION OR GOVERNMENT:

OREGON COALITION FOR AFFORDABLE PRESCRIPTIONS

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT GRANTEE'S ISSUE AND EDUCATIONAL ADVOCACY IN SUPPORT OF AFFORDABLE PRESCRIPTION DRUGS IN OREGON.

NAME OF ORGANIZATION OR GOVERNMENT: OTHRAM, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT A DNA ANALYSIS PILOT PROGRAM WITH THE HOUSTON POLICE DEPARTMENT (HPD) USING FORENSIC INVESTIGATIVE GENETIC GENEALOGY (FIGG), TO DETERMINE IF IT YIELDS IMPROVED CASE OUTCOMES.

NAME OF ORGANIZATION OR GOVERNMENT: OVERDRIVE PRODUCTS INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO STRENGTHEN COMMUNITY HEALTH AND PUBLIC SAFETY BY PREPARING A RESEARCH STUDY ON WHETHER PROVIDING FENTANYL TEST STRIPS AND HARM REDUCTION MESSAGING TO EMERGENCY DEPARTMENT PATIENTS CAN REDUCE REPEAT OVERDOSES AND SUPPORTING GRANTEE'S DEVELOPMENT AND DISSEMINATION OF EVIDENCE-BASED HARM REDUCTION TOOLS.

NAME OF ORGANIZATION OR GOVERNMENT:

PROGRESSIVE STATE LEADERS COMMITTEE, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE CONVENING OF STATE LEADERS AND OTHER STAKEHOLDERS TO CONSIDER PROGRAMS AND POLICIES, TO SHARE INFORMATION, TO LAUNCH NEW INITIATIVES RESPONSIVE TO PUBLIC SAFETY NEEDS, TO ANALYZE THE ROLE STATE ATTORNEY GENERALS PLAY IN ADDRESSING MAJOR ISSUES IN PUBLIC SAFETY, AND TO REVIEW THE EFFECTIVENESS AND FEASIBILITY OF CERTAIN PUBLIC SAFETY PROGRAMS AND POLICY SOLUTION.

NAME OF ORGANIZATION OR GOVERNMENT: PUBLIC CITIZEN INC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO DEFEND THE DRUG PRICE NEGOTIATION PROVISIONS IN THE INFLATION REDUCTION ACT (IRA) AND CONTINUING SUPPORT OF THE IRA'S IMPLEMENTATION.

NAME OF ORGANIZATION OR GOVERNMENT: PUBLIC PRIVATE STRATEGIES, LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT GRANTEE'S EDUCATION, ISSUE ADVOCACY, AND OUTREACH EFFORTS TO IMPLEMENT THE INFLATION REDUCTION ACT AND REDUCE PRESCRIPTION DRUG COSTS.

NAME OF ORGANIZATION OR GOVERNMENT: PUBLIC PRIVATE STRATEGIES, LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO DEVELOP AND IMPLEMENT A CAMPAIGN THAT FOCUSES ON EDUCATING CONGRESSIONAL LEADERS AND THE BUSINESS COMMUNITY ABOUT CLOSING LOOPHOLES INCLUDING ROUND TRIPPING.

NAME OF ORGANIZATION OR GOVERNMENT: SAFETY AND JUSTICE OREGON

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT GRANTEE'S WORK TO REMOVE THE SUNSET CLAUSE FOR THE FAMILY SENTENCING ALTERNATIVE PROGRAM, EXPAND ELIGIBILITY FOR EARNED SENTENCE CREDITS, AND ADVANCE EVIDENCE-BASED CRIMINAL JUSTICE RESEARCH POLICY.

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: STAND FOR CHILDREN, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT GRANTEE'S ISSUE AND EDUCATIONAL ADVOCACY IN COLORADO REGARDING ELIMINATING FEES RELATED TO HEALTHCARE ACCESS AND ADMINISTRATIVE COSTS, REFINING LEGAL PROCEDURES FOR LOW-LEVEL OFFENCES, OVERSIGHT OF REMOTE SUPERVISION LEGISLATION, AND RESEARCH ON THE FINANCIAL IMPACT OF RESTITUTION ON FAMILIES.

NAME OF ORGANIZATION OR GOVERNMENT: TAKE ACTION MINNESOTA

(H) PURPOSE OF GRANT OR ASSISTANCE: TO IMPLEMENT MINNESOTA'S PRESCRIPTION DRUG AFFORDABILITY BOARD AND ONGOING ADVOCACY AROUND AFFORDABLE DRUG PRICES.

NAME OF ORGANIZATION OR GOVERNMENT: THIRD WAY

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT GRANTEE'S EFFORTS TO RESEARCH, DESIGN, AND DISSEMINATE MESSAGING TOOLS TO HELP POLICYMAKERS TALK ABOUT FISCAL ISSUES IN A RESPONSIBLE WAY.

NAME OF ORGANIZATION OR GOVERNMENT: TRULEO, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT A CONVENING OF RESEARCHERS DESIGNED TO SHOW HOW THE GRANTEE'S BODY-WORN CAMERA ANALYTICS CAN HELP RESEARCHERS STUDY A VARIETY OF POLICE-COMMUNITY INTERACTIONS.

NAME OF ORGANIZATION OR GOVERNMENT:

UNITED STATES PUBLIC INTEREST RESEARCH GROUP, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT GRANTEE'S EDUCATION AND ISSUE ADVOCACY EFFORTS REGARDING THE HIGH COST OF HEALTH CARE, INCLUDING CURBING OR ENDING ANTICOMPETITIVE PHARMACEUTICAL PRACTICES AND PATENT REFORM

NAME OF ORGANIZATION OR GOVERNMENT:

UNITED STATES PUBLIC INTEREST RESEARCH GROUP, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT GRANTEE'S GRASSROOTS OUTREACH EFFORTS REGARDING SITE-NEUTRAL PAYMENT POLICIES.

NAME OF ORGANIZATION OR GOVERNMENT: UP FOR GROWTH ACTION, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO DEVELOP AND ADVOCATE FOR FEDERAL POLICY PROPOSALS AIMED AT INCREASING THE PRODUCTION AND PRESERVATION OF HOUSING TO ADDRESS THE HOUSING SHORTAGE IN THE UNITED STATES.

NAME OF ORGANIZATION OR GOVERNMENT: US MARKET INSTITUTE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO LEVERAGE AN EXISTING NETWORK OF ADMINISTRATION STAFF, CONGRESSIONAL STAFF AND ELECTED OFFICIALS TO AMPLIFY THE NEED FOR MEDICARE ADVANTAGE REFORM WITH AN EMPHASIS ON FRAUD AND ABUSE.

NAME OF ORGANIZATION OR GOVERNMENT: US MARKET INSTITUTE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO CONTINUE SUPPORT OF GRANTEE'S EDUCATION AND ADVOCACY SURROUNDING SITE-NEUTRAL PRICING POLICIES.

NAME OF ORGANIZATION OR GOVERNMENT: VERA ACTION INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO CONTINUE GRANTEE'S ADVOCACY WORK AT THE STATE AND FEDERAL LEVEL TO ADVANCE POLICY REFORMS IN COMMUNITY-DRIVEN PUBLIC SAFETY, PRETRIAL JUSTICE, AND SENTENCING.

NAME OF ORGANIZATION OR GOVERNMENT: VOX MEDIA, LLC

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT AN EXPANSIVE EDITORIAL PROJECT THAT BREAKS DOWN THE CURRENT U.S. INFRASTRUCTURE CRISIS ACROSS ENERGY, HOUSING, TRANSPORTATION, AND OTHER KEY INFRASTRUCTURE-RELATED ISSUES.

NAME OF ORGANIZATION OR GOVERNMENT: WAYPOINT STRATEGY GROUP LLC

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PRODUCE A PRACTITIONER-FOCUSED REPORT THAT CAPTURES LESSONS LEARNED, BEST PRACTICES, AND POTENTIAL FUTURE ACTIONS FOR EFFECTIVE UTILIZATION OF OTHER TRANSACTION AUTHORITIES AT THE U.S. DEPARTMENT OF ENERGY.

NAME OF ORGANIZATION OR GOVERNMENT: WELCOMING NEIGHBORS NETWORK

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT GRANTEE'S ADVOCACY EFFORTS TO REMOVE REGULATORY BARRIERS TO EXPAND THE SUPPLY OF HOUSING ACROSS A DIVERSE ARRAY OF STATES AND MUNICIPALITIES

NAME OF ORGANIZATION OR GOVERNMENT: WREN ACTION GROUP

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT NEAR TERM LEGISLATIVE ADVOCACY EFFORTS TO ADVANCE ACCESS TO COUNSEL WORK IN TEXAS, OHIO, AND PENNSYLVANIA.

**SCHEDULE O
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

ACTION NOW, INC

Employer identification number

45-4083809

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

STATES. WE FOCUS ON CORRECTING SYSTEMIC FAILURES THROUGH EVIDENCE-BASED SOLUTIONS.

FORM 990, PART I, LINE 6:

THE NUMBER OF VOLUNTEERS IS EQUAL TO THE TOTAL NUMBER OF UNPAID BOARD DIRECTORS AND OFFICERS OF ACTION NOW INC.

FORM 990, PART VI, SECTION A, LINE 2:

JOHN AND LAURA ARNOLD HAVE A FAMILY RELATIONSHIP. LAURA AND JOHN ARNOLD HAVE A BUSINESS RELATIONSHIP WITH KELLI RHEE, ELIZABETH BANKS, AND ROXANNE ALMARAZ.

FORM 990, PART VI, SECTION A, LINE 8B:

DUE TO THE SIZE OF THE ORGANIZATION AND THE BOARD, COMMITTEES ARE NOT DEEMED NECESSARY.

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

A COPY OF THE DRAFT FORM 990 TO ALL BOARD MEMBERS PRIOR TO FILING WITH THE IRS.

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

ACTION NOW, INC. ENFORCES COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICY, AND ANY NEW TRANSACTIONS THAT MAY PRESENT A CONFLICT ARE CONSIDERED. IF A TRANSACTION OR ARRANGEMENT WOULD CREATE A CONFLICT OF INTEREST, THE BOARD MEMBER(S) WITH THE CONFLICT WOULD RECUSE THEMSELVES FROM DISCUSSION AND VOTING IN REGARD TO THE MANNER.

FORM 990, PART VI, SECTION C, LINE 19:

THESE DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST WHEN REQUIRED BY FEDERAL OR STATE LAW.

FORM 990, PART VI, LINE 13:

ACTION NOW, INC. WILL FOLLOW THE RELEVANT POLICIES OF ARNOLD VENTURES LLC, A DISREGARDED ENTITY FOR TAX PURPOSES OF ARNOLD VENTURES, INC.

**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 <p align="center">ACTION NOW, INC</p>	Employer identification number <p align="center">45-4083809</p>
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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	No
LAURA AND JOHN ARNOLD FOUNDATION - 26-3241764, 1717 WEST LOOP SOUTH SUITE 1800, HOUSTON, TX 77027-3048	GRANT MAKING	TEXAS	501(C)(3)	PF	N/A	X	

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) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
HOFFER CO-INVEST LP - 46-3412190, 2100 MCKINNEY AVENUE, SUITE 1500, DALLAS, TX 75201	RELATED PARTY INVESTMENT	TX	N/A	N/A	N/A	N/A		X	N/A		X	N/A
WEST STREET REIP TAX EXEMPT L.P. - 85-4341932, 30 HUDSON STREET, UNIT 7535 TAX DEPT, JERSEY CITY, NJ 07302-4600	RELATED PARTY INVESTMENT	NJ	N/A	N/A	N/A	N/A		X	N/A		X	N/A
WEST STREET CAPITAL PARTNERS VIII PARALLEL, L.P. - 85-3597658, 30 HUDSON STREET, 38TH FLOOR, JERSEY CITY, NJ	RELATED PARTY INVESTMENT	NJ	N/A	N/A	N/A	N/A		X	N/A		X	N/A
BLUE OWL REAL ESTATE MARITIME OPPORTUNITY FUND LP - 87-4000377, 30 N LASALLE STREET, SUITE 4140, CHICAGO,	RELATED PARTY INVESTMENT	IL	N/A	N/A	N/A	N/A		X	N/A		X	N/A

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
ARNOLD VENTURES INC. - 37-1906348 1717 WEST LOOP SOUTH, SUITE 1800 HOUSTON, TX 77027-3048	PHILANTHROPIC MANAGEMENT	TX	N/A	C CORP	N/A	N/A	N/A	X	
GS HORIZON ENVIRONMENTAL & CLIMATE SOLUTIONS LP - 98-1605295, P.O. BOX 309, UGLAND HOUSE, GRAND CAYMAN, GRAND CAYMAN, CAYMAN ISLANDS	RELATED PARTY INVESTMENT	CAYMAN ISLANDS	N/A	C CORP	N/A	N/A	N/A	X	

Part III Continuation of Identification of Related Organizations Taxable as a Partnership

(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) Disproportion- ate 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	
EOC PARTNERS FUND - C LP - 88-1166885, 1717 WEST LOOP SOUTH, SUITE 1800, HOUSTON, TX 77027	RELATED PARTY INVESTMENT	TX	N/A	N/A	N/A	N/A		X	N/A		X	N/A
BTOF (JUNO FEEDER) (CYM) L.P. - 98-1617767, 190 ELGIN AVE , GEORGE TOWN, GRAND CAYMAN, CAYMAN ISLANDS KY1-9005	RELATED PARTY INVESTMENT	CAYMAN ISLANDS	N/A	N/A	N/A	N/A		X	N/A		X	N/A
CIVICAP PARTNERS DEVELOP-TO-CORE FUND III LP - 99-2138173, 3334 RICHMOND AVE STE 100, HOUSTON, TX 77098	RELATED PARTY INVESTMENT	TX	N/A	N/A	N/A	N/A		X	N/A		X	N/A
CCP TWELVE100 PRESERVATION GP, LLC - 99-4963952, 3334 RICHMOND AVE STE 100, HOUSTON, TX 77098	RELATED PARTY INVESTMENT	TX	N/A	N/A	N/A	N/A		X	N/A		X	N/A
CCP TWELVE100 PRESERVATION, LLC - 99-4945840, 3334 RICHMOND AVE STE 100, HOUSTON, TX 77098	RELATED PARTY INVESTMENT	TX	N/A	N/A	N/A	N/A		X	N/A		X	N/A
HADAR LLC - 38-3888224 1717 WEST LOOP SOUTH, SUITE 18 HOUSTON, TX 77027	RELATED PARTY INVESTMENT	TX	N/A	N/A	N/A	N/A		X	N/A		X	N/A
WEST STREET REAL ESTATE INVESTMENT PARTNERS TAX EXEMPT AIV UNIT TRUST - 98-6, 30 HUDSON STREET, UNIT 7535	RELATED PARTY INVESTMENT	NJ	N/A	N/A	N/A	N/A		X	N/A		X	N/A
TMG MENCHACA, LLC - 33-3930881, 838 WALKER ROAD, SUITE 21-2, DOVER, DE 19904	RELATED PARTY INVESTMENT	TX	N/A	N/A	N/A	N/A		X	N/A		X	N/A
TMG CANDELAS, LLC - 33-3392198, 838 WALKER ROAD, SUITE 21-2, DOVER, DE 19904	RELATED PARTY INVESTMENT	GA	N/A	N/A	N/A	N/A		X	N/A		X	N/A

Part III Continuation of Identification of Related Organizations Taxable as a Partnership

(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) Disproportion- ate 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	
TMG LILBURN, LLC - 33-3482573 838 WALKER ROAD, SUITE 21-2 DOVER, DE 19904	RELATED PARTY INVESTMENT	GA	N/A	N/A	N/A	N/A		X	N/A		X	N/A
VIRIDIAN III VENTURE, LLC - 33-1958418, 838 WALKER ROAD, SUITE 21-2, DOVER, DE 19904	RELATED PARTY INVESTMENT	TX	N/A	N/A	N/A	N/A		X	N/A		X	N/A
AUTRY PARK BB1 OWNER LLC - 33-4109967, 108 LAKELAND AVENUE, DOVER, DE 19901	RELATED PARTY INVESTMENT	DE	N/A	N/A	N/A	N/A		X	N/A		X	N/A
CIVICAP PARTNERS LA CO LP - 39-2440762, 251 LITTLE FALLS DRIVE, WILMINGTON, DE 19808	RELATED PARTY INVESTMENT	TX	N/A	N/A	N/A	N/A		X	N/A		X	N/A

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.

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

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)	X	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

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)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part VII Supplemental Information

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

PART III, IDENTIFICATION OF RELATED ORGANIZATIONS TAXABLE AS PARTNERSHIP:

NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

WEST STREET CAPITAL PARTNERS VIII PARALLEL, L.P.

EIN: 85-3597658

30 HUDSON STREET, 38TH FLOOR

JERSEY CITY, NJ 07302-4600

NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

BLUE OWL REAL ESTATE MARITIME OPPORTUNITY FUND LP

EIN: 87-4000377

30 N LASALLE STREET, SUITE 4140

CHICAGO, IL 60602

NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

WEST STREET REAL ESTATE INVESTMENT PARTNERS TAX EXEMPT AIV

UNIT TRUST

EIN: 98-6128804

30 HUDSON STREET, UNIT 7535 TAX DEPT

JERSEY CITY, NJ 07302-4600

PART IV, IDENTIFICATION OF RELATED ORGANIZATIONS TAXABLE AS CORP OR TRUST:

NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

GS HORIZON ENVIRONMENTAL & CLIMATE SOLUTIONS LP

EIN: 98-1605295

P.O. BOX 309, UGLAND HOUSE

GRAND CAYMAN, GRAND CAYMAN, CAYMAN ISLANDS KY1-1104