

# \*\* PUBLIC DISCLOSURE COPY \*\*

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

▶ 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.

Inspection

Department of the Treasury Internal Revenue Service

A F	For the	2021 calendar year, or tax year beginning	and	ending	_					
B	Check if applicable	C Name of organization			D Employe	r identific	cation number			
	Addre	HOPEWELL FUND								
	Name chang	- · · ·			47-3	681860				
	Initial return		er and street (or P.O. box if mail is not delivered to street address)  Room/suite							
	Final return	1828 L STREET, NW	(202)	664-87	63					
	termin ated	City or town, state or province, country, and 2	ZIP or foreign postal code		<b>G</b> Gross receip	168,691,480.				
	Ameno		•		H(a) Is this a	a group re	eturn			
	Applic	F Name and address of principal officer: LEE B	ODNER		1	ordinates				
	pendir	SAME AS C ABOVE					cluded? Yes No			
1	Гах-ех	empt status: X 501(c)(3) 501(c) ( )		or 527	If "No,"	attach a	list. See instructions			
J١	Websit	e: > WWW.HOPEWELLFUND.ORG			H(c) Group	exemptio	n number			
		organization: X Corporation Trust Ass	sociation Other ►	<b>L</b> Year	of formation: 2	015 N	State of legal domicile: DC			
Pa	art I	Summary								
a)	1	Briefly describe the organization's mission or most	significant activities: THE HO	PEWELL FU	ND HELPS S	SOCIAL				
Governance		ENTREPRENEURS AND OTHER CHANGEMAKERS L	AUNCH NEW, (CONT. SCHE	DULE O)						
rna	2	Check this box 🕨 🔲 if the organization discon	tinued its operations or dispos	sed of more	than 25% of i	ts net ass	ets.			
ove	3	Number of voting members of the governing body (	Part VI, line 1a)			3	4			
Ğ	4	Number of independent voting members of the government	erning body (Part VI, line 1b)			4	4			
es &	5	Total number of individuals employed in calendar ye	ear 2021 (Part V, line 2a)			5	135			
Ϋ́È	6	Total number of volunteers (estimate if necessary)				6	55			
Activities &	7 a	Total unrelated business revenue from Part VIII, colu	umn (C), line 12			7а	0.			
_	b	Net unrelated business taxable income from Form 9	990-T, Part I, line 11	<u></u>		7b	0.			
					Prior Yea		Current Year			
Revenue	8	Contributions and grants (Part VIII, line 1h)				91,200.	122,592,892.			
	1					27,152.	256,996.			
3eV	1	Investment income (Part VIII, column (A), lines 3, 4,			59,267.	125,202.				
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c,	9c, 10c, and 11e)			3,713.	410,849.			
		Total revenue - add lines 8 through 11 (must equal F				71,332.	123,385,939.			
	1	Grants and similar amounts paid (Part IX, column (A			80,11	13,710.	65,385,986.			
	1	Benefits paid to or for members (Part IX, column (A)				0.	0.			
es	15	Salaries, other compensation, employee benefits (P			11,47	79,747.	14,204,396.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), lir				0.	9,000.			
ž	b	Total fundraising expenses (Part IX, column (D), line	•		26.04	10. 700	40, 452, 020			
ш	''	Other expenses (Part IX, column (A), lines 11a-11d,				12,780.	42,453,932.			
		Total expenses. Add lines 13-17 (must equal Part IX				36,237.	122,053,314.			
/	19	Revenue less expenses. Subtract line 18 from line 1	2			35,095.	1,332,625.			
Net Assets or		T (D			ginning of Curr		End of Year			
SSE	20					94,021. 15,556.	159,581,623. 29,232,792.			
let /	21	Total liabilities (Part X, line 26)  Net assets or fund balances. Subtract line 21 from I	ina 00		•	18,465.	130,348,831.			
P	art II	Signature Block	IIIe 20		125,5	10,103.	130,310,031.			
		Ities of perjury, I declare that I have examined this return, i	ncluding accompanying schedule	s and stateme	ents, and to the	hest of my	knowledge and belief, it is			
		t, and complete. Declaration of preparer (other than officer				_	momonge and zoner, it is			
	,		,				_			
Sig	n	Signature of officer			Date	!				
Her		LEE BODNER, BOARD CHAIR								
		Type or print name and title								
		Print/Type preparer's name	Preparer's signature		Date	Check	PTIN			
Paid	i	ž	MICHAEL LUMSDEN	1:	1/05/22	if self-employe	P01262236			
Prep	parer	Firm's name MOSS ADAMS LLP			Firm	's EIN ▶	91-0189318			
Jse	Only	Firm's address 101 SECOND STREET SUITE	900							
		SAN FRANCISCO, CA 94105			Pho	ne no.415	-956-1500			
May	the IF	RS discuss this return with the preparer shown abov	e? See instructions				X Yes No			

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Pai	rt 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 HOPEWELL FUND IS A 501(C)(3) NONPROFIT THAT USES FISCAL	
	SPONSORSHIP AND CHARITABLE GRANT-MAKING TO SUPPORT DOMESTIC AND	
	INTERNATIONAL INITIATIVES AIMED AT ADVANCING PUBLIC GOOD AND ACHIEVING	
	EQUITY FOR ALL PEOPLE.	
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.	163110
3	•	Yes X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	res no
4	If "Yes," describe these changes on Schedule O.	, avnanaa
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total e	expenses, and
	revenue, if any, for each program service reported.	27,000.)
4a	(Code:) (Expenses \$88,928,520. including grants of \$53,976,188. ) (Revenue \$\$  CIVIL RIGHTS, SOCIAL ACTION, AND ADVOCACY: HOPEWELL'S PORTFOLIO OF	27,000.
	CIVIL RIGHTS, SOCIAL ACTION, AND ADVOCACY FOCUS AREAS INCLUDE	
	ADDRESSING INCOME INEQUALITY, IMPROVING CIVIC ENGAGEMENT AMONG TRADITIONALLY UNDERREPRESENTED GROUPS. AND ADVANCING STATE LEVEL	
	ECONOMIC AND DEMOCRACY REFORMS.	
4b	(Code:) (Expenses \$16,085,057. including grants of \$6,537,112. ) (Revenue \$	17,552.
	HEALTH: HOPEWELL'S PORTFOLIO OF HEALTH FOCUS AREAS INCLUDES WOMEN'S	
	HEALTH, HEALTHCARE ACCESS, AND REDUCING HEALTH DISPARITIES AND	
	AVOIDABLE INFANT MORTALITY.	
4c	(Code:) (Expenses \$9,933,364. including grants of \$4,872,686. ) (Revenue \$	212,444.)
	OTHER PROGRAM SERVICES INCLUDING TECHNOLOGY AND INNOVATION,	
	INTERNATIONAL DEVELOPMENT AND FOREIGN AFFAIRS, AND YOUTH DEVELOPMENT	
	AND EDUCATION.	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$	)
4e	Total program service expenses   114,946,941.	/
		Form <b>990</b> (2021)

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# Form 990 (2021) HOPEWELL FUND Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
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		х
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	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	i i		
Ŭ	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	ا ا		
U		_	х	
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	21	<del>                                     </del>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		<sub>v</sub>
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			l
	Schedule D, Part III	8		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?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
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		x
ч	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	<del>                                     </del>		
u		11d		x
_	Part X, line 16? If "Yes," complete Schedule D, Part IX			X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	-
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	<u> </u>
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	Х	
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	Х	
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		Х
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		х
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		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."			
	,	19		x
20a	complete Schedule G, Part III	20a		X
	• •	20a 20b		<del></del>
b O4	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	ZUD		$\vdash$
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	ا ۾ ا	v	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	Х	

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Part IV	Checklist of Required Schedules	(continued)
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	· (continued)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		162	INU
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
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		Х
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		Х
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		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			v
	"Yes," complete Schedule L, Part IV	28c	х	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Λ	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			x
0.4	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	32		x
22	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33		33		x
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		<del></del>
<b>5-7</b>	Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	304		
~	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai				
	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			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	i

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			Yes	No			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,						
	filed for the calendar year ending with or within the year covered by this return						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х				
	<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.						
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		х			
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b					
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a						
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х			
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		х			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х			
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c					
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit						
	any contributions that were not tax deductible as charitable contributions?	6a		Х			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts						
	were not tax deductible?	6b					
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х				
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required						
	to file Form 8282?	7c		Х			
d	If "Yes," indicate the number of Forms 8282 filed during the year						
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g					
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?						
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		Х			
9	Sponsoring organizations maintaining donor advised funds.						
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		X			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		Х			
10	Section 501(c)(7) organizations. Enter:						
a	Initiation fees and capital contributions included on Part VIII, line 12						
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities						
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders   11a						
a							
b	Gross income from other sources. (Do not net amounts due or paid to other sources against						
40-	amounts due or received from them.)	40-					
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.						
	Is the organization licensed to issue qualified health plans in more than one state?	13a					
u	Note: See the instructions for additional information the organization must report on Schedule O.	ioa					
h	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						
С	Enter the amount of reserves on hand						
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х			
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or						
	excess parachute payment(s) during the year?	15		Х			
	If "Yes," see the instructions and file Form 4720, Schedule N.						
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х			
	If "Yes," complete Form 4720, Schedule O.						
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any						
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17					
	If "Yes," complete Form 6069.						

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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
Sec	tion 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	1a		4		
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	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		х
3	Did the organization delegate control over management duties customarily performed by or under the					
			•	3	Х	
4	Did the organization make any significant changes to its governing documents since the prior Form 99					Х
5	Did the organization become aware during the year of a significant diversion of the organization's asset					Х
6	Did the organization have members or stockholders?					Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or app					
	more members of the governing body?			7a		x
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, sto			1.0		
~	persons other than the governing body?		*	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year					
а	The governing body?	,	•	8a	х	
b	Each committee with authority to act on behalf of the governing body?				Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reac			0.0		
•	organization's mailing address? <i>If</i> "Yes," <i>provide the names and addresses on Schedule O</i>			9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev	(ODUO	Codo )	.   0		<u> </u>
	(This Section B requests information about policies not required by the internal new	<u>/enue</u>	Coue.j		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a	1.00	Х
	If "Yes," did the organization have written policies and procedures governing the activities of such cha					
_		•	.,	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body			11a		
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		g	- 10		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise					
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yo					
	on Schedule O how this was done	,		120	Х	
13	Did the organization have a written whistleblower policy?				Х	
14	Did the organization have a written document retention and destruction policy?				Х	
15	Did the process for determining compensation of the following persons include a review and approval					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	-				
а	The organization's CEO, Executive Director, or top management official			15a		х
	Other officers or key employees of the organization					х
	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 arrangem	nent w	vith a			
	taxable entity during the year?			16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organi	izatior	า'ร			
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶AL, AR, CA, CT, FL, GA, H	I,IL	,KS,KY,MA,MD			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and			3)s only	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.					
	X   Own website     X   Upon request     Other (explain)	on S	chedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, cor	nflict (	of interest policy, a	nd finar	ncial	
	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 boo	ks an	d records 🕨			
	ARABELLA ADVISORS, LLC - (202) 595-1020					
	1828 L STREET NW, SUITE 300, WASHINGTON, DC 20036					

Form 990 (2021) HOPEWELL FUND 47-3681860 Page **7** 

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

<b>(A)</b> Name and title	(B) Average hours per week	(do not check mor box, unless persor officer and a direct				than o	n an	( <b>D)</b> Reportable compensation from	<b>(E)</b> Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) COURTNEY CUFF	36.00									
PROJECT DIRECTOR						Х		269,269.	0.	33,642
(2) PETER RUBIN	40.00	-							_	
PROJECT DIRECTOR	40.00					Х		226,224.	0.	21,812
(3) BONNIE JONES	40.00	-						020 020	•	15 65
PROJECT DIRECTOR (4) MEAGAN CAVANAUGH	40.00					Х		230,230.	0.	15,673
PROJECT DIRECTOR	40.00	1				x		220,573.	0.	15 703
(5) JANET CREPPS HILLER	40.00					^		220,373.	0.	15,793
PROJECT DIRECTOR	40.00	1				x		215,124.	0.	13,131
(6) ANDREW SCHULZ	1.00								-	
GENERAL COUNSEL		1		x				3,760.	0.	(
(7) LEE BODNER	1.00							,		
BOARD CHAIR AND PRESIDENT		Х		х				0.	0.	C
(8) MICHAEL SLABY	1.00									
SECRETARY & TREASURER		х		х				0.	0.	(
(9) LORI CHATMAN	1.00									
DIRECTOR		Х						0.	0.	(
(10) CHERYL CONTEE	1.00									
DIRECTOR		Х						0.	0.	(
		-								
		1								
		1								
		1								
				l						

	1990 (2021) HOPEWELL FUN	D								47-36818	360	P:	age <b>8</b>
Par	t VII Section A. Officers, Directors, Trus	stees, Key Emp	loy	ees,	and	d Hig	ghes	t C	ompensated Employee	s (continued)			
	(A)	(B)				C)			(D)	(E)		(F)	
	Name and title	Average	(do		Pos		<b>)</b> than (	nne	Reportable	Reportable	E	stimate	ed
		hours per	box	, unle	ss pe	rson i	s both	n an	compensation	compensation	a	mount	of
		week		cer an	ia a a	irecto	r/trus	tee)	from	from related		other	
		(list any hours for	recto						the	organizations		npensa	
		related	or di	ee ee			ated		organization	(W-2/1099-MISC/	- 1	from the	
		organizations	ustee	trust		96	ubeus		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)		ganizati nd relati	
		below	dual t	rtiona	_	nploy	st cor	-	· '			ganizatio	
		line)	Individual trustee or director	In stit utio nal tru stee	Officer	ey employee	Highest compensated employee	Former				,	55
			_	_		×	1	_			$\top$		
											4—		
											+		
											+-		
											+-		
		+									+-		
											+		
1b	Subtotal	•						<b></b>	1,165,180.	0	$\cdot$	100,	051.
	Total from continuation sheets to Part V								0.	0	$\overline{\cdot}$		0.
	Total (add lines 1b and 1c)							<b></b>	1,165,180.	0		100,	051.
2	Total number of individuals (including but r							o re	eceived more than \$100,	000 of reportable			
	compensation from the organization												47
												Yes	No
3	Did the organization list any former officer			•		•		_		•			
	line 1a? If "Yes," complete Schedule J for s										3		Х
4	For any individual listed on line 1a, is the s												
	and related organizations greater than \$15										4	X	
5	Did any person listed on line 1a receive or	accrue compen	sati	on fr	om	any	unre	elate	ed organization or individ	lual for services			

rendered to the organization? If "Yes." complete Schedule J for such person

#### **Section B. Independent Contractors**

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)	(B)	(C)
Name and business address	Description of services	Compensation
PERKINS COIE LLP		
P.O. BOX 24643, SEATTLE, WA 98124	LEGAL SERVICES	8,319,596.
ARABELLA ADVISORS, 1828 L STREET NW, SUITE	ADMIN., OPERATIONS &	
300, WASHINGTON, DC 20036	MANAGEMENT SERVICES	7,096,705.
THE MOVEMENT COOPERATIVE, 200 SCHERMERHORN		
ST, SUITE 326, BROOKLYN, NY 11201	CONSULTING SERVICES	3,818,521.
ELIAS LAW GROUP LLP, 10 G STREET NE SUITE		
600, WASHINGTON, DC 20002	LEGAL SERVICES	2,365,422.
CHARLES RIVER LABORATORIES INC	RESEARCH AND EVALUATION	
P.O. BOX 27812, NEW YORK, NY 10087	SERVICES	1,077,090.
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	
	·	- 000 (see t)

47-3681860 Page **9** 

#### Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) Revenuè excluded Total revenue Related or exempt Unrelated from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1a 1 a Federated campaigns 1b **b** Membership dues 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 ... 122,592,892 1f 17,177,954 g Noncash contributions included in lines 1a-1f 122,592,892 h Total. Add lines 1a-1f **Business Code** 2 a DUES REVENUE 900099 149,363, 149,363 Program Service Revenue 541900 54,000 CONSULTING REVENUE 54,000 b SPONSORSHIPS REVENUE 900099 33,284. 33,284. PRI INTEREST INCOME 900099 17,552. 17,552. REGISTRATION REVENUE 900099 2,797. 2,797. All other program service revenue 256,996, g Total. Add lines 2a-2f 3 Investment income (including dividends, interest, and 138,029 138,029 other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties ..... (i) Real (ii) Personal 6 a Gross rents 6b **b** Less: rental expenses c Rental income or (loss) 6c d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of 45,292,714. assets other than inventory b Less: cost or other basis 45,281,926. 23,615 Other Revenue and sales expenses 23,615 10,788. c Gain or (loss) -12.827. -12,827. d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9a 9b **b** Less: direct expenses c Net income or (loss) from gaming activities $\triangleright$ 10 a Gross sales of inventory, less returns and allowances 10a **b** Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** 11 a GENERAL ADMIN RETAINER 541900 409,804, 409,804 b MISCELLANEOUS REVENUE 900099 1,045 1,045. d All other revenue 410,849 Total. Add lines 11a-11d 123,385,939 223,712. 569,335. 12 Total revenue. See instructions

132009 12-09-21

#### 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) Х Check if Schedule O contains a response or note to any line in this Part IX (D) Do not include amounts reported on lines 6b. Program service expenses Total expenses Management and general expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 62,125,359 62,125,359 and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 ....... 3,260,627. 3,260,627. Benefits paid to or for members ..... Compensation of current officers, directors, trustees, and key employees ..... 3,760. 3,760 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 11,535,243. Other salaries and wages 11,256,712. 41,765. 236,766. 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 443,114 429,036. 5,054 9,024. 1,366,934 1,319,544 19,636 27,754. 9 Other employee benefits 855,345. 829,722. 8,171 17,452. 10 Payroll taxes Fees for services (nonemployees): 6,394,596. 6,394,596 Management а 13,594,171. 13,569,183. 24,988 Legal 31,900. 31,900. Accounting 418,559 418,559. Lobbying 9,000. 9,000. Professional fundraising services. See Part IV, line 17 33,563. Investment management fees ..... 33,563. Other. (If line 11g amount exceeds 10% of line 25, 14,342,586 14,235,996. 73,420 33,170. column (A), amount, list line 11g expenses on Sch O.) 2,414,097 2,414,097 Advertising and promotion 12 254,798. 251,257. 3,541 13 Office expenses 4,399,196. 4,357,551 41,645 Information technology 14 Royalties 15 99,543 99,543. 16 Occupancy 106,648. 106,648. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 218,154. 218,154. Conferences, conventions, and meetings ..... 19 20 Payments to affiliates 21 35,147 35,147. 22 Depreciation, depletion, and amortization ..... 102,079 17,612. 84,467. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 8,895. 6,701 MISCELLANEOUS EXPENSES 2,194. b С d All other expenses 114,946,941 122,053,314, 6,773,207 333,166. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

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Form 990 (2021)
Part X Balance Sheet

Par	τx	Balance Sneet					
		Check if Schedule O contains a response or n	ote to an	y line in this Part X		·····	
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			632,247.	1	716,243
	2	Savings and temporary cash investments			98,909,799.	2	118,337,438
	3	Pledges and grants receivable, net			23,646,336.	3	17,511,443
	4	Accounts receivable, net			179,818.	4	247,428
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub					
		controlled entity or family member of any of th	17,226.	5	(		
	6	Loans and other receivables from other disqua					
		under section 4958(f)(1)), and persons describ	ed in sec	tion 4958(c)(3)(B)		6	
s	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
YS	9	B			87,404.	9	112,292
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	189,647.			
	b	Less: accumulated depreciation		70,479.	129,280.	10c	119,168
	11	Investments - publicly traded securities			33,398,899.	11	19,798,203
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, lin			3,088,568.	13	2,715,094
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		4,444.	15	24,31	
	16	Total assets. Add lines 1 through 15 (must ed			160,094,021.	16	159,581,623
	17	Accounts payable and accrued expenses			2,327,420.	17	8,203,46
	18	Grants payable		25,781,336.	18	21,029,325	
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complet				21	
ű	22	Loans and other payables to any current or fo	rmer offic	er, director,			
Liabilities		trustee, key employee, creator or founder, sub	stantial c	ontributor, or 35%			
apı		controlled entity or family member of any of th	ese perso	ons	2,436,800.	22	
ן כּ	23	Secured mortgages and notes payable to unre	elated thir	d parties		23	
	24	Unsecured notes and loans payable to unrelate	ed third p	oarties		24	
	25	Other liabilities (including federal income tax, )	oayables <sup>•</sup>	to related third			
		parties, and other liabilities not included on lin	es 17-24)	. Complete Part X			
		of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			30,545,556.	26	29,232,792
		Organizations that follow FASB ASC 958, cl	heck her	e ▶ X			
Ses		and complete lines 27, 28, 32, and 33.					
au	27	Net assets without donor restrictions			44,344,604.	27	31,614,358
Ва	28	Net assets with donor restrictions			85,203,861.	28	98,734,473
<u>n</u>		Organizations that do not follow FASB ASC	958, che	eck here 🕨 🗌			
Ĭ.		and complete lines 29 through 33.					
ο S	29	Capital stock or trust principal, or current fund	ls			29	
set	30	Paid-in or capital surplus, or land, building, or	equipmer	nt fund		30	
As	31	Retained earnings, endowment, accumulated	income,	or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances			129,548,465.	32	130,348,831
	33	Total liabilities and net assets/fund balances			160,094,021.	33	159,581,623

Form 990 (2021) HOPEWELL FUND 47-3681860 Page **12** 

Pai	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI				X			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		385,	939.			
2	Total expenses (must equal Part IX, column (A), line 25)							
3	Revenue less expenses. Subtract line 2 from line 1	3	1,	332,	625.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	129	465.				
5	Net unrealized gains (losses) on investments	5		-37,	047.			
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	-	495,	212.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
_	column (B))	10	130	348,	831.			
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII				Щ			
				Yes	No			
1	Accounting method used to prepare the Form 990:							
	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		Х			
	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	Х	<u> </u>			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,						
	consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,						
	review, or compilation of its financial statements and selection of an independent accountant?		2c		Х			
	If the organization changed either its oversight process or selection process during the tax year, explain on School	edule O.						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	-						
	Act and OMB Circular A-133?		За		Х			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit						
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		<u> </u>			
			Form	990	(2021)			

132012 12-09-21

#### **SCHEDULE A**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization **Employer identification number** HOPEWELL FUND 47-3681860 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions)) Total

# Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support	, , , , , , , , , , , , , , , , , , , ,		,			
	ndar year (or fiscal year beginning in)	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Gifts, grants, contributions, and	(=) ==	(-,	(=) == : =	(-,	(5) = 5 = 5	(-)
	membership fees received. (Do not						
	include any "unusual grants.")	130,409,341.	64,615,634.	102,295,757.	150,391,200.	122,592,892.	570,304,824.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	130,409,341.	64,615,634.	102,295,757.	150,391,200.	122,592,892.	570,304,824.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						156,466,039.
	Public support. Subtract line 5 from line 4.						413,838,785.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4	130,409,341.	64,615,634.	102,295,757.	150,391,200.	122,592,892.	570,304,824.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	24,883.	1,348,857.	1,719,773.	719,852.	138,029.	3,951,394.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	24,647.	173,875.	255,943.	493,713.	410,849.	1,359,027.
	<b>Total support.</b> Add lines 7 through 10						575,615,245.
	Gross receipts from related activities,	•	,			12	1,429,813.
13	First 5 years. If the Form 990 is for the	· ·	st, second, third, f	fourth, or fifth tax y	ear as a section 5	01(c)(3)	
800	organization, check this box and stor						<b>&gt;</b>
	etion C. Computation of Publi			- 1 (6)		44	71.90 %
	Public support percentage for 2021 (I					14	
	Public support percentage from 2020					15	,,,
10a	33 1/3% support test - 2021. If the content have The experience qualifies						▶ ▼
<b>L</b>	stop here. The organization qualifies		-		line 15 in 22 1/20/		
b	33 1/3% support test - 2020. If the condition have						
170	and <b>stop here.</b> The organization qual <b>10%</b> -facts-and-circumstances test						
11 a		ū					•
	and if the organization meets the facts			-	•	-	$\sim$
<b>L</b>	meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization  b 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or						
b							1070 UI
	more, and if the organization meets the organization meets the facts-and-circu				-		▶□
12	<b>Private foundation.</b> If the organization		-		• • •		
10	Tivate Iounidation. If the Organizatio	in alla flot crieck a l	JOA 011 III IE 13, 10a	a, 100, 11a, 01 110	י, טווכטת נוווס טטא מו	14 300 1131140110118	·

Schedule A (Form 990) 2021

# Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support			T		T	
Calendar year (or fiscal year beginning in) ► 📙	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and						1
membership fees received. (Do not						
include any "unusual grants.")				1		ļ
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus- iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support						
alendar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6	(4) 2017	(6) 2010	(6) 2013	(4) 2020	(6) 2021	(i) rotai
Itoa Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
I1 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
2 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the	organization's fi	irst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) organization	on,
check this box and stop here	•				.,.,	· · · -
Section C. Computation of Public	Support Per	rcentage				
5 Public support percentage for 2021 (line			column (f))		15	
6 Public support percentage from 2020 S	, (,,	, ,			16	
ection D. Computation of Invest						
7 Investment income percentage for 202			ne 13. column (f))		17	
8 Investment income percentage from 20			(1)		18	
9a 33 1/3% support tests - 2021. If the o						 7 is not
more than 33 1/3%, check this box and						55€
<b>b 33 1/3% support tests - 2020.</b> If the o	rganization did r	not check a box on	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	. –
line 18 is not more than 33 1/3%, check		-	•		-	
20 Private foundation. If the organization	did not check a	box on line 14 19:	a or 19b. check th	his box and see in:	structions	

132023 01-04-22

Schedule A (Form 990) 2021

# Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

1	Are all of the organization's supported organizations listed by name in the organization's governing
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by
	class or purpose, describe the designation. If historic and continuing relationship, explain.

- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?

  If "Yes." complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
_		
За		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
Ju		
9b		
9c		
10a		
iva		
10b		

HOPEWELL FUND 47-3681860 Schedule A (Form 990) 2021 Page 5 Part IV Supporting Organizations (continued) Yes No 11 Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? 11a **b** A family member of a person described on line 11a above? 11b c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide <u>detail in Par</u>t VI 11c Section B. Type I Supporting Organizations Yes No Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No." describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the 1 supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, upervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No." describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s) Section D. All Type III Supporting Organizations No Yes Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how 2 the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's 3 <u>supported organizations played in this regard.</u> Section E. Type III Functionally Integrated Supporting Organizations 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete line 2 below. а b The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions) С Yes No 2 Activities Test. Answer lines 2a and 2b below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined

that these activities constituted substantially all of its activities.

b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.

3 Parent of Supported Organizations. Answer lines 3a and 3b below.

- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in **Part VI** the role played by the organization in this regard.

Schedule A (Form 990) 2021

2a

2b

За

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Pai	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations						
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( explain in Part VI). See instructions.						
	All other Type III non-functionally integrated supporting organizations must complete Sections A through E.						
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)			
1	Net short-term capital gain	1					
2	Recoveries of prior-year distributions	2					
_3_	Other gross income (see instructions)	3					
_4	Add lines 1 through 3.	4					
_5	Depreciation and depletion	5					
6	Portion of operating expenses paid or incurred for production or						
	collection of gross income or for management, conservation, or						
	maintenance of property held for production of income (see instructions)	6					
_7	Other expenses (see instructions)	7					
_8_	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8					
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1	Aggregate fair market value of all non-exempt-use assets (see						
	instructions for short tax year or assets held for part of year):						
а	Average monthly value of securities	1a					
b	Average monthly cash balances	1b					
С	Fair market value of other non-exempt-use assets	1c					
d	Total (add lines 1a, 1b, and 1c)	1d					
е	Discount claimed for blockage or other factors						
	(explain in detail in Part VI):						
2	Acquisition indebtedness applicable to non-exempt-use assets	2					
_3	Subtract line 2 from line 1d.	3					
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,						
	see instructions).	4					
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
_6	Multiply line 5 by 0.035.	6					
_7_	Recoveries of prior-year distributions	7					
8	Minimum Asset Amount (add line 7 to line 6)	8					
Sect	ion C - Distributable Amount			Current Year			
1	Adjusted net income for prior year (from Section A, line 8, column A)	1					
2	Enter 0.85 of line 1.	2					
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3					
4	Enter greater of line 2 or line 3.	4					
5	Income tax imposed in prior year	5					
6	Distributable Amount. Subtract line 5 from line 4, unless subject to						
	emergency temporary reduction (see instructions).	6					
7	Check here if the current year is the organization's first as a non-functiona	lly integrate	ed Type III supporting orga	nization (see			
	instructions).						

Schedule A (Form 990) 2021

Par	rt V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continued)	
Secti	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes	1	
2	Amounts paid to perform activity that directly furthers exem			
	organizations, in excess of income from activity	2		
3	Administrative expenses paid to accomplish exempt purpos	es of supported organizations	3	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required - prior IRS approval - prior IRS approval required - prior IRS approval - prior IRS	rovide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	
8	Distributions to attentive supported organizations to which t	he organization is responsive		
	(provide details in Part VI). See instructions.		8	
9	Distributable amount for 2021 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		10	
	•	(i)	(ii)	(iii)
Secti	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2021	Distributable Amount for 2021
_1_	Distributable amount for 2021 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2021 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2021			
a	From 2016			
b	From 2017			
с	From 2018			
d	From 2019			
е	From 2020			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2021 distributable amount			
i_	Carryover from 2016 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2021 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2021 distributable amount			
с	Remainder. Subtract lines 4a and 4b from line 4.			
	Remaining underdistributions for years prior to 2021, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2021. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2022. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2017			
	Excess from 2018			
	Excess from 2019			
	Excess from 2020			
	Excess from 2021			

Schedule A (Form 990) 2021

Schedule A (Form 990) 2021

2021.05000 HOPEWELL FUND

# Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

# **Schedule of Contributors**

► Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

Employer identification number

2021

Schedule B (Form 990) (2021)

HOPEWELL FUND 47-3681860							
Organization type (check one):							
Filers of:	Section:						
Form 990 or 990-EZ	X 501(c)( <sup>3</sup> ) (enter number) organization						
	4947(a)(1) nonexempt charitable trust <b>not</b> 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						
• •	s covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e. See instructions.					
General Rule							
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's						
Special Rules							
sections 509(a)(1) a contributor, during	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support that 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Figure 1. Complete Parts I and II.	d that received from any one					
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 <b>General Rule</b> 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 nswer "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 nat it doesn't meet the filing requirements of Schedule B (Form 990).							

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

Name of organization	Employer identification number
HOPEWELL FUND	47-3681860

Part I	Contributors (see instructions). Use duplicate copies of Part I if ad	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Name, address, and Zir + +	\$\$ 28,065,025.	Person X Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$	Person X Payroll
(a)	(b)	(c)	(d)
No. <u>4</u>	Name, address, and ZIP + 4	### Total contributions    5,567,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$\$	Person X Payroll

Name of organization

Employer identification number

HOPEWELL FUND

47-3681860

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$ \$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$\$	Person X Payroll
(a)	(b)	(c)	(d)
10	Name, address, and ZIP + 4	### Total contributions    \$ 2,475,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	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

HOPEWELL FUND

47-3681860

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.					
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
	\$				
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
	\$				
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
	\$				
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
	\$				
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
	\$				
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
	(b) Description of noncash property given  (b) Description of noncash property given	(b) Description of noncash property given  (c) FMV (or estimate) (See instructions.)  (d) FMV (or estimate) (See instructions.)  (e) FMV (or estimate) (See instructions.)  (f) FMV (or estimate) (See instructions.)  (g) FMV (or estimate) (See instructions.)  (h) Description of noncash property given  (g) FMV (or estimate) (See instructions.)  (g) FMV (or estimate) (See instructions.)  (h) Description of noncash property given  (g) FMV (or estimate) (See instructions.)  (h) Description of noncash property given  (g) FMV (or estimate) (See instructions.)  (h) Description of noncash property given  (h) Description of noncash property given			

Name of or	ganization				Employer identification number		
HOPEWELL	FUND				47-3681860		
Part III	Exclusively religious, charitable, etc., contributi from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	) through (e) and the following line charitable, etc., contributions of \$1,00	ne entry. For or	rganizations			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
		(e) Transfer o	f gift				
	Transferee's name, address, a	nd ZIP + 4	Re	elationship of trar	sferor to transferee		
(a) No. from Part I	(b) Purpose of gift	) Purpose of gift (c) Use of gift		(d) Desc	ription of how gift is held		
	(e) Transfer of gift						
	Transferee's name, address, a		Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Desc	ription of how gift is held		
	(e) Transfer of gift						
	Transferee's name, address, a	nd ZIP + 4	Re	elationship of trar	sferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Desc	ription of how gift is held		
	(e) Transfer of gift						
	Transferee's name, address, a	nd ZIP + 4	Re	Relationship of transferor to transferee			

### **SCHEDULE C** (Form 990)

# **Political Campaign and Lobbying Activities**

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

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 org	ganization			Empl	oyer identification number
	HOPEWELL FU				47-3681860
Part I-A	Complete if the org	anization is exempt und	ler section 501(c)	or is a section 527 or	ganization.
2 Politica		ation's direct and indirect politic ures gn activities			
Part I-B	Complete if the org	anization is exempt und	ler section 501(c)(	3).	
1 Enter t	he amount of any excise tax	incurred by the organization un	der section 4955	<b>▶</b> \$	
2 Enter t	he amount of any excise tax	incurred by organization manag			
3 If the o	rganization incurred a sectio	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a Was a	correction made?				Yes No
	" describe in Part IV.	·			1(0)
Part I-C		anization is exempt und			· · · · · · · · · · · · · · · · · · ·
	• •	by the filing organization for se	•		
		ization's funds contributed to of	<b>S</b>		
•					
		. Add lines 1 and 2. Enter here a			
		1120-POL for this year?			
		ployer identification number (El			
	,	tion listed, enter the amount pai	,	•	0 0
· ·	•	omptly and directly delivered to			<u>-</u>
politica	al action committee (PAC). If	additional space is needed, pro	vide 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

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

Schedule C (Form 990) 2021

LHA

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	HOPEWELL					8681860	Page 2
Part II-A Complete if the org	ganizatior	ı is exen	npt under sectior	n 501(c)(3) and file	d Form 5768 (el	ection und	ler
section 501(h)).							
A Check 🕨 🔲 if the filing organiza	ation belong	s to an affil	liated group (and list in	Part IV each affiliated	group member's nam	ie, address, E	ΞIN,
expenses, and sha	re of excess	lobbying e	expenditures).				
B Check 🕨 🔲 if the filing organiza	ation checke	ed box A ar	nd "limited control" pro	visions apply.			
	its on Lobby ditures" me		nditures nts paid or incurred.)		<b>(a)</b> Filing organization's totals	(b) Affiliate tota	
1a Total lobbying expenditures to infl	uence public	c opinion (c	grassroots lobbying)				
<b>b</b> Total lobbying expenditures to infl	•						
c Total lobbying expenditures (add I	_						
<b>d</b> Other exempt purpose expenditur							
e Total exempt purpose expenditure							
f Lobbying nontaxable amount. Ent							
If the amount on line 1e, column (a) of			bying nontaxable am				
Not over \$500,000	. (2) 151		the amount on line 1e.	ouncio.			
Over \$500,000 but not over \$1,00	0.000			ess over \$500,000			
Over \$1,000,000 but not over \$1,5		\$100,000 plus 15% of the excess over \$500,000. \$175,000 plus 10% of the excess over \$1,000,000.					
Over \$1,500,000 but not over \$17		\$225,000 plus 5% of the excess over \$1,500,000.					
Over \$17,000,000	,000,000	\$1,000,0	•	σο στοι φτ,σοσ,σοσ.			
373, 417,333,333		Ψ1,000,					
g Grassroots nontaxable amount (er	nter 25% of I	ine 1f)					
h Subtract line 1g from line 1a. If zer	ro or less, er	nter -0-					
i Subtract line 1f from line 1c. If zero	o or less, en	ter -0					
j If there is an amount other than ze	ero on either	line 1h or l	line 1i, did the organiza	ation file Form 4720			
reporting section 4911 tax for this	year?					Yes	☐ No
-		1-Year Ave	eraging Period Under	Section 501(h)			
(Some organizations t	hat made a	section 50	01(h) election do not l	have to complete all o	of the five columns b	elow.	
	See	the separa	ate instructions for lir	nes 2a through 2f.)			
	Lobby	ying Exper	nditures During 4-Yea	ar Averaging Period			
Calendar year (or fiscal year beginning in)	(a) 2	018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) To	otal
2a Lobbying nontaxable amount							
<b>b</b> Lobbying ceiling amount							
(150% of line 2a, column(e))							
c Total lobbying expenditures							
d Grassroots nontaxable amount							

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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)).

or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	"Yes" response on lines 1a through 1i below, provide in Part IV a detailed description (a)			(b)	
the lobbying activity.	Yes	No	A	mount	
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?		Х			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Х				
c Media advertisements?	Х			135,390	
d Mailings to members, legislators, or the public?	Х			11,580	
e Publications, or published or broadcast statements?	Х			6,822	
f Grants to other organizations for lobbying purposes?	Х			2,087,524	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X			386,918	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X			4,687	
i Other activities?	Х		_	91,633	
j Total. Add lines 1c through 1i		x		2,724,554	
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	n 501(c)(	5), or s	ection		
501(c)(6).	,,, oo ,(o)(	o,, o. o			
· (-)(-).			<u> </u>	No	
			Yes		
1 Ware substantially all (90% or more) dues received pondeductible by members?		Γ.	Yes	NO	
Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?			1	No	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	1 2	140	
	ne prior year	? 2	2	NO	
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political campaign activity expenditures from the</li> </ul>	ne prior year on 501(c)(	? 2 5), or s	ection		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?  3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).	ne prior year on 501(c)(	? 2 5), or s	ection		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?  3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the cart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	ne prior year on 501(c)(t "No" OR	? 5), or s (b) Pai	ection		
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	ne prior year on 501(c)(t "No" OR	? 5), or s (b) Pai	ection		
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Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the local section 501 (c) (4), section 501 (c) (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	ne prior year on 501(c)(t "No" OR	? 5), or s (b) Par	ection		
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the cart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	ne prior year on 501(c)(t "No" OR cal	? 3 5), or s (b) Par	ection t III-A, lii		
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Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perspenditure next year?  Taxable amount of lobbying and political expenditures. See instructions  Part IV Supplemental Information  Tovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group structions); and Part II-B, line 1. Also, complete this part for any additional information.	ne prior year on 501(c)(t "No" OR cal	2? 35), or s (b) Pai	ection t III-A, lii  a b c 3	ne 3, is	
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Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year?  Taxable amount of lobbying and political expenditures. See instructions  Part IV Supplemental Information  rovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group structions); and Part II-B, line 1. Also, complete this part for any additional information.  ART II-B, LINE 1, LOBBYING ACTIVITIES:	ne prior year on 501(c)(t "No" OR cal	2? 35), or s (b) Pai	ection t III-A, lii  a b c 3	ne 3, is	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year?  Taxable amount of lobbying and political expenditures. See instructions  Part IV Supplemental Information  Tovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated groupstructions); and Part II-B, line 1. Also, complete this part for any additional information.  ART II-B, LINE 1, LOBBYING ACTIVITIES:	ne prior year on 501(c)(t "No" OR cal	2? 35), or s (b) Pai	ection t III-A, lii  a b c 3	ne 3, is	

Schedule C (Form 990) 2021

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### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047

Inspection

Name of the organization

HOPEWELL FUND

**Employer identification number** 47-3681860

Par			r Si	milar Funds or	Accour	nts. Complete if the	
	organization answered "Yes" on Form 990, Part IV, line	e 6. (a) Donor adv	vised	funds	(h) Fur	nds and other accounts	
1	Total number at end of year	(a) Bonor adv	V1000	1	(b) i ai	ido di la otrici docodi ito	0
2	Aggregate value of contributions to (during year)			6,854,500.			0.
3	Aggregate value of grants from (during year)			16,039,021.			0.
4	Aggregate value at end of year			26,143,344.			0.
5	Did the organization inform all donors and donor advisors in v				unds		_
	are the organization's property, subject to the organization's e	~				X Yes	No
6	Did the organization inform all grantees, donors, and donor ad						
	for charitable purposes and not for the benefit of the donor or						
	impermissible private benefit?					Yes	No
Par	t II Conservation Easements. Complete if the org	janization answered '	"Yes	on Form 990, Part	IV, line 7		
1	Purpose(s) of conservation easements held by the organization	on (check all that app	ly).				
	Preservation of land for public use (for example, recreat	tion or education)		Preservation of a hi	storically	important land area	
	Protection of natural habitat			Preservation of a co	ertified hi	storic structure	
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation conf	tribu	tion in the form of a	conserva		
	day of the tax year.					Held at the End of the Tax Y	ear_
а					. 2a		
b							
	Number of conservation easements on a certified historic stru				2c		
d	Number of conservation easements included in (c) acquired a						
	listed in the National Register						
3	Number of conservation easements modified, transferred, rele	eased, extinguished,	or te	rminated by the org	anization	during the tax	
	year >						
4	Number of states where property subject to conservation eas						
5	Does the organization have a written policy regarding the peri						
6	violations, and enforcement of the conservation easements it			Lanforoing concerns			No
6	Staff and volunteer hours devoted to monitoring, inspecting, I	nariding of violations	, and	i emorcing conserva	llion east	ements during the year	
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and	l enfa	orcing conservation	easemen	ts during the year	
•	> \$	iii ig or violations, and	CITIC	ording conscivation	Cascillon	to during the year	
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirem	ents	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						
	balance sheet, and include, if applicable, the text of the footn			· ·			
	organization's accounting for conservation easements.						
Par		Art, Historical T	rea	sures, or Other	Simila	r 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	8, not to report in its	rever	nue statement and b	alance s	heet works	
	of art, historical treasures, or other similar assets held for pub	lic exhibition, educat	ion,	or research in furthe	rance of	public	
	service, provide in Part XIII the text of the footnote to its finan	cial statements that	desc	ribes these items.			
b	If the organization elected, as permitted under FASB ASC 958	B, to report in its reve	enue	statement and balar	nce sheet	works of	
	art, historical treasures, or other similar assets held for public	exhibition, education	n, or	research in furtherar	nce of pu	blic service,	
	provide the following amounts relating to these items:						
	(i) Revenue included on Form 990, Part VIII, line 1					\$	
						\$	
2	If the organization received or held works of art, historical treatments	asures, or other simila	ar as	sets for financial gai	n, provide	e	
	the following amounts required to be reported under FASB AS	SC 958 relating to the	ese it	ems:			
а	Revenue included on Form 990, Part VIII, line 1				▶	\$	
	Assets included in Form 990, Part X				<b>&gt;</b>		
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.				Schedule D (Form 990) 2	021

HOPEWELL FUND 47-3681860 <u> Page</u> **2** Schedule D (Form 990) 2021 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) 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): Public exhibition Loan or exchange program h Scholarly research Other Preservation for future generations С Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 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? 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 If "Yes," explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance 1c d Additions during the year 1d 1e Distributions during the year 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes Nο If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. 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 Contributions Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment Permanent endowment 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 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? Describe in Part XIII the intended uses of the organization's endowment funds. 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 (b) Cost or other (c) Accumulated (d) Book value

Schedule D (Form 990) 2021

e Other

basis (investment)

b Buildingsc Leasehold improvements

d Equipment

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

basis (other)

28,416.

161,231,

depreciation

10,450

60,029,

17,966.

101,202,

119,168.

47-3681860 Page **3** HOPEWELL FUND

on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(b) Book value	(c) Method of valuation: Cost or end-of-ye	ear market value
(b) Book value	(c) Method of valuation: Cost or end-of-ye	ear market value
on Form 990, Part IV, line		
Description		(b) Book value
9 15.)	<b>&gt;</b>	
on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
· · ·		(b) Book value
		-
	<u> </u>	
	on Form 990, Part IV, line (b) Book value  on Form 990, Part IV, line Description	on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.  (b) Book value (c) Method of valuation: Cost or end-of-yellow on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  Description  on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

Schedule D (Form 990) 2021

Sche	dule D (Form 990) 2021 HOPEWELL FUND			47-36818	360 Page <b>4</b>
Par	t XI Reconciliation of Revenue per Audited Financial State	ments With R	evenue per Re	turn.	
	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	124,516,732.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-37,047.		
b	Donated services and use of facilities		173,000.		
С	Recoveries of prior year grants		1,004,788.		
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d			2e	1,140,741.
3	Subtract line 2e from line 1			3	123,375,991.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	33,563.		
b	Other (Describe in Part XIII.)	4b	-23,615.		
С	Add lines 4a and 4b			4c	9,948.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	123,385,939.
Pai	t XII Reconciliation of Expenses per Audited Financial Stat		xpenses per F	łeturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.		T 1	
1	Total expenses and losses per audited financial statements			1	123,716,366.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1			
а	Donated services and use of facilities	2a	173,000.		
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	1,523,615.		
е	Add lines 2a through 2d			2e	1,696,615.
3	Subtract line 2e from line 1			3	122,019,751.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b		33,563.		
b	Other (Describe in Part XIII.)	4b			22 562
	Add lines 4a and 4b			4c	33,563.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	122,053,314.
	t XIII Supplemental Information.				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;	•	, ,	; Part X, line	2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any	additional informa	tion.		
ח א ח ת	V ITNE 2.				
PART	X, LINE 2:				
mur	EIDID DOEG NOM HAVE AMY MAMEDIAI INGEDMAIN MAY DOGIMIONG OD	IINDEI AMED			
THE	FUND DOES NOT HAVE ANY MATERIAL UNCERTAIN TAX POSITIONS OR	UNKELATED			
DIICI	NECC INCOME MUE BIND BILDS EVENDO BIND DEMIND AND IE A	DDI TCABI E			
BUS1	NESS INCOME. THE FUND FILES EXEMPT FUND RETURNS AND, IF A	PPLICABLE,			
TIMDE	LATED BUSINESS INCOME TAX RETURNS IN THE U.S. FEDERAL AND	CMVME			
UNKE	LATED BUSINESS INCOME TAX RETURNS IN THE U.S. FEDERAL AND	SIAIE			
тпрт	CDICTIONS				
JUKI	SDICTIONS.				
חס גם	VI IIND AD _ OMUDD AD HIGHMENING.				
FARI	XI, LINE 4B - OTHER ADJUSTMENTS:				
T.O.S.S	ON DISPOSAL OF FIXED ASSETS	-23,615.			
порг	ON DISTORAL OF FIXED ASSETS	23,013.			
рдрл	XII, LINE 2D - OTHER ADJUSTMENTS:				
- 111/1	,				
REVE	RSAL OF PRIOR YEAR PLEDGE/CONTRIBUTION REVENUE	1,500,000.			
		_,555,555.			
Loss	ON DISPOSAL OF FIXED ASSETS	23 615			
		25,015.			

Schedule D (Form 990) 2021 HOPEWELL FUND		47-3681860	Page 5
Schedule D (Form 990) 2021 HOPEWELL FUND  Part XIII Supplemental Information (continued)			
MOMAL MO COURDING D. DADM VII. LINE 2D	1 522 615		
TOTAL TO SCHEDULE D, PART XII, LINE 2D	1,523,615.		

# SCHEDULE F (Form 990)

# **Statement of Activities Outside the United States**

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

➤ Attach to Form 990. Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the organization **Employer identification number** 

HOPEWELL FUND					47-3681860	
Part I General Infor	mation on A	ctivities Out	side the United States. Comple	ete if the organ	ization answered "Y	'es" on
 Form 990, Part I\			·	· ·		
1 For grantmakers. Does	the organization	n maintain record	ds to substantiate the amount of its gra	nts and other a	assistance,	
the grantees' eligibility for	or the grants or a	ssistance, and t	he selection criteria used to award the	grants or assis	stance? X	Yes No
2 For grantmakers. Desc	ribe in Part V the	organization's	procedures for monitoring the use of its	grants and ot	her assistance outsi	de the
United States.						
3 Activities per Region. (Th	ne following Part	I, line 3 table ca	ın be duplicated if additional space is n	eeded.)		
(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in the region		vity listed in (d)	(f) Total
	offices	employees, agents, and	(by type) (such as, fundraising, pro-		gram service,	expenditures for and
	in the region	independent	gram services, investments, grants to		specific type	investments
		contractors in the region	recipients located in the region)	of service	(s) in the region	in the region
CENTRAL AMERICA AND						
THE CARIBBEAN -						
ANTIGUA & BARBUDA,				CIVIL RIGHT	S, SOCIAL	
ARUBA, BAHAMAS,	0	1		ACTION, ADV		2,500.
EAST ASIA AND THE						
PACIFIC - AUSTRALIA,				INTERNATION	IAL	
BRUNEI, BURMA,				DEVELOPMENT	AND FOREIGN	
CAMBODIA,	0	1	PROGRAM SERVICES	AFFAIRS		375.
EUROPE (INCLUDING				CIVIL RIGHT	S SOCIAL	
ICELAND & GREENLAND)				ACTION, ADV	•	
- ALBANIA, ANDORRA,				, INTERNATION		
AUSTRIA, BELGIUM	0	6	 PROGRAM SERVICES		AND FOREIGN	381,228.
NORTH AMERICA -						331,223.
CANADA AND MEXICO,				INTERNATION	JAL	
BUT NOT THE UNITED					AND FOREIGN	
STATES	0	1	 PROGRAM SERVICES	AFFAIRS		31,500.
SUB-SAHARAN AFRICA -	_	_		CIVIL RIGHT	'S SOCIAL	,
ANGOLA, BENIN,				ACTION, ADV	•	
BOTSWANA, BURKINA				INTERNATION		
FASO,	0	5	 PROGRAM SERVICES		AND FOREIGN	138,028.
EUROPE (INCLUDING					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	200,020.
ICELAND & GREENLAND)						
- ALBANIA, ANDORRA,						
AUSTRIA, BELGIUM	0	0	 GRANTMAKING			2,035,691.
SOUTH AMERICA -	_	-				
ARGENTINA, BOLIVIA,						
BRAZIL, CHILE,						
COLUMBIA, ECUADOR,	0	0	 GRANTMAKING			100,000.
SUB-SAHARAN AFRICA -						100,000.
ANGOLA, BENIN,						
BOTSWANA, BURKINA						
FASO,	0	0	GRANTMAKING			1,124,936.
	0	14	PILLI, III III III			3,814,258.
3 a Subtotal		14				3,014,230.
<b>b</b> Total from continuation	0	0				0.
sheets to Part I						<del>                                     </del>
C I DISIE (SUO IIDAS 30						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. SEE PART V FOR COLUMN (E) DESCRIPTIONS

Schedule F (Form 990) 2021

3,814,258.

and 3b)

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

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV appraisal, other)
		EUROPE (INCLUDING						
		ICELAND AND	CIVIL RIGHTS, SOCIAL					
			ACTION, ADVOCACY	46,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING						
		ICELAND AND	CIVIL RIGHTS, SOCIAL	25 500				
		GREENLAND)	ACTION, ADVOCACY	37,500.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING						
		ICELAND AND	CIVIL RIGHTS, SOCIAL					
		GREENLAND)	ACTION, ADVOCACY	97,191.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING						
		ICELAND AND	CIVIL RIGHTS, SOCIAL					
		GREENLAND)	ACTION, ADVOCACY	30,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING						
			CIVIL RIGHTS, SOCIAL					
			ACTION, ADVOCACY	1 825 000	WIRE TRANSFER	0.		
			norion, invocinor	1,023,000.	WIRE HUMBIEN	3.		
			INTERNATIONAL					
			DEVELOPMENT AND					
		SOUTH AMERICA	FOREIGN AFFAIRS	100,000.	WIRE TRANSFER	0.		
		GUD GAUADAN	INTERNATIONAL					
		SUB-SAHARAN	DEVELOPMENT AND	100 000	MIDE MDANGEED	0.		
		AFRICA	FOREIGN AFFAIRS	100,000.	WIRE TRANSFER	0.		
			CIVIL RIGHTS, SOCIAL					
		AFRICA	ACTION, ADVOCACY	292,514.	WIRE TRANSFER	0.		

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

13 3 Enter total number of other organizations or entities

Schedule F (Form 990) 2021

Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1	1)	r ugo <b>z</b>
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SUB-SAHARAN	INTERNATIONAL DEVELOPMENT AND FOREIGN AFFAIRS	200,000.	WIRE TRANSFER	0.		
			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	102,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN	INTERNATIONAL DEVELOPMENT AND FOREIGN AFFAIRS	150,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN	INTERNATIONAL DEVELOPMENT AND FOREIGN AFFAIRS	30,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN	INTERNATIONAL DEVELOPMENT AND FOREIGN AFFAIRS	250,422.	WIRE TRANSFER	0.		

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (d) Amount of (e) Manner of cash disbursement (c) Number of (f) Amount of (g) Description of (a) Type of grant or assistance (b) Region recipients cash grant noncash noncash assistance assistance

Schedule F (Form 990) 2021 HOPEWELL FUND 47-3681860 Page **4** 

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

Instructions for Form 5713; don't file with Form 990)

Schedule F (Form 990) 2021

Yes X No

PART II, LINE 1 (ACCOUNTING METHOD):

ACCRUAL METHOD

2021.05000 HOPEWELL FUND

## SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States** 

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

► Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public

Inspection

Name of the organization  HOPEWELL FUND							Employer identification number 47-3681860
Part I General Information on Grants as	nd Assistance						47-3001000
Does the organization maintain records to criteria used to award the grants or assis     Describe in Part IV the organization's pro-	o substantiate the						
Part II Grants and Other Assistance to I					anization answered "\	Yes" on Form 990, Part	t IV, line 21, for any
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
1 VOTE COUNTS 231 STATE ST HARRISBURG, PA 17101	85-1853336	501(C)(3)	25,000.	0.			CIVIL RIGHTS, SOCIAL
826CHI 1276 N MILWAUKEE AVE CHICAGO, IL 60622	30-0248920	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT AND EDUCATION
A BETTER BALANCE 40 WORTH STREET NEW YORK, NY 10013	20-3664771	501(C)(3)	130,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
A BETTER WISCONSIN TOGETHER INSTITUTE INC - 6516 MONONA DRIVE - MADISON, WI 53716	84-4321571	501(C)(3)	200,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
A WOMAN'S CHOICE OF CHARLOTTE 421 WENDOVER ROAD CHARLOTTE, NC 28211	81-4130825		47,152.	0.			HEALTH
A WOMAN'S CHOICE OF JACKSONVILLE, INC - 4131 UNIVERSITY BLVD - JACKSONVILLE, FL 32216	04-3590126		59,497.	0.			HEALTH
<ul> <li>Enter total number of section 501(c)(3) ar</li> <li>Enter total number of other organizations</li> </ul>	-		ne line 1 table				267

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 (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable cash grant valuation non-cash assistance or assistance noncash (book, FMV, assistance appraisal, other) ABORTION CARE NETWORK 1300 I ST NW WASHINGTON, DC 20005 26-1972058 501(C)(3) 59,500 0. HEALTH ABORTION FREEDOM PARTNERSHIP 14435 - C BIG BASIN WAY SARATOGA, CA 95070 84-3867470 501(C)(3) 7,743 0 TECHNOLOGY AND INNOVATION ABORTION RIGHTS FUND OF WESTERN MASSACHUSETTS INC - PO BOX 2162 -AMERHEST, MA 01004 22-2928632 501(C)(3) 9,100 0. TECHNOLOGY AND INNOVATION ABOUT FACE THEATRE COLLECTIVE 5252 N BROADWAY YOUTH DEVELOPMENT AND 36-4067995 501(C)(3) CHICAGO, IL 60640 50,000. 0 EDUCATION ACCESS REPRODUCTIVE JUSTICE PO BOX 3609 51-0163201 501(C)(3) OAKLAND, CA 94609 0. 8,500. TECHNOLOGY AND INNOVATION ACRONYM 1400 T ST NW CIVIL RIGHTS, SOCIAL WASHINGTON, DC 20005 82-1630469 501(C)(4) 0. ACTION, ADVOCACY 615,260, ACTIONN 548 GREENBRAE DRIVE CIVIL RIGHTS, SOCIAL 80-0732126 501(C)(3) ACTION, ADVOCACY SPARKS, NV 89431 85 000. 0. ACTUATE INNOVATION INC 555 BRYANT STREET, #878 PALO ALTO, CA 94301 35-2668523 501(C)(3) 333,705. 0. TECHNOLOGY AND INNOVATION ACUMEN FUND INC 40 WORTH ST CIVIL RIGHTS, SOCIAL 13-4166228 501(C)(3) NEW YORK, NY 10013 62 500. 0. ACTION ADVOCACY

Schedule I (Form 990)

Page 1

HOPEWELL FUND

(a) Name and address of organization or government	<b>(b)</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
ADVOCATES FOR YOUTH							
1325 G STREET NW							
WASHINGTON, DC 20005	52-1173590	501(C)(3)	76,511.	0.			HEALTH
ALAMO WOMEN'S REPRODUCTIVE							
SERVICES - 7402 JOHN SMITH DRIVE -							
SAN ANTONIO, TX 78229	45-5161183		132,850.	0.			HEALTH
ALASKA PUBLIC INTEREST RESEARCH							
GROUP - 308 G STREET - ANCHORAGE,							CIVIL RIGHTS, SOCIAL
AK 99501	92-0047627	501(C)(3)	10,000.	0.			ACTION, ADVOCACY
ALASKANS FOR POSTERITY INC							
PO BOX 90370							CIVIL RIGHTS, SOCIAL
ANCHORAGE, AK 99509	85-2279710	501(C)(4)	275,000.	0.			ACTION, ADVOCACY
·							,
ALLEGHENY REPRODUCTIVE HEALTH							
CENTER - 5910 KIRKWOOD ST -							
PITTSBURGH, PA 15206	82-0598328		134,339.	0.			HEALTH
ALLIANCE FOR A BETTER MINNESOTA							
EDUCATION FUND - 1600 UNIVERSITY							CIVIL RIGHTS, SOCIAL
AVE W - SAINT PAUL, MN 55104	26-0317135	501(C)(3)	318,000.	0.			ACTION, ADVOCACY
AMERICA ACHIEVES INC							
244 FIFTH AVENUE							CIVIL RIGHTS, SOCIAL
NEW YORK, NY 10001	27-3238471	501(C)(3)	50,000.	0.			ACTION, ADVOCACY
AMERICA VOTES							
1155 CONNECTICUT AVE NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20036	26-4568349	501(C)(4)	95,000.	0.			ACTION, ADVOCACY
,			, ,	-			,
AMERICAN CONSTITUTION SOCIETY FOR							CIVII DIGUMG GOCTA
LAW AND POLICY - 1899 L STREET NW	52-2313694	501/C\/3\	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
- WASHINGTON, DC 20036	34-4313094	201(C/(3/	30,000.	U .		L	ACTION, ADVOCACE

Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN SUSTAINABLE BUSINESS							
INSTITUTE INC - 712 H STREET NE -							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20002	45-2384297	501(C)(3)	30,000.	0.			ACTION, ADVOCACY
ARCHIVE OF CONTEMPORARY MUSIC							
54 WHITE ST							CIVIL RIGHTS, SOCIAL
NEW YORK, NY 10013	13-3347764	501(C)(3)	50,000.	0.			ACTION, ADVOCACY
ARIZONA CENTER FOR EMPOWERMENT							
5716 N 19TH AVE							CIVIL RIGHTS, SOCIAL
PHOENIX, AZ 85015	27-2366780	501(C)(3)	90,000.	0.			ACTION, ADVOCACY
ADTRONANG DOD A GEDONGED EVENDE							
ARIZONANS FOR A STRONGER FUTURE INC - 8837 N CENTRAL AVENUE -							CTVII DICUMO COCINI
PHOENIX, AZ 85020	87-1533213	501(C)(A)	200,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
THOUNIA, AZ 03020	07 1333213	301(0)(4)	200,000.	0.			ACTION, ADVOCACT
ASIAN MENTAL HEALTH COLLECTIVE							
613 PARK LANE							
FRIENDWOOD, TX 77546	85-2046622	501(C)(3)	10,000.	0.			HEALTH
ASIAN PACIFIC ISLANDER POLITICAL							
ALLIANCE - 1528 WALNUT STREET -							CIVIL RIGHTS, SOCIAL
PHILADELPHIA, PA 19102	85-0685612	501(C)(4)	50,000.	0.			ACTION, ADVOCACY
			, , , , ,				
ASISTA IMMIGRANT ASSISTANCE							
PO BOX 12							CIVIL RIGHTS, SOCIAL
SUFFIELD, CT 06078	26-3233069	501(C)(3)	92,000.	0.			ACTION, ADVOCACY
ASOCIACION PUERTORRIQUENA PRO							
BIENESTAR DE LA FAMILIA - PO BOX							
192379 - SAN JUAN, PR 00918	23-7034732	501(C)(3)	57,500.	0.			HEALTH
			11,200.				
ASYLUM SEEKER ADVOCACY PROJECT							
228 PARK AVE S							CIVIL RIGHTS, SOCIAL
NEW YORK, NY 10003	83-3011862	501(C)(3)	250,000.	0.			ACTION, ADVOCACY

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scriedule i (Form 990)							17 3001000 F
Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	rt II.)	1
(a) Name and address of organization or government	<b>(b)</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
AVOW FOUNDATION FOR ABORTION ACCESS - 1101 W 34TH ST - AUSTIN,							
rx 78705	74-2543342	501(C)(3)	50,000.	0.			HEALTH
AYERS AND STUNTZ INC							
811 SOUTH PERRY STREET							
MONTGOMERY, AL 36104	63-0895744		46,471.	0.			HEALTH
BE THE CHANGE REVOLUTIONS LLC							
PO BOX 751292							
DAYTON, OH 45475	45-5315148		252,053.	0.			HEALTH
BESTSELF BEHAVIORAL HEALTH INC							
255 DELAWARE AVENUE	16 1004000	F01 (G) (2)	50.000	_			YOUTH DEVELOPMENT AND
BUFFALO, NY 14202	16-1004090	501(C)(3)	50,000.	0.			EDUCATION
BETTER PENNSYLVANIA INC							
1740 MAIN STREET							CIVIL RIGHTS, SOCIAL
MECHANICSBURG, PA 17055	84-3194010	501(C)(4)	328,992.	0.			ACTION, ADVOCACY
BRIGHTON PARK NEIGHBORHOOD COUNCIL							
4477 S ARCHER AVE				_			YOUTH DEVELOPMENT AND
CHICAGO, IL 60632	36-4229387	501(C)(3)	50,000.	0.			EDUCATION
BROOKSIDE WOMEN'S MEDICAL CENTER							
1902 S IH 35							
AUSTIN, TX 78704	74-1947805		274,466.	0.			HEALTH
BUSINESS EDUCATION FUND							DISTRIBUTE OF STATE
6218 GEORGIA AVENUE NW	04 2060732	F01/G)/2)	75.000	_			CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20011	84-2969730	3U1(C)(3)	75,000.	0.			ACTION, ADVOCACY
CALIFORNIA INSTITUTE OF TECHNOLOGY							
1200 E CALIFORNIA BLVD							CIVIL RIGHTS, SOCIAL
PASADENA, CA 91125	95-1643307	501(C)(3)	250,000.	0.			ACTION, ADVOCACY

Part II Continuation of Grants and Other A	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	<b>(b)</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			
CAMPUS ELECTION ENGAGEMENT PROJECT										
615 PEARL STREET							CIVIL RIGHTS, SOCIAL			
GRANVILLE, OH 43023	85-0634102	501(C)(3)	75,000.	0.			ACTION, ADVOCACY			
CASA										
8151 15TH AVENUE							CIVIL RIGHTS, SOCIAL			
HYATTSVILLE, MD 20783	52-1372972	501(C)(3)	63,316.	0.			ACTION, ADVOCACY			
CENTENNIAL STATE PROSPERITY										
PO BOX 6692							CIVIL RIGHTS, SOCIAL			
DENVER, CO 80206	84-3973327	501(C)(4)	865,390.	0.			ACTION, ADVOCACY			
,			, ,				,			
CENTER FOR AMERICAN PROGRESS										
1333 H ST NW							CIVIL RIGHTS, SOCIAL			
WASHINGTON, DC 20005	30-0126510	501(C)(3)	25,000.	0.			ACTION, ADVOCACY			
GENTER TOR GOVERNMENT OF GLEEN WATER										
CENTER FOR COUNTERING DIGITAL HATE INC - 1250 CONNECTICUT AVE NW -										
WASHINGTON, DC 20036	86-2006080	501/C\/3\	15,000.	0.			HEALTH			
WASHINGTON, DC 20030	00 2000000	301(0)(3)	13,000.	· ·			IIBADIII			
CENTER FOR REPRODUCTIVE RIGHTS										
199 WATER STREET							CIVIL RIGHTS, SOCIAL			
NEW YORK, NY 10038	13-3669731	501(C)(3)	150,000.	0.			ACTION, ADVOCACY			
CENTER FOR TECHNOLOGY AND CIVIC										
LIFE - 233 N MICHIGAN AVENUE -							CIVIL RIGHTS, SOCIAL			
CHICAGO, IL 60601	47-2158694	501(C)(3)	3,000,000.	0.			ACTION, ADVOCACY			
eniendo, il outoi	47 2130034	301(0)(3)	3,000,000.				nerrow, indicater			
CENTER ON BUDGET & POLICY										
PRIORITIES - 1275 FIRST STREET NE							CIVIL RIGHTS, SOCIAL			
- WASHINGTON, DC 20002	52-1234565	501(C)(3)	10,000.	0.			ACTION, ADVOCACY			
CHERRY HILL WOMEN'S CENTER INC										
601 CHAPEL AVE EAST										
CHERRY HILL, NJ 08034	23-2068660		55,000.	0.			HEALTH			

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Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	<b>(b)</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
CHILDREN'S RIGHTS INC							
88 PINE STREET							CIVIL RIGHTS, SOCIAL
NEW YORK, NY 10005	13-3801864	501(C)(3)	150,000.	0.			ACTION, ADVOCACY
CHOICES WOMEN'S CENTER							
5240 E KNIGHT							
TUCSON, AZ 95712	86-0957416		22,000.	0.			HEALTH
CHOOSE LOVE INC							
45 WEST 36TH ST., 6TH FLOOR							CIVIL RIGHTS, SOCIAL
NEW YORK, NY 10018-7635	83-1378746	501(C)(3)	70,000.	0.			ACTION, ADVOCACY
CITIZEN ACTION OF WISCONSIN							
EDUCATION FUND - 221 S 2ND ST -							CIVIL RIGHTS, SOCIAL
MILWAUKEE, WI 53204	39-1520619	501(C)(3)	50,000.	0.			ACTION, ADVOCACY
,			, , ,				
CITY YEAR INC							
36 S WABASH							YOUTH DEVELOPMENT AND
CHICAGO, IL 60603	22-2882549	501(C)(3)	50,000.	0.			EDUCATION
CIVIL RIGHTS CORPS							
1601 CONNECTICUT AVENUE							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20009	81-3422012	501(C)(3)	37,500.	0.			ACTION, ADVOCACY
COLORADO CEASEFIRE OUTREACH INC							
PO BOX 7501							CIVIL RIGHTS, SOCIAL
DENVER, CO 80207	81-0781088	501(C)(3)	40,000.	0.			ACTION, ADVOCACY
COLORADO CIVIC EDUCATION							
PO BOX 1377							CIVIL RIGHTS, SOCIAL
DENVER, CO 80201	27-4388372	501(C)(3)	20,000.	0.			ACTION, ADVOCACY
							,
COLORADO CONSUMER HEALTH INITIATIVE - 1420 N OGDEN STREET -							CIVIL RIGHTS, SOCIAL
DENVER, CO 80218	84-1145452	501(C)(3)	15,000.	0.			ACTION, ADVOCACY
	01 1143432		13,000.	٠.			Ochodal I/Farra

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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 (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable cash grant valuation non-cash assistance or assistance noncash (book, FMV, assistance appraisal, other) COLORADO FISCAL INSTITUTE 1905 SHERMAN ST CIVIL RIGHTS, SOCIAL DENVER, CO 80203 46-1281109 501(C)(3) 70,000 0. ACTION, ADVOCACY COLORADO PEOPLE'S ALLIANCE 700 KALAMATH ST CIVIL RIGHTS, SOCIAL DENVER, CO 80204 84-1599036 501(C)(3) 30,000 0 ACTION, ADVOCACY COMER EDUCATION CAMPUS 7200 S INGLESIDE AVE YOUTH DEVELOPMENT AND CHICAGO, IL 60619 45-5399472 501(C)(3) 50,000 0. EDUCATION COMMITTEE TO PROTECT MEDICARE 3317 W FULLERTON AVE CIVIL RIGHTS, SOCIAL 82-0596008 501(C)(4) CHICAGO, IL 60647 232,400. 0 ACTION, ADVOCACY COMMITTEE TO PROTECT MEDICARE EDUCATION FUND - 3317 W FULLERTON CIVIL RIGHTS, SOCIAL 85-1300728 501(C)(3) AVE - CHICAGO, IL 60647 0. ACTION, ADVOCACY 269,000, COMMON CAUSE EDUCATION FUND 805 15TH STREET NW CIVIL RIGHTS, SOCIAL WASHINGTON, DC 20005 31-1705370 501(C)(3) 0. ACTION, ADVOCACY 370,000 COMMONWEALTH COMMUNICATIONS 1528 WALNUT ST CIVIL RIGHTS, SOCIAL 84-4535961 501(C)(4) ACTION, ADVOCACY PHILADELPHIA, PA 19102 60 000. 0. COMMUNITY HERO IMPACT ALLIANCE 8001 CASTOR AVE CIVIL RIGHTS, SOCIAL PHILADELPHIA, PA 19152 86-1698484 501(C)(4) 25,000. 0. ACTION, ADVOCACY CONSUMERS FOR AFFORDABLE HEALTH CARE FOUNDATION - 12 CHURCH STREET CIVIL RIGHTS, SOCIAL - AUGUSTA, ME 04330 04-3366975 501(C)(3) 60 000 0. ACTION ADVOCACY

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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 (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable cash grant valuation non-cash assistance or assistance noncash (book, FMV, assistance appraisal, other) COUNT MI VOTE EDUCATION FUND PO BOX 16180 CIVIL RIGHTS, SOCIAL LANSING, MI 48901 83-1771426 501(C)(3) 50,000 0. ACTION, ADVOCACY DAYS FOR GIRLS INTERNATIONAL PO BOX 2622 CIVIL RIGHTS, SOCIAL MT VERNON, WA 98274 45-3934671 501(C)(3) 20,000 0 ACTION, ADVOCACY DC ABORTION FUND 1616 H STREET NW WASHINGTON, DC 20006 20-4713150 501(C)(3) 30,000 0. TECHNOLOGY AND INNOVATION DC JUSTICE LAB PO BOX 90048 CIVIL RIGHTS, SOCIAL WASHINGTON, DC 20090 84-3479025 501(C)(3) 40,000. 0 ACTION, ADVOCACY DELIVER MY VOTE 1250 CONNECTICUT AVE NW CIVIL RIGHTS, SOCIAL 84-3147970 501(C)(4) WASHINGTON, DC 20036 0. ACTION, ADVOCACY 67,196. DEMOCRACY 21 EDUCATION FUND 1913 MASSACHUSETTS AVENUE NW CIVIL RIGHTS, SOCIAL WASHINGTON, DC 20036 52-1956824 501(C)(3) 0. ACTION, ADVOCACY 45,000 DEMOCRACY NORTH CAROLINA 3000 AERIAL CENTER PARKWAY CIVIL RIGHTS, SOCIAL 56-2271150 501(C)(3) ACTION, ADVOCACY MORRISVILLE, NC 27560 50 000. 0. DIDI HIRSCH 4760 SEPULVEDA BLVD CULVER CITY, CA 90230 95-1816023 501(C)(3) 200,000. 0. HEALTH EARTHPERCENT FOUNDATION 3424 MAPLEWOOD AVENUE CIVIL RIGHTS, SOCIAL 86-3830611 501(C)(3) LOS ANGELES, CA 90066 50 000 0. ACTION ADVOCACY

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Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa I	rt II.) T	T
(a) Name and address of organization or government	<b>(b)</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
EASTLAND WOMEN'S CLINIC 15921 E 8 MILE ROAD EASTPOINT, MI 48021	38-2183445		152,249.	0.			HEALTH
ECONOMIC SECURITY PROJECT ACTION INC - 51 EAST 12TH ST - NEW YORK, NY 10003	83-2050594	501(C)(4)	178,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
ECONOMIC SECURITY PROJECT INC 51 EAST 12TH STREET NEW YORK, NY 10003	85-3888872	501(C)(3)	2,234,683.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
ECUMENICAL COALITION FOR WOMEN AND FAMILIES - 133 SAINT GEORGE AVE - BILOXI, MS 39530	47-3227605	501(C)(3)	50,000.	0.			HEALTH
EDUCATIONAL FUND TO STOP GUN VIOLENCE - 805 15TH STREET NW - WASHINGTON, DC 20005	52-1114375	501(C)(3)	380,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
ELECTRONIC FRONTIER FOUNDATION 815 EDDY STREET SAN FRANCISCO, CA 94109	04-3091431	501(C)(3)	75,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
EMBARC INC PO BOX 221450 CHICAGO, IL 60622	27-3453182	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT AND EDUCATION
ENVIRONMENTAL DEFENSE FUND 257 PARK AVE S. NEW YORK, NY 10010	11-6107128	501(C)(3)	100,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
EQUALITY FOUNDATION OF GEORGIA 1530 DEKALB AVENUE ATLANTA, GA 30307	58-2346744	501(C)(3)	40,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

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 (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable cash grant valuation non-cash assistance or assistance noncash (book, FMV, assistance appraisal, other) EOUALIZE HEALTH 695 MINNESOTA ST CIVIL RIGHTS, SOCIAL SAN FRANCISCO, CA 94107 26-0642778 501(C)(3) 119,500 0. ACTION, ADVOCACY EVERY ELIGIBLE AMERICAN 600 PENNSYLVANIA AVE SE CIVIL RIGHTS, SOCIAL WASHINGTON, DC 20003 86-3619093 501(C)(4) 100,000 0 ACTION, ADVOCACY FAIR FUTURE NC 8 ST MARYS STREET CIVIL RIGHTS, SOCIAL RALEIGH, NC 27605 84-3038674 501(C)(4) 150,000 0. ACTION, ADVOCACY FAITH IN PUBLIC LIFE INC 1990 M ST NW CIVIL RIGHTS, SOCIAL 20-3798596 501(C)(3) ACTION, ADVOCACY WASHINGTON, DC 20036 40,000. 0 FAMILY VALUES AT WORK 207 E BUFFALO STREET CIVIL RIGHTS, SOCIAL 27-0321696 501(C)(3) ACTION, ADVOCACY MILWAUKEE, WI 53202 0. 55,000, FAMM FOUNDATION 1100 H STREET NW CIVIL RIGHTS, SOCIAL WASHINGTON, DC 20005 52-1750246 501(C)(3) 0. ACTION, ADVOCACY 187,500, FEMHEALTH USA INC 1001 CONNECTICUT AVENUE NW CIVIL RIGHTS, SOCIAL WASHINGTON, DC 20036 46-4144274 501(C)(3) 0. ACTION, ADVOCACY 196 524 FEMINIST WOMEN'S HEALTH CENTER INC 1924 CLIFF VALLEY WAY NE 58-1273243 501(C)(3) ATLANTA, GA 30329 89,720. 0. HEALTH FERGUSON DURHAM PLLC 223 N 6TH STREET CIVIL RIGHTS, SOCIAL BOISE, ID 83702 47-2541733 47,168. 0. ACTION ADVOCACY

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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 (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable cash grant valuation non-cash assistance or assistance noncash (book, FMV, assistance appraisal, other) FINANCIAL SERVICES STAKEHOLDER PROJECT NFP - 2513 N CENTRAL PARK CIVIL RIGHTS, SOCIAL AVE - CHICAGO, IL 60647 82-1722599 501(C)(3) 25,000 0. ACTION, ADVOCACY FLORIDA CONSUMER ACTION NETWORK FOUNDATION INC - 740 4TH STREET CIVIL RIGHTS, SOCIAL NORTH - ST PETERSBURG, FL 33701 59-2475079 501(C)(3) 10,000 0 ACTION, ADVOCACY FLORIDA VOICES FOR HEALTH INC 12978 SW 44TH ST CIVIL RIGHTS, SOCIAL MIRAMAR, FL 33027 82-0921929 501(C)(3) 40,000 0. ACTION, ADVOCACY FLORIDA WATCH ACTION 542 NE 72 ST CIVIL RIGHTS, SOCIAL 27-1856471 501(C)(4) 25,000. ACTION, ADVOCACY MIAMI, FL 33138 0 FLORIDIANS FOR HONEST LENDING 1430 S DIXIE HWY CIVIL RIGHTS, SOCIAL 87-2463774 501(C)(3) CORAL GABLES, FL 33146 0. ACTION, ADVOCACY 136,217. FOR OUR FUTURE ACTION FUND 1411 K STREET NW, STE. 900 CIVIL RIGHTS, SOCIAL WASHINGTON, DC 20005 81-2638345 501(C)(4) 0. ACTION, ADVOCACY 89,903, FOR WEST VIRGINIA'S FUTURE 3590 BENEDICT ROAD CIVIL RIGHTS, SOCIAL 82-4058689 501(C)(4) ACTION, ADVOCACY CULLODEN, WV 25510 225 000. 0. FORWARD JUSTICE CIVIL RIGHTS, SOCIAL 400 W MAIN STREET ACTION, ADVOCACY DURHAM, NC 27701 81-2450800 501(C)(3) 50,000. 0. FREE THE BALLOT INCARCERATED VOTER FAMILY NETWORK - 5107 IRVING CIVIL RIGHTS, SOCIAL 84-2189894 501(C)(4) STREET - PHILADELPHIA, PA 19139 75 000. 0. ACTION ADVOCACY

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HOPEWELL FUND

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FREEDOM VIRGINIA							
103 DUNDEE AVE							CIVIL RIGHTS, SOCIAL
RICHMOND, VA 23225	85-1257540	501(C)(4)	2,400,324.	0.			ACTION, ADVOCACY
FRONTERA FUND							
PO BOX 721011							
MCALLEN, TX 78504	47-4137116	501(C)(3)	5,457.	0.			TECHNOLOGY AND INNOVATION
FUND TEXAS CHOICE 3005 S LAMAR BLVD							
AUSTIN, TX 78704	46-3372095	501(C)(3)	10,796.	0.			TECHNOLOGY AND INNOVATION
FUTURE FORWARD USA ACTION 611 PENNSYLVANIA AVE SE							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20003	82-4170762	501(C)(4)	290,050.	0.			ACTION, ADVOCACY
FUTURE NOW ACTION							
700 13TH ST NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20005	82-2390410	501(C)(4)	585,625.	0.			ACTION, ADVOCACY
FWD.US EDUCATION FUND INC							
1101 K STREET NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20005	82-0962378	501(C)(3)	250,000.	0.			ACTION, ADVOCACY
GAINESVILLE WOMAN CARE LLC							
1233 NW 10TH AVE							
GAINESVILLE, FL 32601	20-1789123		19,330.	0.			HEALTH
GEORGIA BUDGET & POLICY INSTITUTE							
50 HURT PLAZA SE							CIVIL RIGHTS, SOCIAL
ATLANTA, GA 30303	55-0860376	501(C)(3)	67,000.	0.			ACTION, ADVOCACY
GEORGIA WATCH							
55 MARIETTA STREET NEW							CIVIL RIGHTS, SOCIAL
ATLANTA, GA 30303	16-1639971	501(C)(3)	50,000.	0.			ACTION, ADVOCACY

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 (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable cash grant valuation non-cash assistance or assistance noncash (book, FMV, assistance appraisal, other) GEORGIANS FOR A HEALTHY FUTURE 50 HURT PLAZA SE CIVIL RIGHTS, SOCIAL ATLANTA, GA 30303 26-3695851 501(C)(3) 102,600 0. ACTION, ADVOCACY GIRLS WHO CODE INC 28 W 23RD ST YOUTH DEVELOPMENT AND NEW YORK, NY 10010 30-0728021 501(C)(3) 175,000 0 EDUCATION GLOBAL IMPACT 1199 N FAIRFAX ST CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY ALEXANDRIA, VA 22314 52-1273585 501(C)(3) 6,000 0. GRAND CANYON INSTITUTE INC 15820 N. 35TH AVENUE CIVIL RIGHTS, SOCIAL PHOENIX, AZ 85053 45-0671339 501(C)(3) 40,000. 0 ACTION, ADVOCACY HAGAR USA 1609 E 5TH STREET CIVIL RIGHTS, SOCIAL 20-1507669 501(C)(3) CHARLOTTE, NC 28204 0. ACTION, ADVOCACY 70,000. HEALTH ACTION NEW MEXICO 3200 OSUNA RD NE CIVIL RIGHTS, SOCIAL ALBUQUERQUE, NM 87109 85-0481860 501(C)(3) 0. ACTION, ADVOCACY 132,000 HEALTH INFORMATION PROJECT INC HIP 4601 PONCE DE LEON BLVD YOUTH DEVELOPMENT AND CORAL GABLES, FL 33146 80-0526558 501(C)(3) EDUCATION 50 000. 0. HEALTHQUARTERS PO BOX 7050 BEVERLY, MA 01915 04-2475363 501(C)(3) 67,070. 0. HEALTH HOLLER HEALTH JUSTICE INC 1002 LEE ST E 83-1203957 501(C)(3) CHARLESTON, WV 25301 6 715. 0. TECHNOLOGY AND INNOVATION

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Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa		1, 3001000
(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
HOMEWORKS TRENTON							
174 NASSAU STREET							YOUTH DEVELOPMENT AN
PRINCETON, NJ 08542	81-5218769	501(C)(3)	50,000.	0.			EDUCATION
HOUSTON WOMEN'S CLINIC							
4820 SAN JACINTO ST							
HOUSTON, TX 77004	76-0148378		290,220.	0.			HEALTH
HOUSTON WOMEN'S REPRODUCTIVE							
SERVICES - 5225 KATY FREEWAY -							
HOUSTON, TX 77007	83-1912229		40,600.	0.			 HEALTH
noosion, in 77007	03 1312223		10,000.	· ·			
HUMANE SOCIETY OF THE UNITED							
STATES - 700 PROFESSIONAL DR -							CIVIL RIGHTS, SOCIAL
GAITHERSBURG, MD 20879	53-0225390	501(C)(3)	62,500.	0.			ACTION, ADVOCACY
IN OUR OWN VOICE NATIONAL BLACK	33 0223330	301(0)(3)	02,300.	· ·			nerrow, neverner
WOMEN'S REPRODUCTIVE - 8705							
COLESVILLE RD - SILVER SPRING, MD							
20910	82-1672086	501 (C) (3)	25,000.	0.			HEALTH
20310	02-10/2006	P01(C/(J/	25,000.	0.			HENTIN
INCOME MOVEMENT FOUNDATION							
725 NE JESSUP ST							CIVIL RIGHTS, SOCIAL
PORTLAND, OR 97211	85-0995395	501(C)(3)	100,000.	0.			ACTION, ADVOCACY
INDIGENOUS EDUCATION FOUNDATION OF							
TANZANIA INC - 333 E. 22ND ST #133							CTVII DICUMO COCINI
	20-4408954	E01/C)/3)	10.000	0.			CIVIL RIGHTS, SOCIAL
OGALLALA, NE 69153	20-4400954	DOT(C)(3)	10,000.	0.			ACTION, ADVOCACY
INEVITABLE FOUNDATION							
228 PARK AVE S							ARTS, CULTURE, AND
NEW YORK, NY 10003	86-1768321	501(C)(3)	406,613.	0.			HUMANITIES
, 25555	22 2,00021		100,013.				
INSIGHT CENTER FOR COMMUNITY							
ECONOMIC DEVELOPMENT - 360 14TH							CIVIL RIGHTS, SOCIAL
STREET - OAKLAND, CA 94612	94-2410277	501(C)(3)	50,000.	0.			ACTION, ADVOCACY

Part II Continuation of Grants and Other A	ssistance to Do	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	rt II.)	47-3681860 Pa
(a) Name and address of organization or government	<b>(b)</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
INSTITUTE FOR A PROGRESSIVE NEVADA 2275 RENAISSANCE DR							CIVIL RIGHTS, SOCIAL
LAS VEGAS, NV 89119	27-0854756	501(C)(3)	32,500.	0.			ACTION, ADVOCACY
INTEGRITY FLORIDA INSTITUTE 1719 OLD FORT DRIVE TALLAHASSEE, FL 32301	45-4341595	501(C)(3)	10,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
11111111111111111111111111111111111111	13 1311333	501(0)(3)	10,000.	<u> </u>			nerion, nevocaer
INTERNATIONAL REFUGEE ASSISTANCE PROJECT INC - 40 RECTOR ST., 9TH FLOOR - NEW YORK, NY 10006	82-2167556	501(C)(3)	2,400,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
							·
IPAS PO BOX 9990							CIVIL RIGHTS, SOCIAL
CHAPEL HILL, NC 27515	56-1071085	501(C)(3)	88,726.	0.			ACTION, ADVOCACY
JANNUS, INC							
1607 W. JEFFERSON ST.							CIVIL RIGHTS, SOCIAL
BOISE, ID 83702	81-6035382	501(C)(3)	25,000.	0.			ACTION, ADVOCACY
JEWS UNITED FOR JUSTICE							
1100 H STREET NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20005	52-2346578	501(C)(3)	70,000.	0.			ACTION, ADVOCACY
JOBS WITH JUSTICE EDUCATION FUND							
1150 CONNECTICUT AVENUE NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20036	52-1865575	501(C)(3)	80,080.	0.			ACTION, ADVOCACY
JOURNALISM DEVELOPMENT NETWORK INC							
1220 L ST NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20005	26-0898750	501(C)(3)	75,000.	0.			ACTION, ADVOCACY
JTP PROFESSIONAL SERVICE							
CORPORATION - 2038 FORD PARKWAY -							CIVIL RIGHTS, SOCIAL
SAINT PAUL, MN 55116	85-0868142	501(C)(3)	264,924.	0.			ACTION, ADVOCACY

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KEYSTONE RESEARCH CENTER							
412 N THIRD ST							CIVIL RIGHTS, SOCIAL
HARRISBURG, PA 17101	25-1776998	501(C)(3)	35,000.	0.			ACTION, ADVOCACY
LAW FORWARD INC							
PO BOX 326							CIVIL RIGHTS, SOCIAL
MADISON, WI 53703	84-2803392	501(C)(3)	70,000.	0.			ACTION, ADVOCACY
LAWYERS' COMMITTEE FOR CIVIL							
RIGHTS UNDER LAW - 1500 K ST NW -							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20005	52-0799246	501(C)(3)	25,000.	0.			ACTION, ADVOCACY
LEADERSHIP NOW PROJECT							
1401 K ST NW SUITE 900							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20005	82-1780610	501(C)(4)	851,622.	0.			ACTION, ADVOCACY
LEAGUE OF WOMEN VOTERS OF							
PENNSYLVANIA CITIZEN EDUCATION							
FUND - 1425 CROOKED HILL ROAD -							CIVIL RIGHTS, SOCIAL
HARRISBURG, PA 17106	46-4971552	501(C)(3)	30,000.	0.			ACTION, ADVOCACY
LELAND STANFORD JUNIOR UNIVERSITY							
1705 EL CAMINO REAL							CIVIL RIGHTS, SOCIAL
PALO ALTO, CA 94306	94-1156365	501(C)(3)	110,000.	0.			ACTION, ADVOCACY
LIGHTNING BASKETBALL INC							
45 CHERRY VALLEY AVENUE							CIVIL RIGHTS, SOCIAL
WEST HEMPSTEAD, NY 11552	11-3633046	501(C)(3)	28,500.	0.			ACTION, ADVOCACY
MABEL WADSWORTH WOMEN'S HEALTH							
CENTER - 700 MT HOPE AVE - BANGOR,							
ME 04401	22-2667466	501(C)(3)	49,240.	0.			HEALTH
MAINE AFL-CIO							
21 GABRIEL DRIVE							CIVIL RIGHTS, SOCIAL
AUGUSTA, ME 04330	01-0113840	501(C)(5)	40,000.	0.			ACTION, ADVOCACY

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 (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable cash grant valuation non-cash assistance or assistance noncash (book, FMV, assistance appraisal, other) MAINE CENTER FOR ECONOMIC POLICY ONE WESTON COURT CIVIL RIGHTS, SOCIAL AUGUSTA, ME 04330 22-3317572 501(C)(3) 125,000 0. ACTION, ADVOCACY MAINE CITIZENS FOR CLEAN ELECTIONS PO BOX 18187 CIVIL RIGHTS, SOCIAL PORTLAND, ME 04112 27-2646667 501(C)(3) 40,000 0 ACTION, ADVOCACY MAINE EOUAL JUSTICE 126 SEWALL STREET CIVIL RIGHTS, SOCIAL AUGUSTA, ME 04330 04-3346273 501(C)(3) 15,000 0. ACTION, ADVOCACY MAINE PEOPLE'S RESOURCE CENTER 565 CONGRESS ST CIVIL RIGHTS, SOCIAL 22-2586108 501(C)(3) PORTLAND, ME 04101 35,000. 0 ACTION, ADVOCACY MAINERS FOR WORKING FAMILIES 49 OUEBEC ST. APT 3 CIVIL RIGHTS, SOCIAL 84-3390123 501(C)(4) PORTLAND, ME 04101 0. ACTION, ADVOCACY 66,400, MARCH ON MARYLAND 15800 CRABBS BRANCH PKWY CIVIL RIGHTS, SOCIAL ROCKVILLE, MD 20855 82-0958114 501(C)(3) 0. ACTION, ADVOCACY 250,000 MARYLAND CENTER ON ECONOMIC POLICY 1800 N CHARLES ST CIVIL RIGHTS, SOCIAL 90-0999151 501(C)(3) ACTION, ADVOCACY BALTIMORE, MD 21201 50 000 0. MARYLAND CITIZENS HEALTH INITIATIVE EDUCATION FUND INC -2600 ST. PAUL STREET - BALTIMORE, CIVIL RIGHTS, SOCIAL MD 21218 52-2173223 501(C)(3) 65,000. 0. ACTION, ADVOCACY MARYLAND FAMILY NETWORK, INC 1001 EASTERN AVE 2ND FLOOR CIVIL RIGHTS, SOCIAL 52-1486702 501(C)(3) BALTIMORE, MD 21202 65 000 0. ACTION ADVOCACY

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MARYLAND PUBLIC INTEREST RESEARCH FOUNDATION - 2209 MARYLAND AVENUE - BALTIMORE, MD 21218	52-1033638	501(c)(3)	40,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MARYLAND RISE 7850 WALKER DRIVE GREENBELT, MD 20770	85-1251741		300,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MASSACHUSETTS BUDGET AND POLICY CENTER INC - ONE STATE ST - BOSTON, MA 02109	04-2967537	501(c)(3)	25,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MEMPHIS CENTER FOR REPRODUCTIVE HEALTH - 1203 POPLAR AVENUE - MEMPHIS, TN 38104	62-0931089	501(C)(3)	8,223.	0.			HEALTH
METRO ORGANIZATION FOR RACIAL AND ECONOMIC EQUITY - 3151 OLIVE ST - KANSAS CITY, MO 61409	20-2470054	501(C)(3)	30,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MI FAMILIA VOTA EDUCATION FUND 3030 N CENTRAL AVE PHOENIX, AZ 85012	20-0182824	501(C)(3)	150,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MICHIGAN CIVIC EDUCATION FUND 28342 DARTMOUTH ST MADISON HEIGHTS, MI 48071	82-4762045	501(c)(3)	495,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MICHIGAN LABOR FOUNDATION 419 S WASHINGTON SQUARE LANSING, MI 48933	84-2605576	501(C)(3)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MIDWEST ACCESS COALITION 3052 W. NORTH AVENUE CHICAGO, IL 60647	47-2160168	501(C)(3)	11,131.	0.			TECHNOLOGY AND INNOVATIO

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
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MINDFUL SCHOOLS								
1260 45TH ST							YOUTH DEVELOPMENT AND	
EMERYVILLE, CA 94608	27-3261154	501(C)(3)	50,000.	0.			EDUCATION	
MINNEAPOLIS AREA SYNOD								
122 WEST FRANKLIN AVE							CIVIL RIGHTS, SOCIAL	
MINNEAPOLIS, MN 55404	41-1568278	501(C)(3)	30,000.	0.			ACTION, ADVOCACY	
MINNESOTA NURSES ASSOCIATION								
345 RANDOLPH AVE							CIVIL RIGHTS, SOCIAL	
ST PAUL, MN 55102	41-0417949	501(C)(5)	35,000.	0.			ACTION, ADVOCACY	
MORE PERFECT UNION FOUNDATION								
PO BOX 8147							CIVIL RIGHTS, SOCIAL	
ALEXANDRIA, VA 22306	85-3189807	501(C)(3)	1,796,000.	0.			ACTION, ADVOCACY	
,			, ,				,	
MOTHERING JUSTICE								
17320 LIVERNOIS AVE							CIVIL RIGHTS, SOCIAL	
DETROIT, MI 48221	45-3740989	501(C)(3)	60,000.	0.			ACTION, ADVOCACY	
MOVEMENT ADVANCEMENT PROJECT								
1905 15TH STREET							CIVIL RIGHTS, SOCIAL	
BOULDER, CO 80306	47-3968535	501(C)(3)	25,000.	0.			ACTION, ADVOCACY	
NARAL PRO CHOICE CONNECTICUT								
FOUNDATION - 102 LASALLE ROAD -								
WEST HARTFORD, CT 06127	06-1400165	501(C)(3)	8,000.	0.			TECHNOLOGY AND INNOVATIO	
NARAL PRO CHOICE MASSACHUSETTS								
FOUNDATION - 15 COURT SQUARE -	04 2670250	E01/G\/2\		0.			MECHNOLOGY AND INNOVANIO	
BOSTON, MA 02108	04-2679358	301(C)(3)	8,000.	0.			TECHNOLOGY AND INNOVATION	
NARAL PRO CHOICE MISSOURI								
FOUNDATION - 1210 S. VANDEVENTER -				_				
ST LOUIS, MO 63110	43-1770549	501(C)(3)	8,000.	0.			TECHNOLOGY AND INNOVATIO	

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Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	<b>(b)</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
NARAL PRO CHOICE NC FOUNDATION							
4711 HOPE VALLEY ROAD							
DURHAM, NC 27707	32-0117915	501(C)(3)	8,000.	0.			TECHNOLOGY AND INNOVATION
NARAL PRO CHOICE OHIO FOUNDATION 11811 SHAKER BLVD							
CLEVELAND, OH 44120	31-0963461	501(C)(3)	8,000.	0.			TECHNOLOGY AND INNOVATION
NARAL PRO CHOICE OREGON FOUNDATION 610 SW ALDER							
PORTLAND, OR 97205	93-0803636	501(C)(3)	8,000.	0.			TECHNOLOGY AND INNOVATION
NARAL PRO CHOICE VIRGINIA FOUNDATION - 901 N WASHINGTON ST - ALEXANDRIA, VA 22314	77-0611790	501(C)(3)	8,000.	0.			TECHNOLOGY AND INNOVATION
NARAL PRO CHOICE WASHINGTON FOUNDATION - 811 1ST AVE -							
SEATTLE, WA 98104	91-1353222	501(C)(3)	8,000.	0.			TECHNOLOGY AND INNOVATION
NARAL PRO-CHOICE MARYLAND FUND 1323 N CALVERT STREET BALTIMORE, MD 21202	52-2013901	501(C)(3)	17,000.	0.			TECHNOLOGY AND INNOVATION
,			, ,				
NATIONAL ABORTION FEDERATION (NAF)							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20005	43-1097957	501(C)(3)	75,000.	0.			ACTION, ADVOCACY
NATIONAL CAMPAIGN TO PREVENT TEEN PREGNANCY - 1776 MASSACHUSETTS AVE							
NW - WASHINGTON, DC 20036	52-1974611	501(C)(3)	25,000.	0.			HEALTH
NATIONAL COALITION ON BLACK CIVIC PARTICIPATION - 1666 K STREET NW -							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20006	52-1253112	501(C)(3)	25,000.	0.			ACTION, ADVOCACY

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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 (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) NATIONAL DEMOCRATIC INSTITUTE 455 MASSACHUSETTS AVENUE NW INTERNATIONAL DEVELOPMENT WASHINGTON, DC 20001 52-1338892 501(C)(3) 100,000 0. AND FOREIGN AFFAIRS NATIONAL DOMESTIC WORKERS ALLIANCE 45 BROADWAY CIVIL RIGHTS, SOCIAL NEW YORK, NY 10006 35-2420942 501(C)(3) 30,000 0 ACTION, ADVOCACY NATIONAL PARTNERSHIP FOR WOMEN AND FAMILIES - 1875 CONNECTICUT AVE NW CIVIL RIGHTS, SOCIAL - WASHINGTON, DC 20009 23-7124915 501(C)(3) 30,000 0. ACTION, ADVOCACY NATIONAL REDISTRICTING FOUNDATION 700 13TH STREET NW CIVIL RIGHTS, SOCIAL 82-0757693 501(C)(3) WASHINGTON, DC 20005 470,000, 0 ACTION, ADVOCACY NC CHILD 3109 POPLARWOOD CT, STE 300 CIVIL RIGHTS, SOCIAL 58-1534066 501(C)(3) RALEIGH, NC 27604 0. ACTION, ADVOCACY 17,500. NEO PHILANTHROPY INC 45 W 36TH STREET NEW YORK, NY 10018 13-3191113 501(C)(3) 0. HEALTH 111,587. NEW DAY NEVADA INC 7991 HACKBERRY DRIVE CIVIL RIGHTS, SOCIAL 84-3203462 501(C)(4) ACTION, ADVOCACY LAS VEGAS, NV 89123 1 829 000. 0. NEW ERA COLORADO FOUNDATION PO BOX 4274 CIVIL RIGHTS, SOCIAL BOULDER, CO 80306 26-1389272 501(C)(3) 30,000. 0. ACTION, ADVOCACY NEW JERSEY POLICY PERSPECTIVE 137 WEST HANOVER STREET CIVIL RIGHTS, SOCIAL 22-3492715 501(C)(3) TRENTON, NJ 08618 25 000 0. ACTION ADVOCACY

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Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW MEXICO FAMILIES FORWARD							
1523 MOUNTAIN ROAD NW							CIVIL RIGHTS, SOCIAL
ALBUQUERQUE, NM 87104	87-1654225	501(C)(4)	130,943.	0.			ACTION, ADVOCACY
NEW MEXICO VOICES FOR CHILDREN							
625 SILVER AVENUE SW							CIVIL RIGHTS, SOCIAL
ALBUQUERQUE, NM 87102	85-0348301	501(C)(3)	170,000.	0.			ACTION, ADVOCACY
NEW PENNSYLVANIA PROJECT							
717 MARKET ST							CIVIL RIGHTS, SOCIAL
LEMOYNE, PA 17043	86-1900180	501(C)(4)	50,000.	0.			ACTION, ADVOCACY
NEW VENTURE FUND							
1828 L STREET, NW, SUITE 300-A							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20036	20-5806345	501(C)(3)	3,522,500.	0.			ACTION, ADVOCACY
,			· ·				,
NEW VIRGINIA MAJORITY EDUCATION							
FUND - 3801 MOUNT VERNON AVENUE -							CIVIL RIGHTS, SOCIAL
ALEXANDRIA, VA 22305	27-1705920	501(C)(3)	145,000.	0.			ACTION, ADVOCACY
NEW YORK UNIVERSITY							
105 E 17TH ST							CIVIL RIGHTS, SOCIAL
NEW YORK, NY 10003	13-5562308	501(C)(3)	300,000.	0.			ACTION, ADVOCACY
NEW YORKERS AGAINST GUN VIOLENCE							
EDUCATION FUND - 675 THIRD AVENUE							CIVIL RIGHTS, SOCIAL
- NEW YORK, NY 10017	13-3808186	501(C)(3)	25,000.	0.			ACTION, ADVOCACY
NEXTGEN CHAMBER OF COMMERCE							
FOUNDATION - 700 PENNSYLVANIA AVE							YOUTH DEVELOPMENT AND
SE - WASHINGTON, DC 20001	82-4835903	501(C)(3)	180,000.	0.			EDUCATION
NO LABEL MEDIA GROUP INC							
910 LOUISIANA ST							YOUTH DEVELOPMENT AND
HOUSTON, TX 77002	85-3688066	501(C)(3)	225,000.	0.			EDUCATION

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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 (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable cash grant valuation non-cash assistance or assistance noncash (book, FMV, assistance appraisal, other) NORTH CAROLINA ALLIANCE FOR HEALTH 5001 S MIAMI BLVD CIVIL RIGHTS, SOCIAL DURHAM, NC 27703 81-4271401 501(C)(3) 40,000 0. ACTION, ADVOCACY NORTH CAROLINA BLACK ALLIANCE PO BOX 27886 CIVIL RIGHTS, SOCIAL RALEIGH, NC 27611 56-2210571 501(C)(3) 25,000 0 ACTION, ADVOCACY NORTH FLORIDA WOMEN'S CENTER 2412 WEST PLAZA DR TALLAHASSEE, FL 32308 46-3400566 47,846 0. HEALTH NORTH OKLAHOMA COUNTY MENTAL HEALTH CENTER - 2617 GENERAL PERSHING BLVD - OKLAHOMA CITY, OK YOUTH DEVELOPMENT AND 73107 73-1134098 501(C)(3) 50,000. 0 EDUCATION NORTH STAR PROSPERITY 1010 DALE ST N CIVIL RIGHTS, SOCIAL 86-2157002 501(C)(4) ST PAUL, MN 55117 0. ACTION, ADVOCACY 539,700. NORTHWESTERN UNIVERSITY 633 CLARK EVANSTON, IL 60208 36-2167817 501(C)(3) 0. HEALTH 79,614, ONE APIA NEVADA 181 N ARROYO GRANDE BLVD CIVIL RIGHTS, SOCIAL HENDERSON, NV 89074 83-0846881 501(C)(4) ACTION, ADVOCACY 97,000. 0. ONE ARIZONA CIVIL RIGHTS, SOCIAL 530 E MCDOWELL ROAD PHOENIX, AZ 85004 37-1782220 501(C)(3) 50,000. 0. ACTION, ADVOCACY ONE WEST VIRGINIA INC 135 COMMUNITY RDG CIVIL RIGHTS, SOCIAL CULLODEN, WV 25510 85-3670951 501(C)(3) 600 818. 0. ACTION ADVOCACY

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Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OPEN SOURCE COLLECTIVE							
340 S LEMON AVE #3717							
WALNUT, CA 91789	82-2037583	501(C)(6)	20,000.	0.			TECHNOLOGY AND INNOVATION
OPPORTUNITIES FOR ALL FLORIDIANS							
INC - 4151 PARK AVENUE - MIAMI, FL							CIVIL RIGHTS, SOCIAL
33136	84-2952039	501(C)(4)	221,000.	0.			ACTION, ADVOCACY
OPPORTUNITY ARIZONA							
3821 N 15TH DRIVE							CIVIL RIGHTS, SOCIAL
PHOENIX, AZ 85015	84-3103154	501(C)(4)	530,000.	0.			ACTION, ADVOCACY
OREGON CENTER FOR PUBLIC POLICY							
6420 SW MACADAM AVE #200	02 1106075	F01/G)/2)	15 000				CIVIL RIGHTS, SOCIAL
PORTLAND, OR 97239	93-1186075	501(C)(3)	15,000.	0.			ACTION, ADVOCACY
OUR JUSTICE							
PO BOX 2105							
MINNEAPOLIS, MN 55402	41-0971333	501(C)(3)	10,000.	0.			TECHNOLOGY AND INNOVATION
OUR MINDS MATTER							
1300 CARPERS FARM WAY							YOUTH DEVELOPMENT AND
VIENNA, VA 22182	45-4313590	501(C)(3)	50,000.	0.			EDUCATION
PARTNERSHIP FOR RESEARCH AND							
EDUCATION - PO BOX 7748 -							CIVIL RIGHTS, SOCIAL
ALBUQUERQUE, NM 87194	82-3753009	501(C)(3)	557,000.	0.			ACTION, ADVOCACY
PEER HEALTH EXCHANGE							
100 WEBSTER STREET							
OAKLAND, CA 94607	56-2374305	501(C)(3)	50,000.	0.			HEALTH
PENNSYLVANIA HEALTH ACCESS NETWORK							
1501 CHERRY STREET							CIVIL RIGHTS, SOCIAL
PHILADELPHIA, PA 19102	47-4876589	501(C)(3)	100,000.	0.			ACTION, ADVOCACY

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Schedule I (Form 990) HOPEWELL FUND  Part II Continuation of Grants and Other		mostic Organizations	and Domestic Co	vornments (Sch	adula I (Form 000) Do		47-3681860 Pag
(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
POLICING EQUITY 1925 CENTURY PARK EAST LOS ANGELES, CA 90067	81-4945849	501(C)(3)	2,500,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
POLICYLINK 1438 WEBSTER STREET OAKLAND, CA 94612	94-3297479	501(C)(3)	10,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
PRETERM CLEVELAND 12000 SHAKER BLVD CLEVELAND, OH 44120	23-7314836	501(C)(3)	50,000.	0.			HEALTH
PRIME COALITION INC 625 MASSACHUSETTS AVENUE CAMBRIDGE, MA 02139	46-4621007	501(C)(3)	150,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
PROGRESSIVE CHANGE INSTITUTE 1629 K ST NW WASHINGTON, DC 20006	46-1193049	501(C)(3)	8,500.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
PROJECT CEAP LLC 1134 COLLINSVILLE CROSSING BLVD COLLINSVILLE, IL 62234	85-3535558		93,525.	0.			HEALTH
PROJECT HOPE ALLIANCE 1954 PLACENTIA AVE COSTA MESA, CA 92627	75-3099628	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT AND EDUCATION
PROMOTE THE VOTE FUND 7420 AZALEA COURT WEST BLOOMFIELD, MI 48322	85-4202848		80,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
PROSPERITY MICHIGAN 3265 SKY BLUE LANE SAULT STE MARIE, MI 49783	84-3158975	501(C)(4)	815,250.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

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 (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable cash grant valuation non-cash assistance or assistance noncash (book, FMV, assistance appraisal, other) PROTEUS FUND INC 15 RESEARCH DRIVE INTERNATIONAL DEVELOPMENT AMHERST, MA 01002 04-3243004 501(C)(3) 125,000 0. AND FOREIGN AFFAIRS PSEPHOS INC 1223 SEOUOIA PLACE CIVIL RIGHTS, SOCIAL DAVIS, CA 95616 26-1589877 501(C)(3) 20,000 0 ACTION, ADVOCACY PUBLIC HEALTH INSTITUTE OF METROPOLITAN CHICAGO - 180 N. MICHIGAN AVENUE - CHICAGO, IL YOUTH DEVELOPMENT AND 60601 36-3959353 501(C)(3) 50,000 0. EDUCATION R4CREATING 6391 ROADRUNNER LOOP NE CIVIL RIGHTS, SOCIAL RIO RANCHO, NM 87144 81-1547684 501(C)(3) 60,000. 0 ACTION, ADVOCACY RECIDIVIZ 1655 PINE LANE CIVIL RIGHTS, SOCIAL 82-5181074 501(C)(3) PROVO, UT 84604 0. ACTION, ADVOCACY 100,000. REGENTS OF THE UNIVERSITY OF CALIFORNIA, SAN FRANCISCO - 3333 CALIFORNIA STREET - SAN FRANCISCO 94-6036493 GOVERNMENT CA 94143 0. TECHNOLOGY AND INNOVATION 10,941, REGENTS OF THE UNIVERSITY OF CALIFORNIA, SANTA BARBARA - 3201 STUDENT AFFAIRS AND ADMINISTRATIVE SERVICES BUILDING - SANTA BARBARA 95-6006145 GOVERNMENT 0. 9 258. TECHNOLOGY AND INNOVATION REINVENT STOCKTON FOUNDATION CIVIL RIGHTS, SOCIAL 110 N SAN JOAQUIN ST STOCKTON, CA 95202 82-1005719 501(C)(3) 175,000. 0. ACTION, ADVOCACY RESPONSIBLE INNOVATION LABS 20910 NE UNION HILL RD 85-3338067 501(C)(3) REDMOND, WA 98053 352 810. 0. TECHNOLOGY AND INNOVATION

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RICHMOND MEDICAL CENTER FOR WOMEN								
118 N ARTHUR ASHE BLVD								
RICHMOND, VA 23220	54-0944108		23,100.	0.			HEALTH	
RIGHTS & DEMOCRACY EDUCATION FUND								
INC - 70 S WINOOSKI AVE -							CIVIL RIGHTS, SOCIAL	
BURLINGTON, VT 05401	47-5375511	501(C)(3)	20,000.	0.			ACTION, ADVOCACY	
DOOM MO DELLE								
ROOM TO READ 465 CALIFORNIA STREET							YOUTH DEVELOPMENT AND	
SAN FRANCISCO, CA 94104	91-2003533	501(C)(3)	175,000.	0.			EDUCATION	
EIM TIMMETERS, CIT 5 I I O I	31 2003333	301(0)(3)	2,5,000.	•				
RURAL ECONOMIC DEVELOPMENT CENTER								
INC - 4021 CARYA DRIVE - RALEIGH,							CIVIL RIGHTS, SOCIAL	
NC 27610	56-1552375	501(C)(3)	102,500.	0.			ACTION, ADVOCACY	
RUTH E ROMO, FNP INC								
210 W LAS CRUCES AVENUE	05 3500500		05.006	_			L	
LAS CRUCES, NM 88005	27-3700700		25,206.	0.			HEALTH	
SANITATION AND HEALTH RIGHTS IN								
INDIA - 48 FAIRWAY OAKS DR - NEW							CIVIL RIGHTS, SOCIAL	
ORLEANS, LA 70131	81-1209372	501(C)(3)	100,000.	0.			ACTION, ADVOCACY	
COLOR ADD COMPANIES MERIODY TWO								
SCHOLARS STRATEGY NETWORK INC 1035 CAMBRIDGE ST							CIVIL RIGHTS, SOCIAL	
CAMBRIDGE, MA 02141	27-0480740	501/C\/3\	33,836.	0.			ACTION, ADVOCACY	
CAMBRIDGE, MA 02141	27 0400740	301(0)(3)	33,030.	· ·			ACTION, ADVOCACT	
SCIENCECOUNTS INC								
1735 20TH STREET NW								
WASHINGTON, DC 20009	46-4747662	501(C)(3)	187,500.	0.			TECHNOLOGY AND INNOVATIO	
SIRUM								
3000 EL CAMINO REAL							CIVIL RIGHTS, SOCIAL	
PALO ALTO, CA 94306	27-1103057	501(C)(3)	1,200,000.	0.			ACTION, ADVOCACY	

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(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE JED FOUNDATION							
6 EAST 39TH ST							
NEW YORK, NY 10016	13-4131139	501(C)(3)	200,000.	0.			HEALTH
THE MCLEAN HOSPITAL CORPORATION							
BELMONT, MA 02478	04-2697981	501(C)(3)	100,000.	0.			HEALTH
THE MIAMI FOUNDATION 40 NW 3RD STREET MIAMI, FL 33128	65-0350357	501(C)(3)	250,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
THE MICHELSON FOUND ANIMALS FOUNDATION INC - PO BOX 1593 - CULVER CITY, CA 90232	20-3944602	501(C)(3)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
THE NETWORK GROUP INC 1100 WILSON BOULEVARD ARLINGTON, VA 22209	36-4961199	501(C)(3)	14,103.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
THE PENNSYLVANIA STATE UNIVERSITY PO BOX 850 MAIL CODE A470 HERSHEY, PA 17033	24-6000376	GOVERNMENT	50,000.	0.			YOUTH DEVELOPMENT AND EDUCATION
THE REGENTS UNIVERSITY OF CALIFORNIA LOS ANGELES - 10920 WILSHIRE BLVD - LOS ANGELES, CA 90024	95-6006143	GOVERNMENT	446,424.	0.			HEALTH
THE VIRGINIA CIVIC ENGAGEMENT TABLE - PO BOX 682 - RICHMOND, VA 23218	47-5354509	501(C)(3)	40,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
THE VOTER PROJECT FUND PO BOX 22611 PHILADELPHIA, PA 19110	86-3082391	501(C)(3)	120,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

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TULSA COMMUNITY FOUNDATION							
7030 S YALE							CIVIL RIGHTS, SOCIAL
TULSA, OK 74136	73-1554474	501(C)(3)	12,500.	0.			ACTION, ADVOCACY
UNION OF CONCERNED SCIENTISTS							
2 BRATTLE SQUARE							CIVIL RIGHTS, SOCIAL
CAMBRIDGE, MA 02138	04-2535767	501(C)(3)	500,000.	0.			ACTION, ADVOCACY
UNITE HERE LOCAL 355							
152 NW 89TH STREET							CIVIL RIGHTS, SOCIAL
EL PORTAL, FL 33138	13-3819434	501(C)(5)	20,000.	0.			ACTION, ADVOCACY
UNITED STATES OF CARE							
110 VERMONT AVE NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20005	82-2860302	501(C)(3)	149,254.	0.			ACTION, ADVOCACY
UNIVERSITY OF MARYLAND BALTIMORE							
COUNTY - 1000 HILLTOP CIRCLE -							
BALTIMORE, MD 21250	52-6002033	GOVERNMENT	19,160.	0.			TECHNOLOGY AND INNOVATI
UNIVERSITY OF MASSACHUSETTS							
WORCESTER - 55 LAKE AVE NORTH -							
WORCESTER, MA 01655	04-3167352	GOVERNMENT	120,000.	0.			HEALTH
UNIVERSITY OF WASHINGTON							
FOUNDATION - 1410 NE CAMPUS							CIVIL RIGHTS, SOCIAL
PARKWAY - SEATTLE, WA 98195	94-3079432	501(C)(3)	1,666,667.	0.			ACTION, ADVOCACY
UPSTREAM POLICY INSTITUTE INC							
PO BOX 1352							CIVIL RIGHTS, SOCIAL
DAMARISCOTTA, ME 04543	43-2038678	501(C)(3)	80,000.	0.			ACTION, ADVOCACY
URGE UNITE FOR REPRODUCTIVE AND							
GENDER EQUITY - 734 15TH STREET -							
WASHINGTON, DC 20005	52-1772575	501(C)(3)	5,025.	0.			TECHNOLOGY AND INNOVAT

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VALUES UNITED							
1250 CONNECTICUT AVE NW							
WASHINGTON, DC 20036	26-4716045	501(C)(3)	50,000.	0.			HEALTH
VIRGINIA INTERFAITH CENTER FOR							OTTET DEGIME COCTAT
PUBLIC POLICY - 1716 E FRANKLIN ST	E4 13630E7	E01/G)/3)	46 000	0.			CIVIL RIGHTS, SOCIAL
- RICHMOND, VA 23223	54-1362857	501(C)(3)	46,000.	0.			ACTION, ADVOCACY
VIRGINIA ORGANIZING							
703 CONCORD AVE							CIVIL RIGHTS, SOCIAL
CHARLOTTESVILLE, VA 22903	54-1674992	501(C)(3)	50,000.	0.			ACTION, ADVOCACY
VIRGINIA POVERTY LAW CENTER							
919 E. MAIN STREET							CIVIL RIGHTS, SOCIAL
RICHMOND, VA 23219	54-1093402	501(C)(3)	96,000.	0.			ACTION, ADVOCACY
VIRGINIA21							
1108 E MAIN ST							CIVIL RIGHTS, SOCIAL
RICHMOND, VA 23219	20-3426160	501(C)(3)	46,000.	0.			ACTION, ADVOCACY
MICHIGAD, VII 20213	20 3120100	301(0)(3)	10,000.	<u> </u>			nerron, invester
VOICES FOR VIRGINIA'S CHILDREN							
1606 SANTA ROSA ROAD							CIVIL RIGHTS, SOCIAL
HENRICO, VA 23229	54-1726265	501(C)(3)	25,000.	0.			ACTION, ADVOCACY
MOME EODIAND							
VOTE FORWARD							CTVII DICUMO COCTA
700 13TH ST NW STE 600	04 2427217	E01/G\/A\	705 013	_			CIVIL RIGHTS, SOCIAL
WASHINGTON DC, DC 20005	84-2427217	DUI(C)(4)	795,913.	0.			ACTION, ADVOCACY
WASHINGTON STATE BUDGET AND POLICY							
CENTER - 1402 3RD AVE, STE 1215 -							CIVIL RIGHTS, SOCIAL
SEATTLE, WA 98101	72-1612982	501(C)(3)	30,000.	0.			ACTION, ADVOCACY
·							
WE AMPLIFY VOICES							
3221 SAYBROOK CT							YOUTH DEVELOPMENT AND
DUBLIN, OH 43017	27-4261320	501(C)(3)	50,000.	0.			EDUCATION

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WE ARE DOWN HOME PO BOX 10671							CIVIL RIGHTS, SOCIAL
GREENSBORO, NC 27404	83-1247155	501(C)(3)	25,000.	0.			ACTION, ADVOCACY
WEST VIRGINIA CENTER ON BUDGET AND POLICY - 8 CAPITOL STREET - CHARLESTON, WV 25301	56-2653132	501(C)(3)	25,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MANUESTON, WV 25501	30 2033132	301(0)(3)	23,000.	0.			ACTION, ADVOCACT
WESTERN RESOURCE ADVOCATES  2260 BASELINE RD  BOULDER, CO 80302	84-1113831	501(C)(3)	100,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
WHITNEYSTRONG INC							CIVIL RIGHTS, SOCIAL
LOUISVILLE, KY 40204	83-1941981	501(C)(3)	25,000.	0.			ACTION, ADVOCACY
WHOLE WOMAN'S HEALTH ALLIANCE INC							
CHARLOTTESVILLE, VA 22902	46-5318393	501(C)(3)	118,422.	0.			HEALTH
WHOLE WOMAN'S HEALTH OF BALTIMORE	00 2555024		40.005				
CHARLOTTESVILLE, VA 22902	20-3757231		40,007.	0.			HEALTH
WHOLE WOMAN'S HEALTH OF FORT WORTH							
CHARLOTTESVILLE, VA 29902	27-0822899		681,200.	0.			HEALTH
THOLE WOMAN'S HEALTH OF MCALLEN							
CHARLOTTESVILLE, VA 29902	20-0627497		148,032.	0.			HEALTH
WILDCOAST							
925 SEACOAST DRIVE IMPERIAL BEACH, CA 91932	77-0536297	501(C)(3)	30,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

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WISCONSIN DEMOCRACY CAMPAIGN							
203 S PATERSON STREET							CIVIL RIGHTS, SOCIAL
MADISON, WI 53703	39-1911104	501(C)(3)	40,000.	0.			ACTION, ADVOCACY
WOMEN WITH A VISION INC							
1226 N BROAD ST							
NEW ORLEANS, LA 70119	72-1202185	501(C)(3)	9,592.	0.			TECHNOLOGY AND INNOVATIO
WOMEN'S HEALTH CENTER OF WEST							
VIRGINIA - 510 WASHINGTON ST W -							
CHARLESTON, WV 25302	55-0559874	501(C)(3)	67,536.	0.			HEALTH
WOMEN'S MARCH NETWORK							
400 JAY STREET							
BROOKLYN, NY 11201	86-3322891	501(C)(3)	300,000.	0.			HEALTH
YALE UNIVERSITY							
157 CHURCH ST NEW HAVEN, CT 06510	06-0646973	E01/G)/3\	100,000.	0.			   HEALTH
NEW HAVEN, CT 00510	00-00409/3	501(C)(3)	100,000.	0.			REALTH
YOUNG INVINCIBLES							
1725 DESALES STREET NW							YOUTH DEVELOPMENT AND
WASHINGTON, DC 20036	46-2214021	501(C)(3)	50,000.	0.			EDUCATION
YOUTH GUIDANCE							
1 N LASALLE STREET							YOUTH DEVELOPMENT AND
CHICAGO, IL 60602	36-2167032	501(C)(3)	50,000.	0.			EDUCATION
YOUTH PASSAGEWAYS							
PO BOX 46631							
KANSAS CITY, MO 64188	47-4750095	501(C)(3)	50,000.	0.			HEALTH
			1				

HOPEWELL FUND 47-3681860 Schedule I (Form 990) 2021 Page 2 Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III Part III can be duplicated if additional space is needed. (e) Method of valuation (book, FMV, appraisal, other) (a) Type of grant or assistance (b) Number of (c) Amount of (d) Amount of non-(f) Description of noncash assistance recipients cash grant cash assistance 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 ORGANIZATION GENERALLY REQUIRES A WRITTEN PROPOSAL DESCRIBING HOW THE GRANT FUNDS WILL BE USED. AND A PRE-GRANT INQUIRY IS THEN CONDUCTED TO EVALUATE THE GRANTEE. ALL GRANTS ARE SUBJECT TO A WRITTEN GRANT AGREEMENT THAT IMPOSES REPORTING OBLIGATIONS. REQUIRES FUNDS BE USED SOLELY AS SPECIFIED IN THE PROPOSAL. AND REQUIRES THAT FUNDS BE RETURNED IF NOT SPENT APPROPRIATELY OR IF REPORTS ARE NOT FILED AS REQUIRED.

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### SCHEDULE J (Form 990)

**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.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

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

HOPEWELL FUND Employer identification number 47-3681860

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  X Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  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:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		Х
	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:			
а	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7	Х	_
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		1

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

Schedule J (Form 990) 2021

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

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

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

		(B) Breakdown of W	I-2 and/or 1099-MISO compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) COURTNEY CUFF	(i)	268,450.	0.	819.	21,608.	12,034.	302,911.	0.
PROJECT DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) PETER RUBIN	(i)	226,224.	0.	0.	7,019.	14,793.	248,036.	0.
PROJECT DIRECTOR	(ii)	0.	0.	0.	0.	0.	0,	0,
(3) BONNIE JONES	(i)	230,230.	0.	0.	6,907.	8,766.	245,903.	0,
PROJECT DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) MEAGAN CAVANAUGH	(i)	218,390.	1,500.	683.	6,617.	9,176.	236,366.	0,
PROJECT DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) JANET CREPPS HILLER	(i)	213,624.	1,500.	0.	6,454.	6,677.	228,255.	0.
PROJECT DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2021 HOPEWELL FUND	47-3681860	Page 3
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 descriptions required for Part II.	complete this part for any additional information	ation.
PART I, LINE 1A:		
THE ORGANIZATION PROVIDES \$75 PER MONTH FOR FITNESS RELATED COSTS, WHICH		
MAY INCLUDE CLUB FEES. THE AMOUNTS WERE CONSIDERED TAXABLE COMPENSATION TO		
THE EMPLOYEES.		
PART I, LINE 3:		
HOPEWELL FUND DOES NOT HAVE A CEO/EXECUTIVE DIRECTOR.		
PART I, LINE 7:		
THE ORGANIZATION PROVIDED BONUSES TO CERTAIN EMPLOYEES, WHICH WOULD BE		
CONSIDERED A "NON-FIXED PAYMENT". BONUSES PAID BY THE ORGANIZATION ARE (IN		
GENERAL) NOT SPECIFIED BY A FIXED FORMULA IN EMPLOYMENT CONTRACTS AND		
DETERMINED (IN PART) WITH DISCRETION IN DETERMINING THE AMOUNT OF BONUS OR		
WHETHER TO MAKE A BONUS PAYMENT.		

### **SCHEDULE M** (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

Name of the organization Employer identification number HOPEWELL FUND 47-3681860

Par	t I	Types	of Property								
				(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contri amounts repor Form 990, Part VI	ted on	(d) Method of de noncash contribu		_	3
1	Art -	Works of a	art			,	, ,				
2			treasures								
3			interests								
4			lications								
5			ousehold goods								
6			vehicles								
7			es								
8			perty								
9			olicly traded	Х	37	17.1	77.954.	FMV AT TIME OF DO	ONATIO	ON	
10			sely held stock			,	, -				
11			tnership, LLC, or								
••		interests	thorsing, ELO, or								
12			cellaneous								
13			ervation contribution -								
.0		oric structu									
14			res ervation contribution - Other								
15			***								
16	Real estate - Residential  Real estate - Commercial										
17	Real estate - Other										
18											
19											
20			lical supplies								
21											
22			cts								
23			mens								
24			artifacts								
25		er 🕨 (	ı tıracıs								
26		er 🕨 (	)								
27		er 🕨 (									
28		er 🕨 (									
<u>20</u> 29			ms 8283 received by the organia	zation during	the tax year for co	ontributions					
			rganization completed Form 82		•		29			0	
	101 1		iganization completed i cim ez	50, r a, r v, D	onee / tertine wie ag					Yes	Nο
30a	Durii	ng the vear	r, did the organization receive by	/ contributio	n any property rep	orted in Part I line	s 1 throug	h 28 that it		100	110
			t least three years from the date								
			es for the entire holding period?						30a		Х
h			be the arrangement in Part II.			•••••			554		
31	·								31	х	
		•	nization hire or use third parties	•	•	•					
		ributions?	nzadori ini e er dee a ini a partice i		•				32a		Х
b			be in Part II.						324		
33			ion didn't report an amount in c	olumn (c) foi	a type of property	for which column	(a) is chec	ked.			
		ribe in Par			-71 P. P. SP 5113		, .,	- ··•			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2021

132142 11-17-21 Schedule M (Form 990) 2021

### **SCHEDULE 0** (Form 990)

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 the latest information. OMB No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

HOPEWELL FUND

**Employer identification number** 47-3681860

PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: INNOVATIVE SOCIAL CHANGE PROJECTS, PRIMARILY THROUGH FISCAL HOPEWELL IS DESIGNED TO FACILITATE RAPID AND EFFICIENT LAUNCHES OF WELL-RESOURCED PROJECTS WITH DIVERSE REVENUE & FUNDING MODELS INCLUDING CHARITABLE CONTRIBUTIONS AND INVESTMENTS. MANY OF HOPEWELL'S PROJECTS EMPLOY BOLD AND AMBITIOUS STRATEGIES TO ACHIEVE THE HOPEWELL IS MANAGED BY A BOARD OF DIRECTORS WITH IMPACT THEY SEEK. EXPERIENCE IN STARTING UP INNOVATIVE ORGANIZATIONS FORM 990, PART VI, SECTION A, LINE 3: HOPEWELL FUND CONTRACTED WITH ARABELLA ADVISORS, A PROFESSIONAL SERVICES FIRM THAT SUPPORTS PHILANTHROPISTS, IMPACT INVESTORS, AND NONPROFIT ORGANIZATIONS. TO PROVIDE BUSINESS AND ADMINISTRATIVE SERVICES UNDER AN ADMINISTRATIVE AGREEMENT. IN THAT CAPACITY, ARABELLA SUPPLIES THE SYSTEMS AND SERVICES TO ENSURE COMPLIANCE WITH FEDERAL. STATE AND LOCAL REGULATIONS RELATED TO CHARITABLE SOLICITATION AND PROVIDES HR. LEGAL PAYROLL, AND OTHER ADMINISTRATIVE FUNCTIONS FOR HOPEWELL, THEREBY ENABLING HOPEWELL TO BETTER FURTHER ITS MISSION AND ACHIEVE IMPACT, FORM 990, PART VI, SECTION B, LINE 11B: THE FORM 990 IS PREPARED BY AN INDEPENDENT TAX ACCOUNTANT AND REVIEWED BY THE ORGANIZATION'S LEGAL COUNSEL AND BOARD OF DIRECTORS PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE. FORM 990, PART VI, SECTION B, LINE 12C: ALL BOARD MEMBERS ARE REQUIRED TO DISCLOSE CONFLICTS OF INTEREST. THE

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

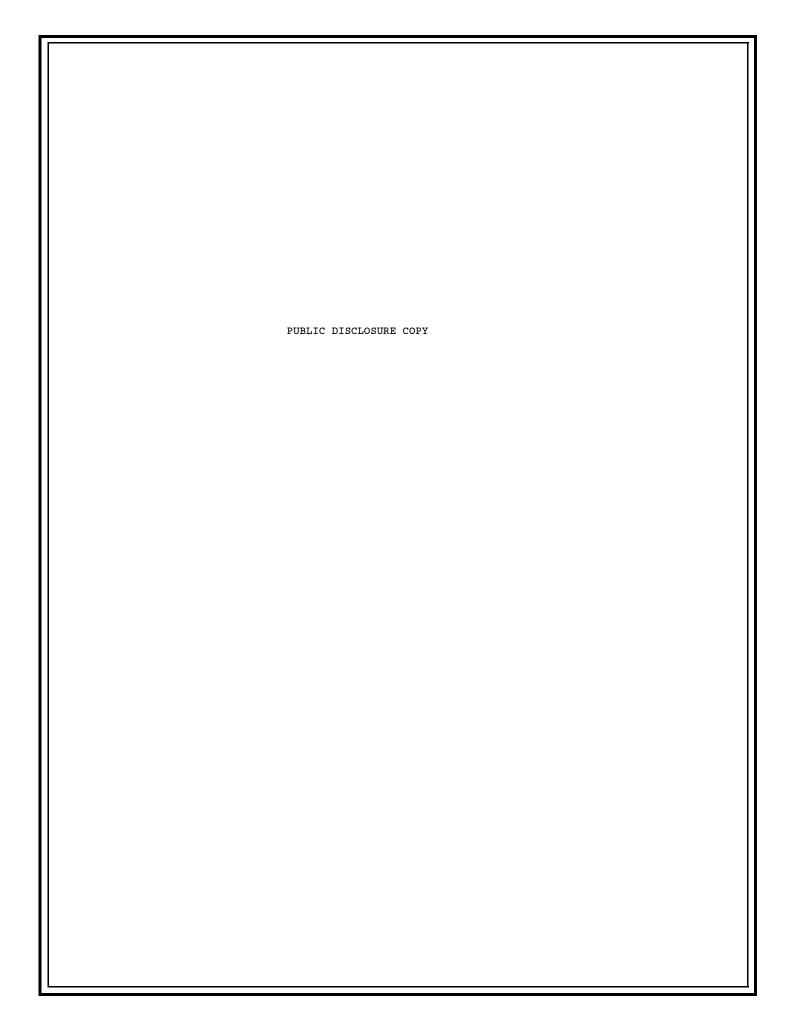
Schedule O (Form 990) 2021

<u>Schedule O (Form 990) 2021</u> Page **2** 

**Employer identification number** Name of the organization HOPEWELL FUND 47-3681860 POLICY IS MONITORED AT THE BOARD LEVEL. COVERED INDIVIDUALS CANNOT VOTE ON MATTERS BEFORE THE BOARD WHEN THEY HAVE A CONFLICT IN THE MATTER. DISINTERESTED MEMBERS MUST DETERMINE WHETHER OR NOT THERE ARE ANY SUITABLE ALTERNATIVES TO POTENTIAL TRANSACTIONS THAT CAUSE CONFLICT. IF A COVERED PERSON IS FOUND IN VIOLATION OF THIS POLICY, IT MAY BE CAUSE FOR REMOVAL FROM THE BOARD OF DIRECTORS. FORM 990, PART VI, SECTION B, LINE 15: THE ORGANIZATION DID NOT DIRECTLY COMPENSATE ANY OFFICERS OR KEY EMPLOYEES. ACCORDINGLY, FORM 990, PART VI, SECTION B, LINES 15A AND 15B HAVE BEEN MARKED "NO", AS PROVIDED IN THE FORM 990 INSTRUCTIONS. FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL, AR, CA, CT, FL, GA, HI, IL, KS, KY, MA, MD, MI, MN, MS, NH, NJ, NY, NC, ND, OK, OR, PA, RI, SC TN, UT, VA, WI, WV FORM 990, PART VI, SECTION C, LINE 19: HOPEWELL MAKES ITS FORM 1023, APPLICATION FOR RECOGNITION OF EXEMPTION, AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST. THOSE MATERIALS INCLUDE HOPEWELL'S INITIAL GOVERNING DOCUMENTS. CONFLICT OF INTEREST POLICY. AND OTHER POLICIES. HOPEWELL DOES NOT MAKE FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC. FORM 990, PART IX, LINE 11G, OTHER FEES: CONSULTANTS - PROJECT MANAGEMENT: PROGRAM SERVICE EXPENSES 8,422,963. MANAGEMENT AND GENERAL EXPENSES 19,203. FUNDRAISING EXPENSES 0.

Schedule O (Form 990) 2021 Page 2

Schedule O (Form 990) 2021		Page
Name of the organization  HOPEWELL FUND		Employer identification number 47-3681860
TOTAL EXPENSES	8,442,166.	
CONSULTANTS - RESEARCH AND EVALUATION:		
PROGRAM SERVICE EXPENSES	3,157,608.	
MANAGEMENT AND GENERAL EXPENSES	0.	
FUNDRAISING EXPENSES	0.	
TOTAL EXPENSES	3,157,608.	
CONSULTANTS - COMMUNICATIONS:		
PROGRAM SERVICE EXPENSES	2,512,726.	
MANAGEMENT AND GENERAL EXPENSES	51,217.	
FUNDRAISING EXPENSES	0.	
TOTAL EXPENSES	2,563,943.	
OTHER PROFESSIONAL FEES/CONSULTANTS:		
PROGRAM SERVICE EXPENSES	142,699.	
MANAGEMENT AND GENERAL EXPENSES	3,000.	
FUNDRAISING EXPENSES	33,170.	
TOTAL EXPENSES	178,869.	
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A		
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:		
RETURN OF PRIOR YEAR GRANT EXPENSE	1,004,788.	
REVERSAL OF PRIOR YEAR CONTRIBUTION/PLEDGE REVENUE		



### Form **990**

# \*\* PUBLIC DISCLOSURE COPY \*\* Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

2022

Open to Public

Department of the Treasury Internal Revenue Service

Α	For the	e 2022 calendar year, or tax year beginning	and	l ending	_					
	Check if applicabl	C Name of organization			D Emp	ployer iden	tifica	tion number		
Г	Addre	ss HOPEWELL FUND								
F	Name	- · · ·			1	47-36818	60			
F	Initial return	Number and street (or P.O. box if mail is not del	livered to street address)	Room/suite	E Telephone number					
F	Final	1828 L. STREET NW		300-D		202) 664-		<b>;</b>		
	termin ated		ZIP or foreign postal code	•	<b>G</b> Gross receipts \$ 200,327,802					
	Amen		<b>5</b> 1		<b>H(a)</b> Is	this a grou	p retu	ırn		
	Application	F Name and address of principal officer: """	BODNER		fo	r subordina	tes?	Yes X No		
	pendi	SAME AS C ABOVE			H(b) Are	e all subordinat	es inclu	ded? Yes No		
1	Tax-ex	empt status: X 501(c)(3) 501(c) (	(insert no.) 4947(a)(1)	or 527	lf	"No," attac	h a lis	t. See instructions		
J	Websi	te: WWW.HOPEWELLFUND.ORG			<b>H(c)</b> G	roup exemp	otion r	number		
K	Form of	organization: X Corporation Trust As	sociation Other	<b>L</b> Year	of formati	on: 2015	M S	State of legal domicile: DC		
P	art I	Summary								
4	1	Briefly describe the organization's mission or most	significant activities: THE HO	PEWELL FU	JND HEL	PS SOCIA	L			
Governance		ENTREPRENEURS AND OTHER CHANGEMAKERS 1	LAUNCH NEW, (CONT. SCH	EDULE O)						
rna	2	Check this box if the organization discor	ntinued its operations or dispo	sed of more	than 259	% of its net	asset	S.		
o ve	3	Number of voting members of the governing body	(Part VI, line 1a)				3	4		
ه 9	1 .	Number of independent voting members of the gov					4	4		
es 2	5	Total number of individuals employed in calendar y					5	139		
Activities	6	Total number of volunteers (estimate if necessary)					6	82		
Act	7 a	Total unrelated business revenue from Part VIII, col					7a	0.		
_	b	Net unrelated business taxable income from Form	990-T, Part I, line 11	·····			7b	0.		
						r Year	+	Current Year		
ē	8				12	2,592,89	_	174,820,725.		
Jen 1	9					256,99	_	790,032.		
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4,			125,20	-	1,866,642.			
	יין	Other revenue (Part VIII, column (A), lines 5, 6d, 8c,		1.0	410,84	_	620,522.			
_		Total revenue - add lines 8 through 11 (must equal					-	178,097,921.		
	1	Grants and similar amounts paid (Part IX, column (				5,385,98	0.	89,873,264.		
	1	Benefits paid to or for members (Part IX, column (A			14,204,396.			15,198,379.		
ses	15	Salaries, other compensation, employee benefits (F		9,000.			336,600.			
Expenses	loa	Professional fundraising fees (Part IX, column (A), li		114.		3,00	•	330,000.		
ă	17	Total fundraising expenses (Part IX, column (D), line Other expenses (Part IX, column (A), lines 11a-11d,		_	42,453,932.			51,907,771.		
	1	Total expenses. Add lines 13-17 (must equal Part I)			122,053,314.			157,316,014.		
	1	Revenue less expenses. Subtract line 18 from line				1,332,62		20,781,907.		
	3	Treveride 1656 experioes. Subtract line 16 from line	12	Ве		f Current Ye		End of Year		
ets (	20	Total assets (Part X, line 16)				9,581,62	_	176,857,021.		
Net Assets or	21	Tatal liabilities (Dart V. line OC)				9,232,79	_	24,799,301.		
Net .	22	Net assets or fund balances. Subtract line 21 from				0,348,83	_	152,057,720.		
P	art II	Signature Block		•			•			
Unc	ler pena	Ities of perjury, I declare that I have examined this return,	including accompanying schedule	s and statem	ents, and t	to the best of	my kr	nowledge and belief, it is		
true	, correc	t, and complete. Declaration of preparer (other than office	er) is based on all information of w	hich preparer	has any k	nowledge.				
Sig	n		Signature of officer Date							
He	re	LEE BODNER, BOARD CHAIR	E BODNER, BOARD CHAIR							
		Type or print name and title								
		Print/Type preparer's name	Preparer's signature		Date	Check if		] PTIN		
Pai			MICHAEL LUMSDEN	1	1/07/23	3 self-er	mployed	P01262236		
	parer	Firm's name MOSS ADAMS LLP				Firm's EIN	91	-0189318		
Use	Only	Firm's address 101 SECOND STREET SUITE S	900					56.4506		
_		SAN FRANCISCO, CA 94105				Phone no.4	115-9			
Ma	v the II	RS discuss this return with the preparer shown about	ve? See instructions					X Yes No		

Page 2 HOPEWELL FUND 47-3681860 Form 990 (2022)

Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	Х
1	Briefly describe the organization's mission:	
	THE HOPEWELL FUND IS A 501(C)(3) NONPROFIT THAT USES FISCAL	
	SPONSORSHIP AND CHARITABLE GRANT-MAKING TO SUPPORT DOMESTIC AND	
	INTERNATIONAL INITIATIVES AIMED AT ADVANCING PUBLIC GOOD AND ACHIEVING	
	EQUITY FOR ALL PEOPLE.	
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 e	xpenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total exp	penses, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 114,553,597. including grants of \$ 70,486,948. ) (Revenue \$	266,155.
	CIVIL RIGHTS, SOCIAL ACTION, AND ADVOCACY: HOPEWELL'S PORTFOLIO OF	
	CIVIL RIGHTS, SOCIAL ACTION, AND ADVOCACY FOCUS AREAS INCLUDE	
	ADDRESSING INCOME INEQUALITY, IMPROVING CIVIC ENGAGEMENT AMONG	
	TRADITIONALLY UNDERREPRESENTED GROUPS, AND ADVANCING STATE LEVEL	
	ECONOMIC AND DEMOCRACY REFORMS.	
4b	(Code: ) (Expenses \$ 24,735,186. including grants of \$ 15,482,222. ) (Revenue \$	11,967.)
	HEALTH: HOPEWELL'S PORTFOLIO OF HEALTH FOCUS AREAS INCLUDES WOMEN'S	,
	HEALTH, HEALTHCARE ACCESS, AND REDUCING HEALTH DISPARITIES AND	
	AVOIDABLE INFANT MORTALITY.	
4c	(Code:) (Expenses \$ 4 , 307 , 698 . including grants of \$ 1 , 204 , 504 . ) (Revenue \$	104,263.)
	TECHNOLOGY AND INNOVATION: HOPEWELL'S PORTFOLIO OF TECHNOLOGY AND	
	INNOVATION AREAS INCLUDE EMPOWERING ORGANIZATIONS TO FOCUS ON THEIR	
	MISSIONS EFFECTIVELY THROUGH THE USE OF TECHNOLOGY, IMPROVING	
	CYBERSECURITY AND UPDATING TECHNOLOGY HARDWARE.	
		_
		_
4d	Other program services (Describe on Schedule O.)	
<del>1</del> u		. )
4e	(Expenses \$ 5,680,121. including grants of \$ 2,699,589.) (Revenue \$ 407,647 Total program service expenses 149,276,602.	- /
<del>-10</del>	Total program del vide expended	Form <b>990</b> (2022)
		(2022)

47-3681860 Page 3

# Form 990 (2022) HOPEWELL FUND Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
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		х
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	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
_	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
·	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	х	
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		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			<del></del>
0	, ,	8		x
•	Schedule D, Part III	-		<del></del>
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?			x
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
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	Х	
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	Х	
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		х
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	х	
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		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		х
	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			$\vdash$
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
	Government on the transposition (1) in the transposition of the transpos			1

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Form 990 (2022) HOPEWELL FUND

Part IV Checklist of Required Schedules (continued) HOPEWELL FUND 47-3681860 Page 4

	· · · ·		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		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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		Х
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		Х
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		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			17
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	28c		х
29	"Yes," complete Schedule L, Part IV	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		
00	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete	<u> </u>		
	Schedule N, Part II	32		Х
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		Х
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		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
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		
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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			Х
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	38	х	
Pai	Note: All Form 990 filers are required to complete Schedule O  To V Statements Regarding Other IRS Filings and Tax Compliance	30		
	Check if Schedule O contains a response or note to any line in this Part V			
	1 1		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		v	
	(gambling) winnings to prize winners?	1c	Х	1

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orm 990	(2022)	FUND	= :	7-3681860	Pa	age
Part V	Statements Regarding	Other IRS Filings and Tax Compliance	(continued)			
			•			

			Yes	No
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	iled for the calendar year ending with or within the year covered by this return	-		
	f at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	f "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	١.		v
	inancial account in a foreign country (such as a bank account, securities account, or other financial account)?	<u>4a</u>		Х
	f "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).			Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c		
	f "Yes" to line 5a or 5b, did the organization file Form 8886-T?	30		
		6a		х
	any contributions that were not tax deductible as charitable contributions?  f "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Ua		
	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	OD		
	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	х	
	f "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	"5		
	to file Form 8282?	7c		х
	f "Yes," indicate the number of Forms 8282 filed during the year	70		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
	f the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
-	f the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
5	sponsoring organization have excess business holdings at any time during the year?	8		Х
9 9	Sponsoring organizations maintaining donor advised funds.			
a [	Did the sponsoring organization make any taxable distributions under section 4966?	9a		Х
<b>b</b> [	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		Х
10 5	Section 501(c)(7) organizations. Enter:			
a I	nitiation fees and capital contributions included on Part VIII, line 12			
b (	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11 5	Section 501(c)(12) organizations. Enter:			
а (	Gross income from members or shareholders 11a			
	Gross income from other sources. (Do not net amounts due or paid to other sources against			
8	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	f "Yes," enter the amount of tax-exempt interest received or accrued during the year	-		
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	s the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
	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	-		
	Enter the amount of reserves on hand	44-		Х
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
	f "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
		15		х
	excess parachute payment(s) during the year? f "Yes," see the instructions and file Form 4720, Schedule N.	13		
	s the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	•	10		
	f "Yes." complete Form 4720. Schedule O.			
17 9	f "Yes," complete Form 4720, Schedule O.  Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	f "Yes," complete Form 4720, Schedule O.  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?	17		

Form 990 (2022) HOPEWELL FUND 47-3681860 Page **6** 

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.

	to line ed, et, or rep select, describe the direction of proceeded, or child get on consider e. eee metadote.			
<u> </u>	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management		1	Г
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	4		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent	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		Х
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?	3	Х	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
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		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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	9		Х
Sec	tion 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		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
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	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?			
а	The organization's CEO, Executive Director, or top management official	15a		х
	Other officers or key employees of the organization	15b		х
-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	10.0		
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		х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	100		
D	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		
Sec	tion C. Disclosure	100	l .	
	List the states with which a copy of this Form 990 is required to be filedAL,AR,CA,CT,FL,GA,HI,IL,KS,KY,MA,MD			
17 10		le oply	availal	hlo.
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	is Utily)	avalläl	UI <del>C</del>
	for public inspection. Indicate how you made these available. Check all that apply.			
40	X Own website Another's website X Upon request Other (explain on Schedule O)	.1.6.		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, are	d tinan	cial	
~~	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			
	ARABELLA ADVISORS, LLC - (202) 595-1020  1828 L STREET NW, SUITE 300, WASHINGTON, DC 20036			
	TOZO II DINIBI NW, DOLIE JUO, WADHINGION, DC ZUUJU			

Form **990** (2022)

2022.05000 HOPEWELL FUND

Form 990 (2022) HOPEWELL FUND 47-3681860 Page **7** 

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the organization no	or any related o	organization compensate	ed any current officer, d	irector, or trustee.

(A) Name and title	(B) Average hours per	box	not c , unle:	Pos heck ss per	rson i	than o	an	( <b>D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer	Key employee	Highest compensated that I was a seminary and the seminar		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) COURTNEY CUFF PROJECT DIRECTOR	31.00					x		226 417	0	22.020
(2) BONNIE JONES	40.00					Α		236,417.	0.	32,038.
PROJECT DIRECTOR	40.00	1				x		233,250.	0.	31,937.
(3) MEAGAN CAVANAUGH	40.00							255,250.	· ·	31,337.
PROJECT DIRECTOR	40.00	1				x		228,241.	0.	31,637.
(4) JANET CREPPS HILLER	40.00								- •	
PROJECT DIRECTOR		1				x		222,201.	0.	31,917.
(5) MELANIE GELLING ZUREK	40.00							,		,
PROJECT DIRECTOR		1				х		212,745.	0.	32,297.
(6) ANDREW SCHULZ	3.00									
GENERAL COUNSEL				х				27,975.	0.	0.
(7) LEE BODNER	1.00									
BOARD CHAIR		Х		Х				0.	0.	0.
(8) MICHAEL SLABY	1.00									
SECRETARY & TREASURER		Х		Х				0.	0.	0.
(9) LORI CHATMAN	1.00	1								
DIRECTOR		Х						0.	0.	0.
(10) CHERYL CONTEE	1.00									
DIRECTOR		Х						0.	0.	0.
										Form <b>990</b> (2022)

HOPEWELL FUND 47-3681860 Form 990 (2022)

hours per week (list any hours for related related to the companies of the	prtable Report compen from re organization (W-2/1098)	table Estimated amount of other ations compensation
Name and title  Average hours per week (list any)  Average hours per week (list any)  Average hours per week (list any)  Position (do not check more than one box, unless person is both an officer and a director/trustee)  from the properties of the position (do not check more than one box, unless person is both an officer and a director/trustee)  the position (do not check more than one box, unless person is both an officer and a director/trustee)  the position (do not check more than one box, unless person is both an officer and a director/trustee)  the position (do not check more than one box, unless person is both an officer and a director/trustee)  the position (do not check more than one box, unless person is both an officer and a director/trustee)  the position (do not check more than one box, unless person is both an officer and a director/trustee)	ortable Report ensation compen om from re the organization (W-2/1098	table Estimated amount of elated other ations compensation
hours per week (list any services of the servi	ensation compen om from re the organization (W-2/1098	nsation amount of elated other ations compensation
Nours per week (list any light of the light	om from re he organization (W-2/1098	elated other ations compensation
(list any	ne organization (W-2/1099	ations compensation
(list any   Jopa     the hours for   Jopa   list   hours for   Jopa   list   hours for   Jopa   hours for   hours for   Jopa   hours for   hours for   hours for   Jopa   hours for	ization (W-2/1099	I :
hours for   ja   pa   organi   related   oa   ast   ast   ba   was   was	_ ·	
related   3   45     2     (W-2/109   0   1099		l l
organizations  글   늪   및   늗   1099-		,
	-NEC)	and related
organizations below love long the long the long love long long love long long long long long long long long		organizations
line) Individual Indiv		
		<del> </del>
1b Subtotal 1,	,160,829.	0. 159,826.
c Total from continuation sheets to Part VII, Section A	0.	0. 0.
	,160,829.	0. 159,826.
2 Total number of individuals (including but not limited to those listed above) who received more	, = , - =	· · · · · · · · · · · · · · · · · · ·

compensation from the organization

59

			162	INO
3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3_		Х
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	Х	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services			
	rendered to the organization?  f "Yes." complete Schedule J for such person	5		Х
_				

#### Section B. Independent Contractors

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
	Description of services	
ELIAS LAW GROUP LLP, 10 G STREET NE SUITE		
600, WASHINGTON, DC 20002	LEGAL SERVICES	16,401,214.
ARABELLA ADVISORS, 1828 L STREET NW SUITE	ADMIN. & OPERATIONAL SUPPORT	
300, WASHINGTON, DC 20036	SERVICES	7,379,645.
THE MOVEMENT COOPERATIVE, 1025 CONNECTICUT		
AVE NW SUITE 1000, WASHINGTON, DC 20036	CONSULTING SERVICES	2,873,344.
PERKINS COIE LLP		
P.O. BOX 24643, SEATTLE, WA 98124	LEGAL SERVICES	1,740,141.
INCITE STUDIO LLC		
369 BERGEN STREET, BROOKLYN, NY 11217	MEDIA & DESIGN SERVICES	1,185,000.
2 Total number of independent contractors (including but not limited to the	ose listed above) who received more than	
\$100,000 of compensation from the organization	59	
*		- 000 ()

47-3681860

# Form 990 (2022) HOPEWELL FOR Part VIII Statement of Revenue

		Check if Schedule O contains a response	or note to any lin	e in this Part VIII			
		Cricok ii Coricadio O Coritaino a response s	or riote to driy iiii	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded
					function revenue	business revenue	from tax under sections 512 - 514
<b>10</b> 10	4.	- Fodorated compaigns   4a					0001101100112
ants Ints	1 8	Federated campaigns 1a					
Sign of	r	Membership dues 1b					
ts, An	C	Fundraising events 1c					
Contributions, Gifts, Grants and Other Similar Amounts	c	Related organizations 1d					
ns, Sim	e	Government grants (contributions)					
er S	f	All other contributions, gifts, grants, and					
ξġ			174,820,725.				
dat	ç	Noncash contributions included in lines 1a-1f 1g \$	9,090,794.				
<u>8</u>	ŀ	Total. Add lines 1a-1f		174,820,725.			
			Business Code				
ė	2 a	CONSULTING REVENUE	541900	668,802.	668,802.		
e Ķ	b	DUES REVENUE	900099	86,950.	86,950.		
S	c	SPONSORSHIPS REVENUE	900099	16,758.			16,758.
am	c	PRI INTEREST INCOME	900099	11,967.	11,967.		
Program Service Revenue	e	REGISTRATION REVENUE	900099	5,555.	5,555.		
Ā	f	All other program service revenue					
		Total. Add lines 2a-2f		790,032.			
	3	Investment income (including dividends, intere	st, and				
		other similar amounts)		1,925,822.			1,925,822.
	4	Income from investment of tax-exempt bond p					
	5	Royalties					
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a					
		Less: rental expenses 6b					
		Rental income or (loss) 6c					
		Net rental income or (loss)	l				
		Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory <b>7a</b> 22,170,701.	( )				
	ŀ	Less: cost or other basis					
ø		and sales expenses <b>7b</b> 22,161,509.	68,372.				
n	,	Gain or (loss) 7c 9,192.	-68,372.				
Revenue		( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	· · · · ·	-59,180.			-59,180.
er B		Net gain or (loss)  Gross income from fundraising events (not		07,200.			07,200.
Othe	0 6						
٥							
		contributions reported on line 1c). See					
		Part IV, line 18					
		Less: direct expenses 8b					
		Net income or (loss) from fundraising events					
	9 8	Gross income from gaming activities. See					
		Part IV, line 19 9a					
		Less: direct expenses					
		Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns					
		and allowances 10a					
		Less: cost of goods sold10b					
$\rightarrow$		Net income or (loss) from sales of inventory					
<u>s</u>			Business Code	<b>620 - 2</b>			660
Miscellaneous Revenue	11 a	MISCELLANEOUS REVENUE	900099	620,522.			620,522.
lan	b						
cel Sev	C						
Mis	c	All other revenue					
	e	Total. Add lines 11a-11d		620,522.			
	12	Total revenue. See instructions		178,097,921.	773,274.	0.	2,503,922.

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47-3681860

### 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 respons  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	( <b>D)</b> Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	89,024,170.	89,024,170.		·
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	849,094.	849,094.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors,				
trustees, and key employees	27,975.		27,975.	
6 Compensation not included above to disqualified				
persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)			10.010	
7 Other salaries and wages	12,091,523.	11,958,070.	18,340.	115,113
8 Pension plan accruals and contributions (include	640 407	633 040	2 245	
section 401(k) and 403(b) employer contributions)	642,187.	633,048.	3,045.	6,094
9 Other employee benefits	1,539,602.	1,501,509.	23,639.	14,454
10 Payroll taxes	897,092.	887,264.	1,287.	8,541
11 Fees for services (nonemployees):	7 020 420		7 020 420	
a Management	7,030,438.	19,749,176.	7,030,438.	
b Legal	19,786,620.	19,749,176.	37,444. 69,100.	
c Accounting	69,100. 272,696.	272,696.	69,100.	
d Lobbying	336,600.	272,030.		336,600
e Professional fundraising services. See Part IV, line 17	21,935.		21,935.	330,000
f Investment management fees	21,933.		21,933.	
g Other. (If line 11g amount exceeds 10% of line 25,	15,011,168.	14,868,444.	48,412.	94,312
column (A), amount, list line 11g expenses on Sch 0.)	1,651,349.	1,651,349.	40,412.	94,312
12 Advertising and promotion	1,338,119.	1,337,693.	426.	
13 Office expenses	5,297,129.	5,247,912.	49,217.	
14 Information technology	3,237,223.	3,217,312.	15,217.	
15 Royalties	115,880.	115,880.		
	505,319.	496,205.	9,114.	
17 Travel	200,022.	150,200.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	624,429.	613,763.	10,666.	
20 Interest	,	,		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	11,774.	11,774.		
23 Insurance	115,287.	3,090.	112,197.	
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 0.)  a MISCELLANEOUS EXPENSES	56,528.	55,465.	1,063.	
b	- 3,020	-5,255.	_,	
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	157,316,014.	149,276,602.	7,464,298.	575,114
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)				

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Form 990 (2022)
Part X Balance Sheet

Part A		Check if Schedule O contains a response or	note to an	/ line in this Part X			
				,	(A) Beginning of year		(B) End of year
1	1	Cash - non-interest-bearing			716,243.	1	1,170,051.
2	2	Savings and temporary cash investments			118,337,438.	2	131,091,039.
3		Pledges and grants receivable, net			17,511,443.	3	19,912,865.
4		Accounts receivable, net	247,428.	4	976,064.		
5		Loans and other receivables from any curren					
		trustee, key employee, creator or founder, substantial contributor, or 35%					
		controlled entity or family member of any of t	hese perso	ons		5	
6	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	
<u>φ</u> 7	7	Notes and loans receivable, net				7	
Assets		Inventories for sale or use		ı		8	
و   ک		Donate of the control of the form of the control			112,292.	9	229,797.
10	0a	Land, buildings, and equipment: cost or other	er				
		basis. Complete Part VI of Schedule D	10a	94,345.			
	b	Less: accumulated depreciation	10b	29,088.	119,168.	10c	65,257.
11	1	Investments - publicly traded securities			19,798,203.	11	20,651,626.
12	2	Investments - other securities. See Part IV, lir	ne 11			12	
13	3	Investments - program-related. See Part IV, li	ne 11		2,715,094.	13	2,736,962.
14	4	Intangible assets				14	
15		Other assets. See Part IV, line 11			24,314.	15	23,360.
16		Total assets. Add lines 1 through 15 (must e			159,581,623.	16	176,857,021.
17	7	Accounts payable and accrued expenses			8,203,467.	17	9,877,172.
18	8	Grants payable			21,029,325.	18	14,880,766.
19		Deferred revenue			0.	19	31,779.
20	0	Tax-exempt bond liabilities		20			
21		Escrow or custodial account liability. Comple				21	
<sub>တ္</sub> 22	2	Loans and other payables to any current or for	ormer offic	er, director,			
<u>i</u>		trustee, key employee, creator or founder, su					
Liabilities		controlled entity or family member of any of t		22			
⊐   <sub>23</sub>	3	Secured mortgages and notes payable to un	related thir	d parties		23	
24	4	Unsecured notes and loans payable to unrela	ated third p	parties		24	
25	5	Other liabilities (including federal income tax,	payables '	to related third			
		parties, and other liabilities not included on li	nes 17-24)	. Complete Part X			
		of Schedule D			0.	25	9,584.
26	6	Total liabilities. Add lines 17 through 25			29,232,792.	26	24,799,301.
		Organizations that follow FASB ASC 958, or	check here	e X			
Se		and complete lines 27, 28, 32, and 33.					
Net Assets or Fund Balances 32 32 32 32 32	7	Net assets without donor restrictions			31,614,358.	27	25,356,554.
<b>器   28</b>	8	Net assets with donor restrictions		<u></u>	98,734,473.	28	126,701,166.
[ ]		Organizations that do not follow FASB AS6	C 958, che	ck here			
띤		and complete lines 29 through 33.					
ο g 29	9	Capital stock or trust principal, or current fun	ıds			29	
ig   30	0	Paid-in or capital surplus, or land, building, o	r equipmer	nt fund		30	
<u>د</u> 31		Retained earnings, endowment, accumulated				31	
를   32	2	Total net assets or fund balances			130,348,831.	32	152,057,720.
33	3	Total liabilities and net assets/fund balances			159,581,623.	33	176,857,021.

Form 990 (2022) HOPEWELL FUND 47-3681860 Page **12** 

Pai	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI				X	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	178	,097,	921.	
2	Total expenses (must equal Part IX, column (A), line 25)	2			014.	
3	Revenue less expenses. Subtract line 2 from line 1	3	20	781,	907.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	130		831.	
5	Net unrealized gains (losses) on investments	5		-46,	779.	
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		973,	761.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	152	,057,	720.	
Pai	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII				<u>Ш</u>	
				Yes	No	
1	Accounting method used to prepare the Form 990:  Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.					
2a	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 Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2b	Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis,					
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	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?				Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.					
За	a 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?		За		Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b			
			Form	990	(2022)	

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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 **Employer identification number** HOPEWELL FUND 47-3681860 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

HOPEWELL FUND 47-3681860 Schedule A (Form 990) 2022 Page 2

### Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	64,615,634.	102,295,757.	150,391,200.	122,217,892.	174,820,725.	614,341,208.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	64,615,634.	102,295,757.	150,391,200.	122,217,892.	174,820,725.	614,341,208.
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						71,870,932.
6	Public support. Subtract line 5 from line 4.						542,470,276.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4	64,615,634.	102,295,757.	150,391,200.	122,217,892.	174,820,725.	614,341,208.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	1,348,857.	1,719,773.	719,852.	138,029.	1,925,822.	5,852,333.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	173,875.	255,943.	493,713.	410,849.	620,522.	1,954,902.
11	<b>Total support.</b> Add lines 7 through 10						622,148,443.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	2,123,845.
	First 5 years. If the Form 990 is for th	•		fourth, or fifth tax y	ear as a section 5	01(c)(3)	
	organization, check this box and stop	here					
Sec	ction C. Computation of Publi						
14	Public support percentage for 2022 (I	ine 6, column (f), d	ivided by line 11, o	column (f))		14	87.19 %
15	Public support percentage from 2021	Schedule A, Part	II, line 14			15	71.90 %
16a	33 1/3% support test - 2022. If the o	organization did no	t check the box or	n line 13, and line	14 is 33 1/3% or m	ore, check this box	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				X
b	33 1/3% support test - 2021. If the o						
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop he	re. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pu	blicly supported o	rganization		
b	10% -facts-and-circumstances test	- 2021. If the org	anization did not d	check a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets th	ne facts-and-circum	stances test, che	ck this box and st	t <b>op here.</b> Explain i	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	alifies as a publicly	supported organiz	zation	
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	s
						Schedule A	(Form 990) 2022

Schedule A (Form 990) 2022 HOPEWELL FUND 47-3681860 Page **3** 

### Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
(	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						<u> </u>
14	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3) organization	on,
	check this box and stop here						<u></u>
	ction C. Computation of Publi					т т	
	Public support percentage for 2022 (I		•	column (f))		15	<u>%</u>
	Public support percentage from 2021					16	%
	ction D. Computation of Inves					ТТ	
		ercentage for 2022 (line 10c, column (f), divided by line 13, column (f))					
18		ncome percentage from 2021 Schedule A, Part III, line 17					
19a							7 is not
-	more than 33 1/3%, check this box ar						
k	33 1/3% support tests - 2021. If the						
20	line 18 is not more than 33 1/3%, che						H

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Schedule A (Form 990) 2022 HOPEWELL FUND 47-3681860 Page **4** 

### Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

1	Are all of the organization's supported organizations listed by name in the organization's governing
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by
	class or purpose, describe the designation. If historic and continuing relationship, explain.

- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?

  If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
0.0		
3с		
4a		
4b		
4c		
5a		
Ja		
5b		
5c		
6		
7		
7		
8		
9a		
9b		
9с		
10a		
401		
10b		

HOPEWELL FUND 47-3681860 Schedule A (Form 990) 2022 Page 5 Part IV Supporting Organizations (continued) Yes No 11 Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? 11a **b** A family member of a person described on line 11a above? 11b c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide <u>detail in Par</u>t VI 11c Section B. Type I Supporting Organizations Yes No Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No." describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the 1 supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, upervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No." describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s) Section D. All Type III Supporting Organizations No Yes Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how 2 the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's 3 <u>supported organizations played in this regard.</u> Section E. Type III Functionally Integrated Supporting Organizations 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete line 2 below. а The organization is the parent of each of its supported organizations. Complete line 3 below. b The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions) С Yes No 2 Activities Test. Answer lines 2a and 2b below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes,

how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes." explain in

Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.

Parent of Supported Organizations. Answer lines 3a and 3b below.

- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

2a 2b За

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022 HOPEWELL FUND 47-3681860 Page **6** 

Pai	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations						
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( explain in Part VI). See instructions.						
	All other Type III non-functionally integrated supporting organizations must complete Sections A through E.						
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)			
_1_	Net short-term capital gain	1					
2	Recoveries of prior-year distributions	2					
3	Other gross income (see instructions)	3					
4	Add lines 1 through 3.	4					
_5	Depreciation and depletion	5					
6	Portion of operating expenses paid or incurred for production or						
	collection of gross income or for management, conservation, or						
	maintenance of property held for production of income (see instructions)	6					
_7	Other expenses (see instructions)	7					
_8_	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8					
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1	Aggregate fair market value of all non-exempt-use assets (see						
	instructions for short tax year or assets held for part of year):						
а	Average monthly value of securities	1a					
b	Average monthly cash balances	1b					
С	Fair market value of other non-exempt-use assets	1c					
d	Total (add lines 1a, 1b, and 1c)	1d					
е	Discount claimed for blockage or other factors						
	(explain in detail in Part VI):						
2	Acquisition indebtedness applicable to non-exempt-use assets	2					
3	Subtract line 2 from line 1d.	3					
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,						
	see instructions).	4					
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6	Multiply line 5 by 0.035.	6					
7	Recoveries of prior-year distributions	7					
8	Minimum Asset Amount (add line 7 to line 6)	8					
Sect	ion C - Distributable Amount			Current Year			
1	Adjusted net income for prior year (from Section A, line 8, column A)	1					
2	Enter 0.85 of line 1.	2					
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3					
4	Enter greater of line 2 or line 3.	4					
5	Income tax imposed in prior year	5					
6	Distributable Amount. Subtract line 5 from line 4, unless subject to						
	emergency temporary reduction (see instructions).	6					
7	Check here if the current year is the organization's first as a non-functional		ed Type III supporting orga	nization (see			
	instructions).						

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** 1 Amounts paid to supported organizations to accomplish exempt purposes 1 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 Administrative expenses paid to accomplish exempt purposes of supported organizations 3 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 Other distributions (describe in Part VI). See instructions. 6 6 7 7 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 9 Distributable amount for 2022 from Section C, line 6 10 10 Line 8 amount divided by line 9 amount (i) (ii) Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Amount for 2022 Pre-2022 Distributable amount for 2022 from Section C, line 6 2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2022 **a** From 2017 **b** From 2018 c From 2019 **d** From 2020 e From 2021 f Total of lines 3a through 3e g Applied to underdistributions of prior years h Applied to 2022 distributable amount i Carryover from 2017 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2022 from Section D, line 7: a Applied to underdistributions of prior years **b** Applied to 2022 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions 6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2023. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2018 **b** Excess from 2019 c Excess from 2020 d Excess from 2021

Schedule A (Form 990) 2022

e Excess from 2022

2022.05000 HOPEWELL FUND

### Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

### **Schedule of Contributors**

Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

Employer identification number

2022

I	HOPEWELL FUND	47-3681860
Organization type (chec	k one):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)( <sup>3</sup> ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> 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	
, ,	n is covered by the <b>General Rule</b> or a <b>Special Rule.</b> (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le. See instructions.
-	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling ny one contributor. Complete Parts I and II. See instructions for determining a contributor	•
Special Rules		
sections 509(a)( contributor, dur	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support 1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) EZ, line 1. Complete Parts I and II.	d that received from any one
contributor, dur literary, or educ	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ing the year, total contributions of more than \$1,000 exclusively for religious, charitable, so ational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (6) instead of the contributor name and address), II, and III.	sientific,
year, contribution is checked, enter purpose. Don't	cion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from the exclusively for religious, charitable, etc., purposes, but no such contributions totaled metric here the total contributions that were received during the year for an exclusively religious complete any of the parts unless the <b>General Rule</b> applies to this organization because it table, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000. If this box s, charitable, etc., received <i>nonexclusively</i>
answer "No" on Part IV, I	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fine 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF ling requirements of Schedule B (Form 990).	•
LHA For Paperwork Redu	ction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.	Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022) Page **2** 

Name of organization

Employer identification number

47-3681860

Part I	Contributors (see instructions). Use duplicate copies of Part I if ac	dditional space is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
1		\$ 70,491,684. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) (d)
No. 2	Name, address, and ZIP + 4	Total contributions  Type of contribution  Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) (d)
No.	Name, address, and ZIP + 4	Total contributions Type of contribution
3		\$ 8,155,000.  Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a)	(b)	(c) (d)
No. 4	Name, address, and ZIP + 4	Total contributions  Type of contribution  Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
5	Ivallie, audi ess, aliu ZIF + 4	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) (d)
<b>No.</b> 6	Name, address, and ZIP + 4	Total contributions  Type of contribution  Person X  Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2022) Page **2** 

	•
Name of organization	Employer identification number
HOPEWELL FUND	47-3681860

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

Schedule B (Form 990) (2022) Page **3** 

Name of organization

Employer identification number

HOPEWELL FUND

47-3681860

Partii	Noticasti 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
_	PUBLICLY TRADED SECURITIES	_	
4			
		\$ \$ 6,711,869.	05/02/22
(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
		_	
		_ _	
		\$	

Schedule B (Form 990) (2022)

Name of organization

Name of o	rganization			Employer identification number
HOPEWELL				47-3681860
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a)			nat total more than \$1,000 for the year
	completing Part III, enter the total of exclusively religious, of Use duplicate copies of Part III if additional s	charitable, etc., contributions of \$1,000 o	or less for the year. (Enter this info.	once.) \$
(a) No.	·	space is needed.		
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
-		(e) Transfer of g	l nift	
		(-,	<b>,</b>	
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
Part I	(b) I dipose of gift	(c) Osc of gift	(u) Des	emption of new girt is new
		(e) Transfer of g	gift	
	Transferred's name address as	ad 71D . 4	Deletienship of two	unafavav ta tuanafavaa
-	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	ansferor to transferee
(a) No.				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
•		(e) Transfer of g	gift	
•	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	ensferor to transferee
	-			
(a) No				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
1 4111				
}		e) Transfer of g	l aift	
		(5) Hallolol Of §	<b>y</b>	
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee
	<del></del>			

### SCHEDULE C

(Form 990)

Department of the Treasury Internal Revenue Service

### **Political Campaign and Lobbying Activities**

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

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

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

OMB No. 1545-0047

2022

Open to Public Inspection

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

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

ax) (See separate instructions), then

Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Nan	ne of organization			Emp	loyer identification number
	HOPEWELL FU	JND			47-3681860
Pa	art I-A Complete if the org	anization is exempt unde	er section 501(c) o	or is a section 527 or	ganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures			\$
Pa	art I-B Complete if the org	anization is exempt unde	er section 501(c)(3	3).	
1	Enter the amount of any excise tax	incurred by the organization und	er section 4955		\$
	Enter the amount of any excise tax				
	If the organization incurred a section				
	Was a correction made?				Yes No
	of If "Yes," describe in Part IV.	anization is exempt unde	or coation 501(a)	overnt coetion 501/	2/(3)
				<u> </u>	
	Enter the amount directly expended Enter the amount of the filing organ	, ,	•		<b></b>
2	exempt function activities		· ·		2
3	Total exempt function expenditures				\$
Ŭ	line 17b		,		\$
4					Yes No
	Enter the names, addresses and em				
	made payments. For each organizat	tion listed, enter the amount paid	from the filing organiz	ation's funds. Also enter th	e amount of political
	contributions received that were pro	• •		·	te segregated fund or a
	political action committee (PAC). If	additional space is needed, provi	de information in Part l	V.	
	(a) Name	<b>(b)</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

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

Schedule C (Form 990) 2022

LHA

232041 11-08-22

,	HOPEWELL FUND					ıge <b>2</b>
Part II-A Complete if the org section 501(h)).	anization is exen	npt under section	1 501(c)(3) and file	d Form 5768 (el	ection under	
A Check if the filing organiza	tion belongs to an affil	iated group (and list in	Part IV each affiliated	group member's nam	ne, address, EIN,	
expenses, and sha	re of excess lobbying e	expenditures).				
B Check if the filing organiza	tion checked box A ar	nd "limited control" pro	visions apply.		_	
	ts on Lobbying Exper ditures" means amou			(a) Filing organization's totals	<b>(b)</b> Affiliated grototals	oup
1a Total lobbying expenditures to influ	uence public opinion (g	grassroots lobbying)				
<b>b</b> Total lobbying expenditures to influ	uence a legislative bod	y (direct lobbying)				
c Total lobbying expenditures (add li	nes 1a and 1b)					
d Other exempt purpose expenditure	es					
e Total exempt purpose expenditure	s (add lines 1c and 1d	)				
f Lobbying nontaxable amount. Enter	er the amount from the	following table in both	n columns.			
If the amount on line 1e, column (a) o	or (b) is: The lob	bying nontaxable am	ount is:			
Not over \$500,000	20% of t	the amount on line 1e.				
Over \$500,000 but not over \$1,000	0,000 \$100,00	00 plus 15% of the exce	ess over \$500,000.			
Over \$1,000,000 but not over \$1,5	00,000 \$175,00	00 plus 10% of the exce	ess over \$1,000,000.			
Over \$1,500,000 but not over \$17	000,000 \$225,00	00 plus 5% of the exces	ss over \$1,500,000.			
Over \$17,000,000	\$1,000,0	000.				
g Grassroots nontaxable amount (er	iter 25% of line 1f)					
h Subtract line 1g from line 1a. If zer	o or less, enter -0					
i Subtract line 1f from line 1c. If zero	o or less, enter -0					
j If there is an amount other than ze	ro on either line 1h or l	ine 1i, did the organiza	ation file Form 4720			
reporting section 4911 tax for this	year?				Yes	No
(Some organizations t	hat made a section 50	eraging Period Under D1(h) election do not l ate instructions for lir	nave to complete all of	f the five columns b	elow.	
	Lobbying Exper	nditures During 4-Yea	r Averaging Period			
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) Total	
2a Lobbying nontaxable amount						
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))						
c Total lobbying expenditures						

Schedule C (Form 990) 2022

 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)).

or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)	)	(b)
the lobbying activity.	Yes	No	Amount
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?		Х	
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Х		
c Media advertisements?	х		45
d Mailings to members, legislators, or the public?	х		5,10
e Publications, or published or broadcast statements?	Х		32,78
f Grants to other organizations for lobbying purposes?			5,005,14
g Direct contact with legislators, their staffs, government officials, or a legislative body?			237,51
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			19
i Other activities?	X		80,51
j Total. Add lines 1c through 1i			5,361,70
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х	
<b>b</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?		1	4:
art III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)(5	), or sec	tion
33 1(3)(3).			Yes No
Were substantially all (90% or more) dues received nondeductible by members?		1	
, , , , , , , , , , , , , , , , , , , ,			
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political campaign activity expenditures from the organization agree.</li> </ul>	:he prior year?	2	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from tart III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).	the prior year?	2 3 5), or sec	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from t	the prior year?	2 3 5), or sec	
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#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

**Employer identification number** 

	HOPEWELL FUND		47-3681860
Pa	rt I Organizations Maintaining Donor Advised	Funds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	1	0
2	Aggregate value of contributions to (during year)	2,330,364.	0.
3	Aggregate value of grants from (during year)	8,587,167.	0.
4	Aggregate value at end of year	15,746,009.	0.
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor advised f	funds
	are the organization's property, subject to the organization's e		
6	Did the organization inform all grantees, donors, and donor ac		
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose con	ferring
	impermissible private benefit?		X Yes No
Pa	rt II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990, Part	t IV, line 7.
1	Purpose(s) of conservation easements held by the organizatio	n (check all that apply).	
	Preservation of land for public use (for example, recreat	ion or education) Preservation of a h	nistorically important land area
	Protection of natural habitat	Preservation of a c	certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualific	ed 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
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	cture included in (a)	2c
d	Number of conservation easements included in (c) acquired at	fter July 25,2006, and not on a	
	historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the org	ganization during the tax
	year		
4	Number of states where property subject to conservation ease	ement is located	
5	Does the organization have a written policy regarding the period	odic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and enforcing conserv	ation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforcing conservation	easements during the year
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)(4)	
9	In Part XIII, describe how the organization reports conservation	•	
	balance sheet, and include, if applicable, the text of the footnote	ote to the organization's financial statements	s that describes the
Dа	organization's accounting for conservation easements.  rt III Organizations Maintaining Collections of	Art Historical Treasures or Othe	r Similar Assets
1 6	Complete if the organization answered "Yes" on Form		i Oliffiidi Assets.
			halanaa ahaak wanta
та	If the organization elected, as permitted under FASB ASC 958	•	
	of art, historical treasures, or other similar assets held for publication provide in Part VIII the tout of the features to its financial	· · · · · · · · · · · · · · · · · · ·	erance of public
<b>h</b>	service, provide in Part XIII the text of the footnote to its finance. If the organization elected, as permitted under FASB ASC 958		upon choot works of
U	art, historical treasures, or other similar assets held for public	•	
		exhibition, education, or research in furthera	uice of public service,
	provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part VIII, line 1		¢
			<u> </u>
2	If the organization received or held works of art, historical trea	sures or other similar assets for financial ga	
~	the following amounts required to be reported under FASB AS		iii, provide
а			\$
	Assets included in Form 990, Part X		

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

HOPEWELL FUND 47-3681860 <u> Page</u> **2** Schedule D (Form 990) 2022 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) 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): Public exhibition Loan or exchange program h Scholarly research Other Preservation for future generations С Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 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? 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 If "Yes," explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance 1c d Additions during the year 1d 1e Distributions during the year 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes Nο If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. 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 Contributions Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: **a** Board designated or quasi-endowment Permanent 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 No organization by: (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? Describe in Part XIII the intended uses of the organization's endowment funds. 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 (b) Cost or other (c) Accumulated (d) Book value

65,257. Schedule D (Form 990) 2022

e Other

basis (investment)

b Buildingsc Leasehold improvements

d Equipment

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

basis (other)

20,719.

73,626.

depreciation

11,905

17,183,

8,814

56,443,

Schedule D (Form 990) 2022 HOPEWELL FUND			47-3681860	Page 3
Part VII Investments - Other Securities.				
Complete if the organization answered "Yes" or	n Form 990, Part IV, line	e 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 v	alue
(1) Financial derivatives				
(2) Closely held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
		+		
(F)				
(G)		+		
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes" o				
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or	end-of-year market v	alue
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets.				
Complete if the organization answered "Yes" of	on Form 990 Part IV line	11d See Form 990 Part X line 15		
	Description	Tra. coc rollin coc, rare x, iiile re.	(b) Book va	ماراه
	Description		(b) Book va	ilue
(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" of	n Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, line	25.	
1. (a) Description of liability			(b) Book va	alue
(1) Federal income taxes				
(2) RIGHT-OF-USE LEASE LIABILITIES				9,584.
<u> </u>				2,001.
(3)				
<u>(4)</u>			+	
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.)			9,584.
2. Liability for uncertain tax positions. In Part XIII, provide t	the text of the footnote t	o the organization's financial statement	ts that reports the	
organization's liability for uncertain tax positions under F	FASB ASC 740. Check h	ere if the text of the footnote has been	provided in Part XIII	🗓

Complete if the organization answered "Yes" on Form 990, Part IV, line			4	179,446,340.
			1	179,440,340.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 - 1	46 770		
a Net unrealized gains (losses) on investments		-46,779.		
<b>b</b> Donated services and use of facilities		1 240 761		
c Recoveries of prior year grants		1,348,761.		
d Other (Describe in Part XIII.)	•			1 201 000
e Add lines 2a through 2d			2e	1,301,982.
3 Subtract line 2e from line 1			3	178,144,358.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1	04 025		
a Investment expenses not included on Form 990, Part VIII, line 7b		21,935.		
b Other (Describe in Part XIII.)	4b	-68,372.		46 425
c Add lines 4a and 4b			4c	-46,437.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial State	omonto With	Evnance nor F	5	178,097,921.
Complete if the organization answered "Yes" on Form 990, Part IV, line		Exhelises hel L	etuiii.	
				157,737,451.
1 Total expenses and losses per audited financial statements			1	137,737,431.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	الما			
a Donated services and use of facilities				
<b>b</b> Prior year adjustments	1 4 1			
c Other losses		442 272		
d Other (Describe in Part XIII.)		443,372.		442 272
e Add lines 2a through 2d			2e	443,372. 157,294,079.
3 Subtract line 2e from line 1			3	137,294,079.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1	21 025		
a Investment expenses not included on Form 990, Part VIII, line 7b		21,935.		
b Other (Describe in Part XIII.)	4b			21 025
c Add lines 4a and 4b			4c	21,935.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18, Part XIII Supplemental Information.	)		5	157,316,014.
i art Am Supplemental information.				
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;	Part IV, lines 1b a	and 2b; Part V, line 4	; Part X,	line 2; Part XI,
			; Part X,	line 2; Part XI,
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;			; Part X,	line 2; Part XI,
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;			; Part X,	line 2; Part XI,
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any PART X, LINE 2:	additional inform		; Part X,	line 2; Part XI,
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any	additional inform		; Part X,	line 2; Part XI,
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any  PART X, LINE 2:  THE FUND DOES NOT HAVE ANY MATERIAL UNCERTAIN TAX POSITIONS OR	additional inform		; Part X,	line 2; Part XI,
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any PART X, LINE 2:	additional inform		; Part X,	line 2; Part XI,
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any  PART X, LINE 2:  THE FUND DOES NOT HAVE ANY MATERIAL UNCERTAIN TAX POSITIONS OR	additional inform  UNRELATED  PPLICABLE,		; Part X,	line 2; Part XI,
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any  PART X, LINE 2:  THE FUND DOES NOT HAVE ANY MATERIAL UNCERTAIN TAX POSITIONS OR  BUSINESS INCOME. THE FUND FILES EXEMPT FUND RETURNS AND, IF A  UNRELATED BUSINESS INCOME TAX RETURNS IN THE U.S. FEDERAL AND	additional inform  UNRELATED  PPLICABLE,		; Part X,	line 2; Part XI,
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any  PART X, LINE 2:  THE FUND DOES NOT HAVE ANY MATERIAL UNCERTAIN TAX POSITIONS OR  BUSINESS INCOME. THE FUND FILES EXEMPT FUND RETURNS AND, IF A	additional inform  UNRELATED  PPLICABLE,		; Part X,	line 2; Part XI,
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any  PART X, LINE 2:  THE FUND DOES NOT HAVE ANY MATERIAL UNCERTAIN TAX POSITIONS OR  BUSINESS INCOME. THE FUND FILES EXEMPT FUND RETURNS AND, IF A  UNRELATED BUSINESS INCOME TAX RETURNS IN THE U.S. FEDERAL AND	additional inform  UNRELATED  PPLICABLE,		; Part X,	line 2; Part XI,
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any  PART X, LINE 2:  THE FUND DOES NOT HAVE ANY MATERIAL UNCERTAIN TAX POSITIONS OR  BUSINESS INCOME. THE FUND FILES EXEMPT FUND RETURNS AND, IF A  UNRELATED BUSINESS INCOME TAX RETURNS IN THE U.S. FEDERAL AND	additional inform  UNRELATED  PPLICABLE,		; Part X,	line 2; Part XI,
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any  PART X, LINE 2:  THE FUND DOES NOT HAVE ANY MATERIAL UNCERTAIN TAX POSITIONS OR  BUSINESS INCOME. THE FUND FILES EXEMPT FUND RETURNS AND, IF A  UNRELATED BUSINESS INCOME TAX RETURNS IN THE U.S. FEDERAL AND  JURISDICTIONS.	additional inform  UNRELATED  PPLICABLE,		; Part X,	line 2; Part XI,
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any  PART X, LINE 2:  THE FUND DOES NOT HAVE ANY MATERIAL UNCERTAIN TAX POSITIONS OR  BUSINESS INCOME. THE FUND FILES EXEMPT FUND RETURNS AND, IF A  UNRELATED BUSINESS INCOME TAX RETURNS IN THE U.S. FEDERAL AND  JURISDICTIONS.	Additional inform  UNRELATED  PPLICABLE,  STATE	ation.		
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any PART X, LINE 2:  THE FUND DOES NOT HAVE ANY MATERIAL UNCERTAIN TAX POSITIONS OR BUSINESS INCOME. THE FUND FILES EXEMPT FUND RETURNS AND, IF A UNRELATED BUSINESS INCOME TAX RETURNS IN THE U.S. FEDERAL AND JURISDICTIONS.  PART XI, LINE 4B - OTHER ADJUSTMENTS:	Additional inform  UNRELATED  PPLICABLE,  STATE	ation.		
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any PART X, LINE 2:  THE FUND DOES NOT HAVE ANY MATERIAL UNCERTAIN TAX POSITIONS OR BUSINESS INCOME. THE FUND FILES EXEMPT FUND RETURNS AND, IF A UNRELATED BUSINESS INCOME TAX RETURNS IN THE U.S. FEDERAL AND JURISDICTIONS.  PART XI, LINE 4B - OTHER ADJUSTMENTS:	Additional inform  UNRELATED  PPLICABLE,  STATE	ation.		
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any Part X, Line 2:  THE FUND DOES NOT HAVE ANY MATERIAL UNCERTAIN TAX POSITIONS OR BUSINESS INCOME. THE FUND FILES EXEMPT FUND RETURNS AND, IF A UNRELATED BUSINESS INCOME TAX RETURNS IN THE U.S. FEDERAL AND JURISDICTIONS.  PART XI, LINE 4B - OTHER ADJUSTMENTS:  LOSS ON DISPOSAL OF FIXED ASSETS  PART XII, LINE 2D - OTHER ADJUSTMENTS:	additional inform  UNRELATED  PPLICABLE,  STATE  -68,372.	ation.		
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any PART X, LINE 2:  THE FUND DOES NOT HAVE ANY MATERIAL UNCERTAIN TAX POSITIONS OR BUSINESS INCOME. THE FUND FILES EXEMPT FUND RETURNS AND, IF A UNRELATED BUSINESS INCOME TAX RETURNS IN THE U.S. FEDERAL AND JURISDICTIONS.  PART XI, LINE 4B - OTHER ADJUSTMENTS:  LOSS ON DISPOSAL OF FIXED ASSETS	additional inform  UNRELATED  PPLICABLE,  STATE  -68,372.	ation.		
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any Part X, Line 2:  THE FUND DOES NOT HAVE ANY MATERIAL UNCERTAIN TAX POSITIONS OR BUSINESS INCOME. THE FUND FILES EXEMPT FUND RETURNS AND, IF A UNRELATED BUSINESS INCOME TAX RETURNS IN THE U.S. FEDERAL AND JURISDICTIONS.  PART XI, LINE 4B - OTHER ADJUSTMENTS:  LOSS ON DISPOSAL OF FIXED ASSETS  PART XII, LINE 2D - OTHER ADJUSTMENTS:	additional inform  UNRELATED  PPLICABLE,  STATE  -68,372.	ation.		

Schedule D (Form 990) 2022	HOPEWELL FUND		47-3681860	Page <b>5</b>
Schedule D (Form 990) 2022 Part XIII Supplemental Info	ormation (continued)			
	00	442, 250		
TOTAL TO SCHEDULE D, PART 1	CII, LINE 2D	443,372.		

## SCHEDULE F (Form 990)

### **Statement of Activities Outside the United States**

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

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

 $\begin{tabular}{lll} \textbf{Go to} & \textit{www.irs.gov/Form990} & \textbf{for instructions and the latest information.} \end{tabular}$ 

Inspection

Name of the organization **Employer identification number** HOPEWELL FUND 47-3681860 Part I General Information on Activities Outside the United States Complete if the

га			Clivilles Out	side the Offited States. Comple	ete ii the organization answered "Y	es" on
1	Form 990, Part IV		maintain roos	de to substantiate the amount of the are	nts and other assistance	
1	=	-		ds to substantiate the amount of its gra the selection criteria used to award the		Yes No
	the grantees enginity it	or the grants of a	issistarice, ariu t	the selection criteria used to award the	grants or assistance?	res No
2	For grantmakers. Desc	ribe in Part V the	organization's	procedures for monitoring the use of its	grants and other assistance outsi	de the
_	United States.		·	gg		
3	Activities per Region. (Th	ne following Part	I, line 3 table ca	an be duplicated if additional space is n	eeded.)	
	(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in the region	(e) If activity listed in (d)	(f) Total
		offices	employees, agents, and	(by type) (such as, fundraising, pro-	is a program service,	expenditures for and
		in the region	independent contractors	gram services, investments, grants to	describe specific type	investments
			in the region	recipients located in the region)	of service(s) in the region	in the region
					INTERNATIONAL	
					DEVELOPMENT AND FOREIGN	
EUR	OPE (INCLUDING				AFFAIRS, TECHNOLOGY AND	
CE	LAND & GREENLAND)	0	7	PROGRAM SERVICES	INNOVATION	199,052.
					INTERNATIONAL	
	DLE EAST AND				DEVELOPMENT AND FOREIGN	
IOR!	TH AFRICA	0	1	PROGRAM SERVICES	AFFAIRS	1,250.
					HEALTH, INTERNATIONAL	
					DEVELOPMENT AND FOREIGN	
NOR'	TH AMERICA	0	2	PROGRAM SERVICES	AFFAIRS	227,959.
					CTVII DICUMO COCINI	
III.	-SAHARAN AFRICA	0	2		CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	80,650.
	Diminion in Rich			I ROOM BERVIOES	nerion, hoverer	00,030.
EUR	OPE (INCLUDING					
	LAND & GREENLAND)	0	0	 GRANTMAKING		217,000.
	,					
NOR!	TH AMERICA	0	0	GRANTMAKING		75,000.
יטספ	TH AMERICA	0	0	GRANTMAKING		125,000.
SUB-	-SAHARAN AFRICA	0	0	GRANTMAKING		432,094.
	Subtotal	0	12			1,358,005.
b	Total from continuation	_	_			
	sheets to Part I	0	0			0.
С	Totals (add lines 3a					1 250 005

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

Part II Grants and Other

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

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV appraisal, other)
		EUROPE (INCLUDING						
		ICELAND &						
		GREENLAND)	HEALTH	33,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING						
		ICELAND &						
			HEALTH	34,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING						
			CIVIL RIGHTS, SOCIAL					
		GREENLAND)	ACTION, ADVOCACY	125,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING						
		ICELAND &						
			HEALTH	25,000.	WIRE TRANSFER	0.		
		NORTH AMERICA	HEALTH	75,000.	WIRE TRANSFER	0.		
			INTERNATIONAL					
			DEVELOPMENT AND					
		SOUTH AMERICA	FOREIGN AFFAIRS	100,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
		AFRICA	HEALTH	25,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN	CIVIL RIGHTS, SOCIAL					
			ACTION, ADVOCACY	162,247.	WIRE TRANSFER	0.		

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

3 Enter total number of other organizations or entities

<u>11</u>

(a) Name of organization of non-cash valuation of non-cash valuation	Scriedule F (FOITH 990)								Faye 2
(a) Name of organization and EIN (if applicable)  (c) Region grant of cash grant of cash disbursement of cash disbursement of cash disbursement of non-cash assistance of non-cash assi	Part II Continuation o	f Grants and Other I	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
SUB-SAHARAN DEVELOPMENT AND AFRICA FOREIGN AFFAIRS 149,847. WIRE TRANSFER 0.  INTERNATIONAL SUB-SAHARAN DEVELOPMENT AND AFRICA FOREIGN AFFAIRS 70,000. WIRE TRANSFER 0.  INTERNATIONAL SUB-SAHARAN DEVELOPMENT AND			(c) Region				non-cash	of non-cash	(i) Method of valuation (book, FM\ appraisal, other)
SUB-SAHARAN DEVELOPMENT AND AFRICA FOREIGN AFFAIRS 149,847. WIRE TRANSFER 0.  INTERNATIONAL SUB-SAHARAN DEVELOPMENT AND AFRICA FOREIGN AFFAIRS 70,000. WIRE TRANSFER 0.  INTERNATIONAL SUB-SAHARAN DEVELOPMENT AND									
AFRICA FOREIGN AFFAIRS 149,847. WIRE TRANSFER 0.  INTERNATIONAL SUB-SAHARAN DEVELOPMENT AND AFRICA FOREIGN AFFAIRS 70,000. WIRE TRANSFER 0.  INTERNATIONAL SUB-SAHARAN DEVELOPMENT AND				INTERNATIONAL					
INTERNATIONAL SUB-SAHARAN DEVELOPMENT AND AFRICA FOREIGN AFFAIRS 70,000.WIRE TRANSFER 0.  INTERNATIONAL SUB-SAHARAN DEVELOPMENT AND			SUB-SAHARAN	DEVELOPMENT AND					
SUB-SAHARAN DEVELOPMENT AND AFRICA FOREIGN AFFAIRS 70,000.WIRE TRANSFER 0.  INTERNATIONAL SUB-SAHARAN DEVELOPMENT AND			AFRICA	FOREIGN AFFAIRS	149,847.	WIRE TRANSFER	0.		
SUB-SAHARAN DEVELOPMENT AND AFRICA FOREIGN AFFAIRS 70,000.WIRE TRANSFER 0.  INTERNATIONAL SUB-SAHARAN DEVELOPMENT AND				TAMEDALAMETONA					
AFRICA FOREIGN AFFAIRS 70,000. WIRE TRANSFER 0.  INTERNATIONAL SUB-SAHARAN DEVELOPMENT AND									
INTERNATIONAL SUB-SAHARAN DEVELOPMENT AND					70 000	MIDE MDANGEED			
SUB-SAHARAN DEVELOPMENT AND			AFRICA	FOREIGN AFFAIRS	70,000.	WIRE TRANSFER	0.		
SUB-SAHARAN DEVELOPMENT AND				TNTERNATIONAL					
			SUB-SAHARAN						
					50,000.	WIRE TRANSFER	0.		
					,				

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (d) Amount of (e) Manner of cash disbursement (c) Number of (f) Amount of (g) Description of (a) Type of grant or assistance (b) Region recipients cash grant noncash noncash assistance assistance

Schedule F (Form 990) 2022 HOPEWELL FUND 47-3681860 Page **4** 

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

Instructions for Form 5713; don't file with Form 990)

Schedule F (Form 990) 2022

Yes X No

Schedule F (Form 990) 2022 HOPEWELL FUND	47-3681860	Page 5
Part V Supplemental Information		
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting	method: amounts of	
investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method);		
(estimated number of recipients), as applicable. Also complete this part to provide any additional information		
(committee name) of recipionity, as applicable. Also complete this part to provide any additional information	on. dec mondetions.	
PART I, LINE 2:		
<u>,,,,</u>		
MUE ODCANIZAMION CEMEDALLY DEGLITOEC A WOLMMEN DOODOCAL DECCRITORING HOW MUE		
THE ORGANIZATION GENERALLY REQUIRES A WRITTEN PROPOSAL DESCRIBING HOW THE		
GRANT FUNDS WILL BE USED, AND PRE-GRANT INQUIRY IS THEN CONDUCTED TO		
EVALUATE THE GRANTEE. ALL GRANTS ARE SUBJECT TO A WRITTEN GRANT		
AGREEMENT THAT IMPOSES REPORTING OBLIGATIONS, REQUIRES FUNDS BE USED		
SOLELY AS SPECIFIED IN THE PROPOSAL, AND REQUIRES THAT FUNDS BE RETURNED		
·		
IF NOT SPENT APPROPRIATELY OR IF REPORTS ARE NOT FILED AS REQUIRED.		
DADE T LINE 2		
PART I, LINE 3:		
ACCRUAL METHOD		

### SCHEDULE G (Form 990)

Department of the Treasury

Internal Revenue Service

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization	IND				1	<b>oloyer ide</b> '-368186	ntification number
Part I Fundraising Activities.			'a a II a u	- Farrer 000 Dart IV I			
required to complete this par	<ul> <li>Complete if the organization answer</li> <li>t.</li> </ul>	erea "Y	es" or	1 Form 990, Part IV, I	ine 17. For	m 990-EZ	filers are not
1 Indicate whether the organization rais		ng activ	rities. (	Check all that apply.			
a Mail solicitations				overnment grants			
<b>b</b> X Internet and email solicitations	f Solicita	tion of	gover	nment grants			
c X Phone solicitations	<b>g</b> Special	fundra	aising	events			
<b>d</b> X In-person solicitations							
2 a Did the organization have a written of	or oral agreement with any individual	(includ	ling of	ficers, directors, trus	tees, or		
key employees listed in Form 990, P	art VII) or entity in connection with p	rofessi	onal fu	undraising services?		X Yes	No
<b>b</b> If "Yes," list the 10 highest paid indi-	viduals or entities (fundraisers) pursu	ant to	agreei	ments under which th	ne fundrais	er is to be	•
compensated at least \$5,000 by the	organization.						
(2)		(iii) fundr	Did		<b>(ν)</b> Αποι		(vi) Amount paid
<ul><li>(i) Name and address of individual or entity (fundraiser)</li></ul>	(ii) Activity	have c	ustody	(iv) Gross receipts from activity	to (or reta fundr		to (or retained by)
or entity (idilidiaiser)		contrib	itrol of utions?	Hom activity	listed in		organization
THE BONNER GROUP - 800 MAINE		Yes	No				
AVE SW, SUITE 450,	PROFESSIONAL FUNDRAISER		Х	785,000.	3	00,000.	485,000.
ABUNDANCE STRATEGIES - 1900 L							
STREET, NW, WASHINGTON, DC	FUNDRAISING COUNSEL		Х	500,000.		36,600.	463,400.
			l				
				1,285,000.		36,600.	948,400.
3 List all states in which the organization or licensing.	on is registered or licensed to solicit of	contrib	utions	or has been notified	it is exemp	ot from reg	gistration
AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, I	L,KS,KY,MA,ME,MD,MI,MN,MS,N	IV,NH,	NJ,N	M,NY,NC			
ND,OH,OK,OR,PA,RI,SC,TN,UT,VA,W	A,WI,WV						

232081 10-27-22

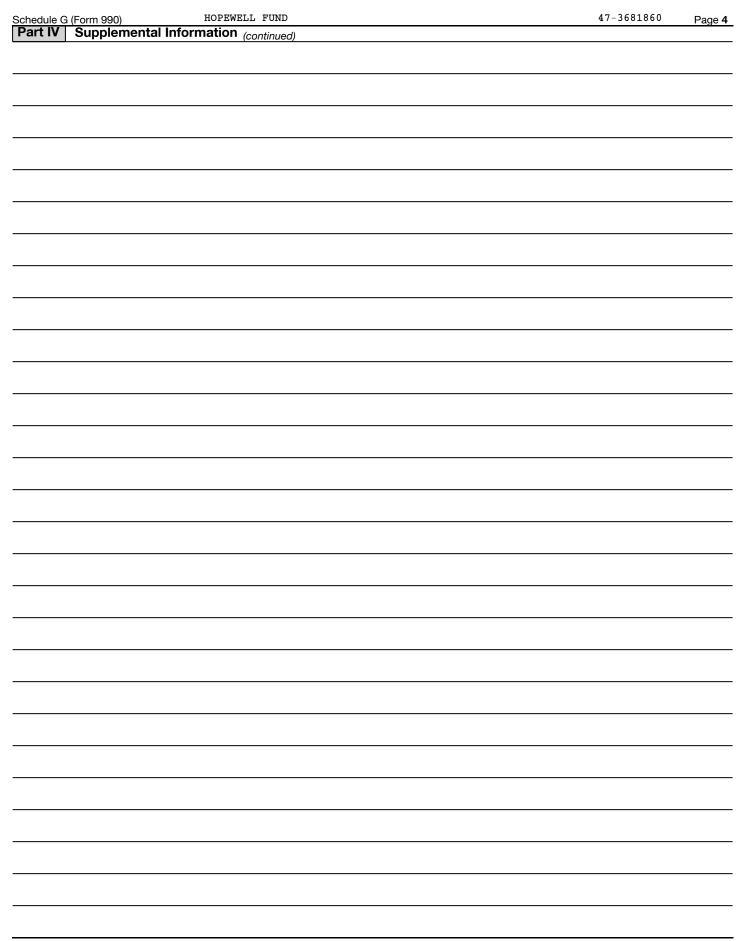
Schedule G (Form 990) 2022

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

SEE PART IV FOR CONTINUATIONS

Pa	ırt I					
		of fundraising event contributions and gro				ts greater than \$5,000.
			(a) Event #1	<b>(b)</b> Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
Φ			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts				
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
S	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
Exp						
irect	7	Food and beverages				+
	8	Entertainment				
	9	Other direct expenses				
	10	,				
Do		Net income summary. Subtract line 10 from line				
Pa	ırt I	<b>Gaming.</b> Complete if the organization a \$15,000 on Form 990-EZ, line 6a.	answered "Yes" on Form	990, Part IV, line 19, or	reported more than	
		ψ13,000 0111 01111 990-L2, line 0a.		(b) Pull tabs/instant		(d) Total gaming (add
Jue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue						
	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	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)			
	_					
		ter the state(s) in which the organization condu the organization licensed to conduct gaming ac				Yes No
		No," explain:		states?		. I fes I No
	_					
		ere any of the organization's gaming licenses re Yes," explain:			year?	Yes No
23208	32 10	)-27-22			Sche	edule G (Form 990) 2022

Sch	edule G (Form 990) 2022 HOPEWELL FUND 4	7-368	186	0	Page 3
11	Does the organization conduct gaming activities with nonmembers?	[		Yes	No No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed				
	to administer charitable gaming?	[		Yes	No
13	Indicate the percentage of gaming activity conducted in:				
а	a The organization's facility	🗖	I3a		%
b	An outside facility	∟1	l3b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:				
	Name				
	Address				
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	[		Yes	☐ No
b	o 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				
	Mandatory distributions:				
а	a Is the organization required under state law to make charitable distributions from the gaming proceeds to	Г	一,		
	retain the state gaming license?	L		Yes	∟ No
Ľ	• Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the				
Pa	organization's own exempt activities during the tax year \$ Int IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and	Dort II	Lline	20.0	0h 10h
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	raitii	1, 111 18	55 J, 1	90, 100,
	13b, 13c, 16, and 17b, as applicable. Also provide any additional information. See instructions.				
SCH	EDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:				
	, , ,				
/ T \	NAME OF FINIDATORD, THE BONNED COOLD				
<u>,                                    </u>	NAME OF FUNDRAISER: THE BONNER GROUP				
(I)	ADDRESS OF FUNDRAISER:				
<b>8</b> n n	MAINE AVE CW CHITTE ASO WACHINGTON DC 20026				
000	MAINE AVE SW, SUITE 450, WASHINGTON, DC 20026				
<u>(</u> I)	NAME OF FUNDRAISER: ABUNDANCE STRATEGIES				
(I)	ADDRESS OF FUNDRAISER: 1900 L STREET, NW, WASHINGTON, DC 20036				
/					



#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

2022

OMB No. 1545-0047

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

Attach to Form 990.

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

Open to Public Inspection

Name of the organization  HOPEWELL FUND							47-3681860
Part I General Information on Grants ar	nd Assistance						
Does the organization maintain records to criteria used to award the grants or assist     Describe in Part IV the organization's propert II Grants and Other Assistance to Describe in Part II Grants and Oth	tance? cedures for monit	oring the use of grant	funds in the United	States.			X Yes No
recipient that received more than \$	_				anization anoworda	55 511 5111 555, 1 a.r.	21, 101 411
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
1HOOD MEDIA ACADEMY INC 460 MELWOOD AVE PITTSBURGH, PA 15213	81-3871444	501(C)(3)	25,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
A BETTER BALANCE 5 COLUMBUS CIRCLE NEW YORK, NY 10019	20-3664771	501(C)(3)	145,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
A WOMAN'S CHOICE OF CHARLOTTE 421 WENDOVER ROAD CHARLOTTE, NC 28211	81-4130825		400,184.	0.			HEALTH
A WOMAN'S CHOICE OF GREENSBORO INC 2425 RANDLEMAN ROAD GREENSBORO, NC 27407	47-2794760		211,332.	0.			HEALTH
A WOMAN'S CHOICE OF JACKSONVILLE, INC - 4131 UNIVERSITY BLVD - JACKSONVILLE, FL 32216	04-3590126		397,176.	0.			HEALTH
A WOMAN'S CHOICE OF RALEIGH INC 3305 DRAKE CIRCLE RALEIGH, NC 27607	26-0837052		185,161.	0.			HEALTH
2 Enter total number of section 501(c)(3) an	•	•					246.
3 Enter total number of other organizations	listed in the line	1 table					88.

HOPEWELL FUND 47-3681860

Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	<b>(b)</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
ABORTION CARE NETWORK							
1300 I ST NW							
WASHINGTON, DC 20005	26-1972058	501(C)(3)	114,000.	0.			HEALTH
ABORTION LIBERATION FUND OF PA 123 S BROAD STREET							
PHILADELPHIA, PA 19109	84-3028266	501(C)(3)	7,968.	0.			TECHNOLOGY AND INNOVATION
ABORTION RIGHTS FUND OF WESTERN MASSACHUSETTS INC - PO BOX 2162 - AMHERST, MA 01004	22-2928632	501/C)/3)	9,910.	0.			TECHNOLOGY AND INNOVATION
AMBERSI, MA 01004	22-2920032	501(0)(5)	3,310.	0.			TECHNOLOGI AND INNOVATION
ABOUT FACE THEATRE COLLECTIVE 5252 N BROADWAY							YOUTH DEVELOPMENT AND
CHICAGO, IL 60640	36-4067995	501(C)(3)	50,000.	0.			EDUCATION
ACCESS HEALTH CENTER 1700 75TH ST							
DOWNERS GROVE, IL 60516	74-2611798		95,000.	0.			HEALTH
ACCESS HEALTH GROUP LTD  106 W CALENDAR AVE LA GRANGE, IL 60525	86-3896110		168,700.	0.			HEALTH
LA GRANGE, IL 60323	80-3890110		100,700.	0.			nealin
ACCESS REPRODUCTIVE CARE SOUTHEAST INC - PO BOX 7354 - ATLANTA, GA							
30357	47-3813101	501(C)(3)	113,764.	0.			HEALTH
ACCESS REPRODUCTIVE JUSTICE PO BOX 3609							
OAKLAND, CA 94609	51-0163201	501(C)(3)	5,156.	0.			TECHNOLOGY AND INNOVATION
ACG GROUP 511 SW 10TH AVE							
PORTLAND, OR 97205	86-1488491		177,014.	0.			HEALTH

Page 1

47-3681860

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 (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) ADVOCATES FOR YOUTH 1325 G STREET NW WASHINGTON, DC 20005 52-1173590 501(C)(3) 10,000 0. TECHNOLOGY AND INNOVATION AIDS SERVICES COALITION INC 121 COLLEGE STREET HATTIESBURG, MS 39401 14-1855167 501(C)(3) 82,000 0 неатли ALABAMA WOMEN'S CENTER FOR REPRODUCTIVE ALTERNATIVES - 48135 PARKMAN DRIVE NW - HUNTSVILLE, AL 35810 63-1255537 57,316, 0. HEALTH ALAMO WOMEN'S CLINIC OF ALBUQUERQUE LLC - 10151 MONTGOMERY BLVD NE - ALBUQUERQUE, NM 87111 88-3464164 0 HEALTH 554,597. ALAMO WOMEN'S CLINIC OF ILLINOIS LLC - 2800 W MAIN STREET -CARBONDALE, IL 62901 88-3558903 0. HEALTH 490,050, ALASKA PUBLIC INTEREST RESEARCH GROUP - 308 G STREET - ANCHORAGE. CIVIL RIGHTS, SOCIAL AK 99501 92-0047627 501(C)(3) 0. ACTION, ADVOCACY 76,250 ALLEGHENY REPRODUCTIVE HEALTH CENTER - 5910 KIRKWOOD ST -HEALTH PITTSBURGH, PA 15206 82-0598328 483 035. 0. ALL-OPTIONS PO BOX 28284 OAKLAND, CA 94604 87-0729403 501(C)(3) 9,653. 0. HEALTH AMALGAMATED CHARITABLE FOUNDATION INC - 1825 K ST NW - WASHINGTON. CIVIL RIGHTS, SOCIAL DC 20006 82-1517696 501(C)(3) 300 000. 0. ACTION ADVOCACY

Schedule I (Form 990)

Page 1

HOPEWELL FUND

HOPEWELL FUND

(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
AMERICA ACHIEVES INC							
244 FIFTH AVENUE							CIVIL RIGHTS, SOCIAL
NEW YORK, NY 10001	27-3238471	501(C)(3)	50,000.	0.			ACTION, ADVOCACY
AMERICA VOTES							
1155 CONNECTICUT AVE NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20036	26-4568349	501(C)(4)	6,323.	0.			ACTION, ADVOCACY
AMERICAN CIVIL LIBERTIES UNION							
FOUNDATION INC - 125 BROAD STREET							CIVIL RIGHTS, SOCIAL
- NEW YORK, NY 10004	13-6213516	501(C)(3)	250,000.	0.			ACTION, ADVOCACY
AMERICAN CONSTITUTION SOCIETY FOR							
LAW AND POLICY - 1899 L STREET NW							CIVIL RIGHTS, SOCIAL
- WASHINGTON, DC 20036	52-2313694	501(C)(3)	150,000.	0.			ACTION, ADVOCACY
AMERICAN INDEPENDENT FOUNDATION							
800 MAINE AVENUE SW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20024	33-1137541	501(C)(3)	1,315,000.	0.			ACTION, ADVOCACY
APPALACHIAN COMMUNITY FUND							
1405 EAST MAGNOLIA AVENUE							
KNOXVILLE, TN 37917	62-1316019	501(C)(3)	9,944.	0.			TECHNOLOGY AND INNOVATI
ARCHIVE OF CONTEMPORARY MUSIC							
54 WHITE ST							CIVIL RIGHTS, SOCIAL
NEW YORK, NY 10013	13-3347764	501(C)(3)	100,000.	0.			ACTION, ADVOCACY
ARTICLE IV							
2308 MOUNT VERNON AVE							CIVIL RIGHTS, SOCIAL
NEW YORK, NY 22301	86-2820532	501(C)(4)	433,108.	0.			ACTION, ADVOCACY
ASYLUM SEEKER ADVOCACY PROJECT							
228 PARK AVE S							CIVIL RIGHTS, SOCIAL
NEW YORK, NY 10003	83-3011862	501(C)(3)	250,000.	0.			ACTION, ADVOCACY

Part II Continuation of Grants and Other A	ssistance to Do	mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	<b>(b)</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
ATLANTA COMPREHENSIVE WELLNESS							
CLINIC - 1874 PIEDMONT AVE NE -							
ATLANTA, GA 30324	82-2940756		157,471.	0.			HEALTH
ATLANTA WOMEN'S MEDICAL CENTER INC							
235 WEST WIEUCA ROAD							
ATLANTA, GA 30342	23-2060652		479,929.	0.			HEALTH
AIDANIA, GA 30342	23-2000032		413,323.	0.			HEADIN
AVOW FOUNDATION FOR ABORTION							
ACCESS - 1101 W 34TH ST - AUSTIN,							
TX 78705	74-2543342	501(C)(3)	52,000.	0.			HEALTH
			,				
AYERS AND STUNTZ INC							
811 SOUTH PERRY STREET							
MONTGOMERY, AL 36104	63-0895744		25,000.	0.			HEALTH
BALLOT INITIATIVE STRATEGY CENTER							
FOUNDATION - 1660 L ST NW -				_			CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20036	04-3454684	501(C)(3)	24,000.	0.			ACTION, ADVOCACY
BESTSELF BEHAVIORAL HEALTH INC							
255 DELAWARE AVENUE							YOUTH DEVELOPMENT AND
BUFFALO, NY 14202	16-1004090	501(C)(3)	50,000.	0.			EDUCATION
		552(5)(5)	33,555:				
BETTER PENNSYLVANIA INC							
1740 MAIN STREET							CIVIL RIGHTS, SOCIAL
MECHANICSBURG, PA 17055	84-3194010	501(C)(4)	491,800.	0.			ACTION, ADVOCACY
BLACK PROGRESSIVE ACTION COALITION							
1032 15TH STREET NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20005	82-1514760	501(C)(4)	1,750,000.	0.			ACTION, ADVOCACY
DI HE MOIDING IN GLIVES							
BLUE MOUNTAIN CLINIC							
610 N CALIFORNIA	01 0265001	E01/G)/3)	125 020	0.			11221 011
MISSOULA, MT 59802	81-0365291	DOT (C) (3)	135,839.	0.			HEALTH Schedule I (Form

HOPEWELL FUND 47-3681860

Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	<b>(b)</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
BLUE RIDGE ABORTION FUND INC							
PO BOX 5082 CHARLOTTESVILLE, VA 22905	27-1343669	501(C)(3)	6,026.	0.			TECHNOLOGY AND INNOVATION
BOLD FUTURES NM							
309 GOLD AVE SW ALBUQUERQUE, NM 87102	85-0481224	501(C)(3)	10,000.	0.			TECHNOLOGY AND INNOVATION
BOSTON ALLIANCE OF GAY AND LESBIAN YOUTH INC BAGLY - 28 COURT SQUARE - BOSTON, MA 02108	04-2785336	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT AND EDUCATION
BRAZIL FOUNDATION			, .				
216 EAST 45TH ST NEW YORK, NY 10017	13-4131482	501(C)(3)	25,000.	0.			HEALTH
BRIGHTON PARK NEIGHBORHOOD COUNCIL							YOUTH DEVELOPMENT AND
CHICAGO, IL 60632	36-4229387	501(C)(3)	50,000.	0.			EDUCATION
BUSINESS EDUCATION FUND 6218 GEORGIA AVE NW WASHINGTON, DC 20011	84-2969730	501(C)(3)	40,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
CAMBRIDGE REPRODUCTIVE HEALTH CONSULTANTS - 98 ELECTRIC AVE -							
SOMERVILLE, MA 02144	46-1645061	501(C)(3)	9,195.	0.			TECHNOLOGY AND INNOVATION
CAROLINA ABORTION FUND PO BOX 51534							
DURHAM, NC 27717	45-3810502	501(C)(3)	10,000.	0.			TECHNOLOGY AND INNOVATION
CATHOLICS FOR CHOICE 1436 U ST NW							
WASHINGTON, DC 20009	52-1154418	501(C)(3)	6,300.	0.			TECHNOLOGY AND INNOVATION

Schedule I (Form 990)

Page 1

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	ırt 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
CENTENNIAL STATE PROSPERITY							
PO BOX 6692							CIVIL RIGHTS, SOCIAL
DENVER, CO 80206	84-3973327	501(C)(4)	514,475.	0.			ACTION, ADVOCACY
GINTED FOR AMERICAN PROGREGG							
CENTER FOR AMERICAN PROGRESS 1333 H ST NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20005	30-0126510	501 (C) (3)	250,000.	0.			ACTION, ADVOCACY
WASHINGTON, DC 20003	30 0120310	301(0)(3)	250,000.	0.			ACTION, ADVOCACT
CENTER FOR MEDIA AND DEMOCRACY,							
INC 122 W WASHINGTON AVENUE -							CIVIL RIGHTS, SOCIAL
MADISON, WI 53703	39-1777402	501(C)(3)	150,000.	0.			ACTION, ADVOCACY
CENTER FOR TECHNOLOGY AND CIVIC							
LIFE - 233 N MICHIGAN AVENUE -	45.0450604	F04 (~) (0)	1 100 000				CIVIL RIGHTS, SOCIAL
CHICAGO, IL 60601	47-2158694	501(C)(3)	1,100,000.	0.			ACTION, ADVOCACY
CENTER ON HALSTED							
3656 N HALSTED ST							YOUTH DEVELOPMENT AND
CHICAGO, IL 60613	51-0178807	501(C)(3)	50,000.	0.			EDUCATION
CHERRY HILL WOMEN'S CENTER INC							
601 CHAPEL AVE EAST							
CHERRY HILL, NJ 08034	23-2068660		188,150.	0.			HEALTH
CHICAGO ABORTION FUND							
333 W NORTH AVE							
CHICAGO, IL 60610	36-3451293	501(C)(3)	6,516.	0.			TECHNOLOGY AND INNOVATION
			·				
CHILDRENS DEFENSE FUND							
840 FIRST STREET NE							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20002	52-0895622	501(C)(3)	203,522.	0.			ACTION, ADVOCACY
CHOOSE LOVE INC							
45 WEST 36TH ST., 6TH FLOOR							CIVIL RIGHTS, SOCIAL
NEW YORK, NY 10018-7635	83-1378746	501(C)(3)	50,000.	0.			ACTION, ADVOCACY
	1 22 20,0,10	· · · · · · · · · · · · · · · · · · ·	1 25,550.	1		1	Oak abla L/Farra 000)

Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	47-3001000 Pag
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CIVIC NATION							
1156 15TH ST NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20005	47-3576918	501(C)(3)	500,000.	0.			ACTION, ADVOCACY
COLORADO CENTER ON LAW AND POLICY							
789 N SHERMAN ST							CIVIL RIGHTS, SOCIAL
DENVER, CO 80203	84-1264154	501(C)(3)	20,000.	0.			ACTION, ADVOCACY
COLORADO CONSUMER HEALTH							
INITIATIVE - 1420 N OGDEN STREET -							CIVIL RIGHTS, SOCIAL
DENVER, CO 80218	84-1145452	501(C)(3)	42,500.	0.			ACTION, ADVOCACY
COLORADO DEMOCRACY NETWORK							
PO BOX 816							CIVIL RIGHTS, SOCIAL
DENVER, CO 80201	45-4555568	501(C)(3)	34,000.	0.			ACTION, ADVOCACY
COLORADO DOULA PROJECT							
2600 9TH STREET APT B10							
BOULDER, CO 80304	81-0900536	501(C)(3)	6,495.	0.			TECHNOLOGY AND INNOVATION
COLUMBUS WOMEN'S HEALTH							
ORGANIZATION - 3850 ROSEMONT DR -							
COLUMBUS, GA 31904	27-3509644		25,000.	0.			HEALTH
COMMITTEE TO PROTECT MEDICARE							
EDUCATION FUND - 3317 W FULLERTON							CIVIL RIGHTS, SOCIAL
AVE - CHICAGO, IL 60647	85-1300728	501(C)(3)	292,000.	0.			ACTION, ADVOCACY
COMMON CAUSE EDUCATION FUND							
805 15TH STREET NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20005	31-1705370	501(C)(3)	175,000.	0.			ACTION, ADVOCACY
COMMUNITY ROOTS MIDWIFE COLLECTIVE							
738 COFFMAN STREET							
LONGMONT, CO 80501	83-2559201	501(C)(3)	9,910.	0.			TECHNOLOGY AND INNOVATION

(a) Name and address of organization or government (b) EIN (c) IFIC section if applicable (d) Amount of cash grant (s) Amount of noncash assistance (s) Purpose of grant or assistance (s) Purp	Schedule I (Form 990) HOPEWELL FUND  Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	s and Domestic Co	vernments (Sch	edule I (Form 990) Pa		47-3681860 Pag
PENNSYLVANIA - PO BOX 2125 - PHILADELPHIA, PA 19103	(a) Name and address of		(c) IRC section	(d) Amount of	(e) Amount of noncash	(f) Method of valuation (book, FMV,	(g) Description of	
CONSIMERS FOR AFFORDABLE HEALTH CARE FOUNDATION - 12 CHURCH STREET - AUGUSTA, ME 04330  04-3366975 501(C)(3)  18,500.  0.  CONWAYSTRATEGIC, LLC 202 18TH STREET NW MASSHIMPTON, DC 20009  47-2702041  152,589.  0.  HEALTH  COURIER NEWSCOM INC 8588 RICHMOND HWY ALEXANDRIA, VA 22309  83-4159180  100,000.  0.  CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY  CIVIL RIGHTS, SOCIAL								CIVIL RIGHTS, SOCIAL
CARE FOUNDATION - 12 CHURCH STREET - AUGUSTA, ME 04330 04-3366975 501(C)(3) 18,500. 0. C.	PHILADELPHIA, PA 19103	11-3399458	501(C)(4)	25,000.	0.			ACTION, ADVOCACY
CONWAYSTRATEGIC, LLC 2202 18TH STREET NW WASHINGTON, DC 20009 47-2702041 152,589. 0. HEALTH  COURIER NEWSGOOM INC 8588 RICHMOND HWY ALEXANDRIA, VA 22309 83-4159180 100,000. 0. CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY  DARIA SERVICES 334 ALLISON ST NW WASHINGTON, DC 20011 87-3048393 501(C)(3) 30,000. 0. TECHNOLOGY AND INNOVA  DC ABORTION FUND FO BOX 65061 WASHINGTON, DC 20035 20-4713150 501(C)(3) 30,015. 0. TECHNOLOGY AND INNOVA  DEMOCRACY 21 EDUCATION FUND 2000 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20036 52-1956824 501(C)(3) 20,000. 0. CIVIL RIGHTS, SOCIAL WASHINGTON, DC 20036 52-1956824 501(C)(3) 20,000. 0. TECHNOLOGY AND INNOVA  DEMOCRACY FORMARD FOUNDATION 655 15TH STREET NW WASHINGTON, DC 20005 82-1007988 501(C)(3) 10,000. 0. TECHNOLOGY AND INNOVA  DEMOCRACY FORMARD FOUNDATION 655 15TH STREET NW WASHINGTON, DC 20005 82-1007988 501(C)(3) 10,000. 0. TECHNOLOGY AND INNOVA  DEMOCRACY FORMARD FOUNDATION 655 15TH STREET NW WASHINGTON, DC 20005 82-1007988 501(C)(3) 10,000. 0. TECHNOLOGY AND INNOVA  DEMOCRACY NORTH CAROLINA 3000 ABRIAL CENTER FARWAY  CIVIL RIGHTS, SOCIAL	CARE FOUNDATION - 12 CHURCH STREET	04-3366975	501/C)/3)	18 500	0			· · · · · · · · · · · · · · · · · · ·
2202 18TH STREET NW WASHINGTON, DC 20009 47-2702041 152,589. 0. HEALTH  COURIER NEWSROOM INC 8588 RICHMOND HMY ALEXANDRIA, VA 22309 83-4159180 100,000. 0. ACTION, ADVOCACY  DARIA SERVICES 334 ALLISON ST NW WASHINGTON, DC 20011 87-3048393 501(C)(3) 30,000. 0. TECHNOLOGY AND INNOVAL  DC ABORTION FUND PO BOX 65061 WASHINGTON, DC 20035 20-4713150 501(C)(3) 30,015. 0. TECHNOLOGY AND INNOVAL  DEMOCRACY 21 EDUCATION FUND 2000 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20036 52-1956824 501(C)(3) 20,000. 0. CIVIL RIGHTS, SOCIAL WASHINGTON, DC 20035 82-1007988 501(C)(3) 10,000. 0. TECHNOLOGY AND INNOVAL  DEMOCRACY FORWARD FOUNDATION 655 15TH STREET NW WASHINGTON, DC 20005 82-1007988 501(C)(3) 10,000. 0. TECHNOLOGY AND INNOVAL  DEMOCRACY FORWARD FOUNDATION 655 15TH STREET NW WASHINGTON, DC 20005 82-1007988 501(C)(3) 10,000. 0. TECHNOLOGY AND INNOVAL  DEMOCRACY FORWARD FOUNDATION 655 15TH STREET NW WASHINGTON, DC 20005 82-1007988 501(C)(3) 10,000. 0. TECHNOLOGY AND INNOVAL  DEMOCRACY FORWARD FOUNDATION 650 15TH STREET NW WASHINGTON, DC 20005 82-1007988 501(C)(3) 10,000. 0. TECHNOLOGY AND INNOVAL  DEMOCRACY FORWARD FOUNDATION 650 15TH STREET NW WASHINGTON, DC 20005 82-1007988 501(C)(3) 10,000. 0. TECHNOLOGY AND INNOVAL  DEMOCRACY FORWARD FOUNDATION 650 15TH STREET NW WASHINGTON, DC 20005 82-1007988 501(C)(3) 10,000. 0. TECHNOLOGY AND INNOVAL  DEMOCRACY FORWARD FOUNDATION 650 15TH STREET NW WASHINGTON, DC 20005 82-1007988 501(C)(3) 10,000. 0. TECHNOLOGY AND INNOVAL  DEMOCRACY FORWARD FOUNDATION 650 15TH STREET NW WASHINGTON, DC 20005 82-1007988 501(C)(3) 10,000. 0. TECHNOLOGY AND INNOVAL  DEMOCRACY FORWARD FOUNDATION 650 15TH STREET NW WASHINGTON, DC 20005 82-1007988 501(C)(3) 10,000. 0. TECHNOLOGY AND INNOVAL  DEMOCRACY FORWARD FOUNDATION 650 15TH STREET NW WASHINGTON, DC 20005 82-1007988 501(C)(3) 10,000. 0. TECHNOLOGY AND INNOVAL  DEMOCRACY FORWARD FOUNDATION 650 15TH STREET NW WASHINGTON, DC 20005 82-1007988 501(C)(3) 10,000. 0. TECHNOLOGY AND INNOVAL  DEMOCRACY FOUNDATION FOUNDATION FOUNDATION FOUNDATION FOUNDATION FOUNDATI	- AUGUSTA, ME 04330	04-3300973	501(0/(3/	10,300.	0.			ACTION, ADVOCACT
COURIER NEWSROOM INC 8588 RICHMOND HWY ALEXANDRIA, VA 22309  83-4159180  100,000.  0.  CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY  DARIA SERVICES 334 ALLISON ST NW WASHINGTON, DC 20011  87-3048393 501(C)(3)  30,000.  0.  TECHNOLOGY AND INNOVA  DC ABORTION FUND PO BOX 65061 WASHINGTON, DC 20035  20-4713150 501(C)(3)  DEMOCRACY 21 EDUCATION FUND 2000 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20036  52-1956824 501(C)(3)  DEMOCRACY FORWARD FOUNDATION 655 15TH STREET NW WASHINGTON, DC 20005  82-1007988 501(C)(3)  DEMOCRACY FORWARD FOUNDATION 655 15TH STREET NW WASHINGTON, DC 20005  82-1007988 501(C)(3)  DEMOCRACY NORTH CAROLINA 3000 AERIAL CENTER PARKWAY  CIVIL RIGHTS, SOCIAL	2202 18TH STREET NW	45 0500041		150 500	•			
8588 RICHMOND HWY ALEXANDRIA, VA 22309 83-4159180 100,000. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	WASHINGTON, DC 20009	47-2702041		152,589.	0.			HEALTH
DARIA SERVICES  334 ALLISON ST NW  WASHINGTON, DC 20011 87-3048393 501(C)(3) 30,000. 0. TECHNOLOGY AND INNOVA  DC ABORTION FUND PO BOX 65061  WASHINGTON, DC 20035 20-4713150 501(C)(3) 30,015. 0. TECHNOLOGY AND INNOVA  DEMOCRACY 21 EDUCATION FUND 2000 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20036 52-1956824 501(C)(3) 20,000. 0. CIVIL RIGHTS, SOCIAL  MASHINGTON, DC 20036 82-1007988 501(C)(3) 10,000. 0. TECHNOLOGY AND INNOVA  DEMOCRACY FORWARD FOUNDATION 655 15TH STREET NW WASHINGTON, DC 20005 82-1007988 501(C)(3) 10,000. 0. TECHNOLOGY AND INNOVA  DEMOCRACY NORTH CAROLINA 3000 AERIAL CENTER PARKWAY								CIVIL RIGHTS, SOCIAL
334 ALLISON ST NW WASHINGTON, DC 20011 87-3048393 501(C)(3) 30,000. 0. TECHNOLOGY AND INNOVAL  DC ABORTION FUND PO BOX 65061 WASHINGTON, DC 20035 20-4713150 501(C)(3) 30,015. 0. TECHNOLOGY AND INNOVAL  DEMOCRACY 21 EDUCATION FUND 2000 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20036 52-1956824 501(C)(3) 20,000. 0. CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY  DEMOCRACY FORWARD FOUNDATION 655 15TH STREET NW WASHINGTON, DC 20005 82-1007988 501(C)(3) 10,000. 0. TECHNOLOGY AND INNOVAL  DEMOCRACY NORTH CAROLINA 3000 AERIAL CENTER PARKWAY	ALEXANDRIA, VA 22309	83-4159180		100,000.	0.			ACTION, ADVOCACY
DC ABORTION FUND PO BOX 65061 WASHINGTON, DC 20035  20-4713150 501(C)(3)  30,015.  0.  TECHNOLOGY AND INNOVAY  DEMOCRACY 21 EDUCATION FUND 2000 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20036  52-1956824 501(C)(3)  20,000.  0.  DEMOCRACY FORWARD FOUNDATION 655 15TH STREET NW WASHINGTON, DC 20005  82-1007988 501(C)(3)  10,000.  0.  TECHNOLOGY AND INNOVAY  DEMOCRACY NORTH CAROLINA 3000 AERIAL CENTER PARKWAY  CIVIL RIGHTS, SOCIAL								
PO BOX 65061 WASHINGTON, DC 20035  20-4713150 501(C)(3)  30,015.  0.  TECHNOLOGY AND INNOVA:  DEMOCRACY 21 EDUCATION FUND  2000 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20036  52-1956824 501(C)(3)  20,000.  0.  DEMOCRACY FORWARD FOUNDATION 655 15TH STREET NW WASHINGTON, DC 20005  82-1007988 501(C)(3)  10,000.  0.  TECHNOLOGY AND INNOVA:  DEMOCRACY NORTH CAROLINA 3000 AERIAL CENTER PARKWAY	WASHINGTON, DC 20011	87-3048393	501(C)(3)	30,000.	0.			TECHNOLOGY AND INNOVATION
DEMOCRACY 21 EDUCATION FUND  2000 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20036  52-1956824 501(C)(3)  20,000.  0.  DEMOCRACY FORWARD FOUNDATION 655 15TH STREET NW WASHINGTON, DC 20005  82-1007988 501(C)(3)  10,000.  0.  TECHNOLOGY AND INNOVA:  DEMOCRACY NORTH CAROLINA 3000 AERIAL CENTER PARKWAY  CIVIL RIGHTS, SOCIAL								
2000 MASSACHUSETTS AVENUE NW WASHINGTON, DC 20036  52-1956824 501(C)(3)  20,000.  0.  CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY  DEMOCRACY FORWARD FOUNDATION 655 15TH STREET NW WASHINGTON, DC 20005  82-1007988 501(C)(3)  10,000.  0.  TECHNOLOGY AND INNOVA  DEMOCRACY NORTH CAROLINA 3000 AERIAL CENTER PARKWAY  CIVIL RIGHTS, SOCIAL	WASHINGTON, DC 20035	20-4713150	501(C)(3)	30,015.	0.			TECHNOLOGY AND INNOVATION
WASHINGTON, DC 20036 52-1956824 501(C)(3) 20,000. 0. ACTION, ADVOCACY  DEMOCRACY FORWARD FOUNDATION 655 15TH STREET NW  WASHINGTON, DC 20005 82-1007988 501(C)(3) 10,000. 0. TECHNOLOGY AND INNOVA:  DEMOCRACY NORTH CAROLINA 3000 AERIAL CENTER PARKWAY CIVIL RIGHTS, SOCIAL								CIVIL RIGHTS SOCIAL
655 15TH STREET NW WASHINGTON, DC 20005 82-1007988 501(C)(3) 10,000. 0. TECHNOLOGY AND INNOVA:  DEMOCRACY NORTH CAROLINA 3000 AERIAL CENTER PARKWAY CIVIL RIGHTS, SOCIAL		52-1956824	501(C)(3)	20,000.	0.			· '
WASHINGTON, DC 20005 82-1007988 501(C)(3) 10,000. 0. TECHNOLOGY AND INNOVAGE DEMOCRACY NORTH CAROLINA 3000 AERIAL CENTER PARKWAY CIVIL RIGHTS, SOCIAL								
3000 AERIAL CENTER PARKWAY CIVIL RIGHTS, SOCIAL		82-1007988	501(C)(3)	10,000.	0.			TECHNOLOGY AND INNOVATION
								CIVII. DICHTS SOCIAI
MOTITION, ADVOCACE	MORRISVILLE, NC 27560	56-2271150	501(C)(3)	31,200.	0.			ACTION, ADVOCACY

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Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	rt II.)	,
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DESERT STAR FAMILY PLANNING							
1526 W GLENDALE AVE							
PHOENIX, AZ 85021	46-2626520		53,277.	0.			HEALTH
DIVERSIFY OUR NARRATIVE							L
1968 S COAST HWY				_			YOUTH DEVELOPMENT AND
LAGUNA BEACH, CA 92651	85-3811196	501(C)(3)	50,000.	0.			EDUCATION
EASTERN MASSACHUSETTS ABORTION							
FUND INCORPORATED - 995							
MASSACHUSETTS AVE - CAMBRIDGE, MA							
02139	04-3502604	501(C)(3)	5,888.	0.			TECHNOLOGY AND INNOVATIO
EASTLAND WOMEN'S CLINIC							
15921 E 8 MILE ROAD							
EASTPOINT, MI 48021	38-2183445		35,000.	0.			HEALTH
ECONOMIC SECURITY PROJECT INC							
51 EAST 12TH STREET							CIVIL RIGHTS, SOCIAL
NEW YORK, NY 10003	85-3888872	501(C)(3)	1,071,793.	0.			ACTION, ADVOCACY
ECUMENICAL COALITION FOR WOMEN AND							
FAMILIES - 133 SAINT GEORGE AVE -				_			
BILOXI, MS 39530	47-3227605	501(C)(3)	107,000.	0.			HEALTH
EMPARG TNG							
EMBARC INC							MOTIMIT DEFINE OF THE PAID
PO BOX 221450	0.5 0.4504.00	504 (5) (2)	50.000				YOUTH DEVELOPMENT AND
CHICAGO, IL 60622	27-3453182	501(C)(3)	50,000.	0.			EDUCATION
TWEDGENGY WEDT ON AGGIGNATE TWO							
EMERGENCY MEDICAL ASSISTANCE INC							
PO BOX 33552				_			
PALM BEACH GARDENS, FL 33420	51-0198610	501(C)(3)	14,150.	0.			HEALTH
POLITO INOMINUME							
EQUIS INSTITUTE							DIGUES BEGUNG GOGETT
1728 OCEAN AVE	0.0 1220.455	E01/G)/2)		_			CIVIL RIGHTS, SOCIAL
SAN FRANCISCO, CA 94112	87-1337465	Dot(G)(3)	750,000.	0.			ACTION, ADVOCACY

Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EXHALE- AN AFTER ABORTION							
COUNSELING TALKLINE - PO BOX 14562							
- SAN FRANCISCO, CA 94114	94-3393719	501(C)(3)	19,305.	0.			TECHNOLOGY AND INNOVATIO
EXODUS FINANCIAL SERVICES							
2380 WYCLIFF STREET							CIVIL RIGHTS, SOCIAL
ST PAUL, MN 55114	47-1706853	501(C)(3)	50,000.	0.			ACTION, ADVOCACY
FAIR DEMOCRACY							
918 PENNSYLVANIA AVE SE							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20003	82-2747849	501(C)(4)	3,850,000.	0.			ACTION, ADVOCACY
FAIR FUTURE NC							
8 ST MARY'S STREET							CIVIL RIGHTS, SOCIAL
RALEIGH, NC 27605	84-3038674	501(C)(4)	140,000.	0.			ACTION, ADVOCACY
FAMILY FRIENDLY ACTION FUND							
114 NORTH MAIN STREET							CIVIL RIGHTS, SOCIAL
CONCORD, NH 03301	83-1806898	501(C)(4)	1,250,000.	0.			ACTION, ADVOCACY
FAMILY PLANNING ASSOCIATES MEDICAL							
GROUP LTD - 659 W WASHINGTON BLVD							
- CHICAGO, IL 60661	94-3160268		672,061.	0.			HEALTH
FAMILY VALUES AT WORK							
207 E BUFFALO STREET							CIVIL RIGHTS, SOCIAL
MILWAUKEE, WI 53202	27-0321696	501(C)(3)	50,000.	0.			ACTION, ADVOCACY
FEMHEALTH USA INC							
1001 CONNECTICUT AVENUE NW							
WASHINGTON, DC 20036	46-4144274	501(C)(3)	583,738.	0.			HEALTH
FEMINIST WOMEN'S HEALTH CENTER INC							
1924 CLIFF VALLEY WAY NE							
ATLANTA, GA 30329	58-1273243	501(C)(3)	470,755.	0.			HEALTH

Page 1

HOPEWELL FUND Schedule I (Form 990) Page 1 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 (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable cash grant valuation non-cash assistance or assistance noncash (book, FMV, assistance appraisal, other) FINANCIAL SERVICES STAKEHOLDER ACTION NFP - 2513 N CENTRAL PARK CIVIL RIGHTS, SOCIAL AVE - CHICAGO, IL 60647 82-1727600 501(C)(4) 30,000 0. ACTION, ADVOCACY FINANCIAL SERVICES STAKEHOLDER PROJECT NFP - 2513 N CENTRAL PARK CIVIL RIGHTS, SOCIAL AVE - CHICAGO, IL 60647 82-1722599 501(C)(3) 25,000 0 ACTION, ADVOCACY FLORIDA ACCESS NETWORK PO BOX 536522 ORLANDO, FL 32853 59-3396077 501(C)(3) 11,658, 0. TECHNOLOGY AND INNOVATION FLORIDA RIGHTS RESTORATION COALITION INC - 4081 LB MCLEOD CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY ROAD - ORLANDO, FL 32811 30-0714793 501(C)(3) 25,000. 0 FLORIDA WATCH ACTION 542 NE 72 ST CIVIL RIGHTS, SOCIAL 27-1856471 501(C)(4) MIAMI, FL 33138 0. ACTION, ADVOCACY 100,000. FOS FEMINISTA 125 MAIDEN LANE CIVIL RIGHTS, SOCIAL NEW YORK, NY 10038 13-1845455 501(C)(3) 0. ACTION, ADVOCACY 500,000 FOUNDATION FOR LOUISIANA 4354 S SHERWOOD FOREST BLVD CIVIL RIGHTS, SOCIAL BATON ROUGE, LA 70816 20-3399944 501(C)(3) ACTION, ADVOCACY 50 000 0. FREE FAIR PA CIVIL RIGHTS, SOCIAL 121 S BROAD ST PHILADELPHIA, PA 19107 86-1432786 501(C)(4) 45,000. 0. ACTION, ADVOCACY FREE PRESS INC PO BOX 60238 CIVIL RIGHTS, SOCIAL

Schedule I (Form 990)

ACTION ADVOCACY

FLORENCE, MA 01062

250 000.

0.

41-2106721 501(C)(3)

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	t II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FREEDOM VIRGINIA							
103 DUNDEE AVE							CIVIL RIGHTS, SOCIAL
RICHMOND, VA 23225	85-1257540	501(C)(4)	859,350.	0.			ACTION, ADVOCACY
FRONTERA FUND							
PO BOX 721011							
MCALLEN, TX 78504	47-4137116	501(C)(3)	9,348.	0.			HEALTH
FULL CIRCLE HEALTH CENTER							
210 W LAS CRUCES AVENUE							
LAS CRUCES, NM 88005	27-3700700		46,354.	0.			HEALTH
FUND FOR EDUCATIONAL EXCELLENCE							
800 N CHARLES ST							CIVIL RIGHTS, SOCIAL
BALTIMORE, MD 21201	52-1129402	501(C)(3)	49,900.	0.			ACTION, ADVOCACY
	02 2227202		22,266.	•			1011011, 1121001101
FUND FOR THE CITY OF NEW YORK INC							
121 AVENUE OF THE AMERICAS							CIVIL RIGHTS, SOCIAL
NEW YORK, NY 10013	13-2612524	501(C)(3)	582,796.	0.			ACTION, ADVOCACY
FUTURE FORWARD USA ACTION							
611 PENNSYLVANIA AVE SE							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20003	82-4170762	501(C)(4)	1,545,000.	0.			ACTION, ADVOCACY
FUTURE GEORGIA INC							
1972 BINNIES WAY							CIVIL RIGHTS, SOCIAL
BUFORD, GA 30519	87-4560489	501(C)(4)	110,000.	0.			ACTION, ADVOCACY
FUTURE NOW ACTION							
700 13TH ST NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20005	82-2390410	501(C)(4)	2,322,495.	0.			ACTION, ADVOCACY
FWD.US EDUCATION FUND INC							
1101 K STREET NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20005	82-0962378	E01/C\/2\	200,000.	0.			ACTION, ADVOCACY

Schedule I (Form 990)

HOPEWELL FUND

(a) Name and address of organization or government	( <b>b)</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
GAINESVILLE WOMAN CARE LLC							
1233 NW 10TH AVE							
GAINESVILLE, FL 32601	20-1789123		100,452.	0.			HEALTH
GEEARS THE GEORGIA EARLY EDUCATION							
ALLIANCE FOR READY - 3400							CIVIL RIGHTS, SOCIAL
PEACHTREE RD - ATLANTA, GA 30326	46-4250104	501(C)(3)	100,000.	0.			ACTION, ADVOCACY
GENDER JUSTICE							
663 UNIVERSITY AVE W							
SAINT PAUL, MN 55104	80-0603630	501(C)(3)	12,000.	0.			HEALTH
GENERATION DATA							
705 8TH STREET SE							
WASHINGTON, DC 20003	84-4031526	501(C)(4)	150,000.	0.			CAPACITY BUILDING
GIRLS WHO CODE INC							
1250 BROADWAY	20 252224	F04 (#) (0)					YOUTH DEVELOPMENT AND
NEW YORK, NY 10001	30-0728021	501(C)(3)	80,000.	0.			EDUCATION
GLOBAL NOMADS GROUP							
ONE PENN PLAZA							YOUTH DEVELOPMENT AND
NEW YORK, NY 10119	75-2750127	501(C)(3)	50,000.	0.			EDUCATION
GOOD NATION FOUNDATION INC							
100 CROSBY STREET							CIVIL RIGHTS, SOCIAL
NEW YORK, NY 10012	81-4768448	501(C)(3)	250,000.	0.			ACTION, ADVOCACY
HEALTH ACCESS FUND							
9466 GEORGIA AVE							CIVIL RIGHTS, SOCIAL
SILVER SPRING, MD 20910	88-0640668	501(C)(3)	100,000.	0.			ACTION, ADVOCACY
HEALTH ACTION NEW MEXICO							
3200 OSUNA RD NE							CIVIL RIGHTS, SOCIAL
	85-0481860		10,000.				ACTION, ADVOCACY

Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	overnments (Sch	edule I (Form 990). Pa	rt II.)	47-3001000 Page 1
(a) Name and address of organization or government	<b>(b)</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
HEALTHQUARTERS INC							
100 CUMMINGS CENTER							
BEVERLY, MA 01915	04-2475363	501(C)(3)	15,000.	0.			TECHNOLOGY AND INNOVATION
HOPE MEDICAL GROUP FOR WOMEN							
210 KINGS HIGHWAY			35.000				L
SHREVEPORT, LA 71104	72-1448398		35,000.	0.			HEALTH
HUMANITY PLUS INC							
5042 WILSHIRE BOULEVARD							INTERNATIONAL DEVELOPMENT
LOS ANGELES, CA 90036	01-0575214	501(C)(3)	212,190.	0.			AND FOREIGN AFFAIRS
TE WILD HOW							
IF WHEN HOW 1714 FRANKLIN STREET							
OAKLAND, CA 94612	90-0181944	501(C)(3)	30,000.	0.			TECHNOLOGY AND INNOVATION
<u> </u>	30 0101311	552(5)(5)		•			
IGH PLLC							
1037 NE 65TH ST							
SEATTLE, WA 98115	83-3587381		136,396.	0.			HEALTH
IMAGINE NC FIRST							
PO BOX 428							CIVIL RIGHTS, SOCIAL
RALEIGH, NC 27602	46-4006055	501(C)(3)	250,000.	0.			ACTION, ADVOCACY
141222011, 110 27002	10 100000		200,000.	•			
INNOVATIONS OF REPRODUCTIVE HEALTH							
ACCESS - 1001 46TH STREET -							CIVIL RIGHTS, SOCIAL
EMERYVILLE, CA 94608	86-2767502	501(C)(3)	108,000.	0.			ACTION, ADVOCACY
INSTITUTE ON TAXATION AND ECONOMIC							OTIVITA DIGUMA COCTA
POLICY - 1616 P ST NW -	04 2600165	E01/G)/2)	140.000				CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20036	04-3688165	DUI(C)(3)	140,000.	0.			ACTION, ADVOCACY
INTERNATIONAL PLANNED PARENTHOOD							
FEDERATION WORLDWIDE - 1129 20TH							CIVIL RIGHTS, SOCIAL
STREET NW - WASHINGTON, DC 20036	20-4365831	501(C)(3)	300,000.	0.			ACTION, ADVOCACY

(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	<b>(f)</b> Method of valuation (book, FMV,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					appraisal, other)		
INTERNATIONAL REFUGEE ASSISTANCE							
PROJECT INC - 40 RECTOR ST., 9TH							CIVIL RIGHTS, SOCIAL
FLOOR - NEW YORK, NY 10006	82-2167556	501(C)(3)	160,000.	0.			ACTION, ADVOCACY
ISSUE ONE							
1401 K ST NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20005	32-0384285	501(C)(3)	100,000.	0.			ACTION, ADVOCACY
JANES DUE PROCESS INC							
PO BOX 685137							
AUSTIN, TX 78768	75-2917844	501(C)(3)	14,396.	0.			TECHNOLOGY AND INNOVATION
JEWS UNITED FOR JUSTICE							
1100 H STREET NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20005	52-2346578	501(C)(3)	40,000.	0.			ACTION, ADVOCACY
JOAN G LOVERING HEALTH CENTER							
559 PORTSMOUTH AVE							
GREENLAND, NH 03840	22-2572590	501(C)(3)	20,637.	0.			HEALTH
JOHNS HOPKINS UNIVERSITY							
3400 N CHARLES STREET							CIVIL RIGHTS, SOCIAL
BALTIMORE, MD 21218	52-0595110	501(C)(3)	300,000.	0.			ACTION, ADVOCACY
JTP PROFESSIONAL SERVICE							
CORPORATION - 2038 FORD PARKWAY -							CIVIL RIGHTS, SOCIAL
SAINT PAUL, MN 55116	85-0868142	501(C)(3)	600,700.	0.			ACTION, ADVOCACY
WNOVILLE GENMED EOD DEDDODUGETUR							
KNOXVILLE CENTER FOR REPRODUCTIVE HEALTH - 1547 W CLINCH AVE -							
KNOXVILLE, TN 37916	62-0949880		29,869.	0.			HEALTH
	32 33 23 300						
LEAD PA INSTITUTE INC							ATUTE DIGUMS SOSTER
100 SOUTH BROAD STREET	85-3429918	E01/G\/3\	79,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
PHILADELPHIA, PA 19110	03-3423310	201(0)(3)	13,000.	l			MCITON, ADVOCACI

(a) Name and address of	<b>(b)</b> EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government	(2) =	if applicable	cash grant	noncash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
LEADERSHIP NOW PROJECT							
1401 K ST NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20005	82-1780610	501(C)(4)	610,070.	0.			ACTION, ADVOCACY
LEADMO							
3407 S JEFFERSON AVE							CIVIL RIGHTS, SOCIAL
ST LOUIS, MO 63118	84-4165460	501(C)(3)	10,000.	0.			ACTION, ADVOCACY
LIGHTNING BASKETBALL INC							
45 CHERRY VALLEY AVENUE							CIVIL RIGHTS, SOCIAL
WEST HEMPSTEAD, NY 11552	11-3633046	501(C)(3)	25,000.	0.			ACTION, ADVOCACY
LILITH FUND, INC.							
PO BOX 684949							
AUSTIN, TX 78768	74-3008249	501(C)(3)	23,113.	0.			TECHNOLOGY AND INNOVATION
LITTLE ROCK FAMILY PLANNING							
SERVICES PLLC - 4 OFFICE PARK DR -							
LITTLE ROCK, AR 72211	27-1499789		110,319.	0.			HEALTH
LIVE FREE CHICAGO							
4445 S KING DR							CIVIL RIGHTS, SOCIAL
CHICAGO, IL 60653	81-5487128	501(C)(3)	50,000.	0.			ACTION, ADVOCACY
MAINE CENTER FOR ECONOMIC POLICY							
ONE WESTON COURT							CIVIL RIGHTS, SOCIAL
AUGUSTA, ME 04330	22-3317572	501(C)(3)	35,000.	0.			ACTION, ADVOCACY
MAINE CITIZENS FOR CLEAN ELECTIONS							
PO BOX 18187							CIVIL RIGHTS, SOCIAL
PORTLAND, ME 04112	27-2646667	501(C)(3)	20,000.	0.			ACTION, ADVOCACY
MAINERS FOR WORKING FAMILIES							
49 QUEBEC ST. APT 3							CIVIL RIGHTS, SOCIAL
PORTLAND, ME 04101	84-3390123	501(C)(4)	260,932.	0.			ACTION, ADVOCACY

HOPEWELL FUND

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Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	overnments (Scho	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MARYLAND CENTER ON ECONOMIC POLICY							
1800 N CHARLES ST							CIVIL RIGHTS, SOCIAL
BALTIMORE, MD 21201	90-0999151	501 (C) (3)	110,000.	0.			ACTION, ADVOCACY
MARYLAND CITIZENS HEALTH	30 0333131	301(0)(3)	110,000.	••			lierron, indvenier
INITIATIVE EDUCATION FUND INC -							
2600 ST. PAUL STREET - BALTIMORE,							CIVIL RIGHTS, SOCIAL
MD 21218	52-2173223	501(C)(3)	25,000.	0.			ACTION, ADVOCACY
MARYLAND FAMILY NETWORK, INC							
1001 EASTERN AVE 2ND FLOOR							CIVIL RIGHTS, SOCIAL
BALTIMORE, MD 21202	52-1486702	501(C)(3)	49,750.	0.			ACTION, ADVOCACY
MARYLAND PUBLIC INTEREST RESEARCH							
FOUNDATION - 2209 MARYLAND AVENUE							CIVIL RIGHTS, SOCIAL
- BALTIMORE, MD 21218	52-1033638	501(C)(3)	35,000.	0.			ACTION, ADVOCACY
MARYLAND RISE							
7850 WALKER DRIVE							CIVIL RIGHTS, SOCIAL
GREENBELT, MD 20770	85-1251741	501(C)(4)	130,000.	0.			ACTION, ADVOCACY
MARYPIRG CITIZEN LOBBY INC							GIVII DIGUMA GOGINI
2209 MARYLAND AVE	FO 1010010	E01/Q\/4\	15 000	_			CIVIL RIGHTS, SOCIAL
BALTIMORE, MD 21218	52-1818910	501(C)(4)	15,000.	0.			ACTION, ADVOCACY
MAYDAY MEDICINES INC							
442 5TH AVENUE							
MANHATTAN, NY 10018	88-2577468	501(C)(3)	1,586,219.	0.			 HEALTH
	00 2377100	301(0)(3)	1,300,213.	••			
MEDIA MATTERS FOR AMERICA							
800 MAINE AVE SW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20024	47-0928008	501(C)(3)	250,000.	0.			ACTION, ADVOCACY
				•			,
MEMPHIS CENTER FOR REPRODUCTIVE							
HEALTH - 1203 POPLAR AVENUE -							
MEMPHIS, TN 38104	62-0931089	501(C)(3)	981,426.	0.			HEALTH
<u> </u>	1	ı	, , ,	<u> </u>		1	Schodula I (Form 9

(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
MENDING MATTERS							
11835 CARMEL MOUNTAIN RD							YOUTH DEVELOPMENT AND
SAN DIEGO, CA 92128	46-4080792	501(C)(3)	50,000.	0.			EDUCATION
METRO ORGANIZATION FOR RACIAL AND							
ECONOMIC EQUITY - 3151 OLIVE ST -							CIVIL RIGHTS, SOCIAL
KANSAS CITY, MO 61409	20-2470054	501(C)(3)	50,000.	0.			ACTION, ADVOCACY
MIAMI FREEDOM PROJECT INC							
937 NW 3RD AVENUE							CIVIL RIGHTS, SOCIAL
MIAMI, FL 33136	84-3808281	501(C)(4)	120,048.	0.			ACTION, ADVOCACY
			,				,
MICHIGAN LEAGUE OF RESPONSIBLE							
VOTERS - 614 SEYMOUR AVE -							CIVIL RIGHTS, SOCIAL
LANSING, MI 48933	26-0900990	501(C)(4)	250,000.	0.			ACTION, ADVOCACY
MICHIGAN ORGANIZATION ON							
ADOLESCENT SEXUAL HEALTH - PO BOX							
1386 - EAST LANSING, MI 48826	26-3566862	501(C)(3)	5,518.	0.			TECHNOLOGY AND INNOVATION
,			,				
MICHIGAN VOICES							
2727 2ND AVE							CIVIL RIGHTS, SOCIAL
DETROIT, MI 48201	83-0612165	501(C)(3)	250,000.	0.			ACTION, ADVOCACY
MIDWEST ACCESS COALITION							
3052 W. NORTH AVENUE							
CHICAGO, IL 60647	47-2160168	501(C)(3)	8,000.	0.			TECHNOLOGY AND INNOVATION
MIDWEST ACCESS PROJECT							
5215 N RAVENSWOOD AVE				_			
CHICAGO, IL 60640	20-8336719	501(C)(3)	5,193.	0.			TECHNOLOGY AND INNOVATION
MINDFUL SCHOOLS							
1260 45TH ST							YOUTH DEVELOPMENT AND
EMERYVILLE, CA 94608	27-3261154	501(C)(3)	50,000.	0.			EDUCATION

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HOPEWELL FUND

Schedule I (Form 990)

HOPEWELL FUND

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	47-3001000 Page
(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
MINNESOTA VOICE							
165 WESTERN AVE NORTH							CIVIL RIGHTS, SOCIAL
SAINT PAUL, MN 55102	46-4457692	501(C)(3)	50,000.	0.			ACTION, ADVOCACY
MOMSRISING EDUCATION FUND							
12011 BEL RED RD							CIVIL RIGHTS, SOCIAL
BELLEVUE, WA 98005	45-2499952	501(C)(3)	40,000.	0.			ACTION, ADVOCACY
MONTANA BUDGET AND POLICY CENTER							
15 WEST 6TH ST							CIVIL RIGHTS, SOCIAL
HELENA, MT 59601	80-0624179	501(C)(3)	40,000.	0.			ACTION, ADVOCACY
MOORE IMPACT INC							
2590 WELTON ST							ARTS, CULTURE, AND
DENVER, CO 80205	84-4714243	501(C)(3)	150,000.	0.			HUMANITIES
MOTHERING JUSTICE							
17320 LIVERNOIS AVE							CIVIL RIGHTS, SOCIAL
DETROIT, MI 48221	45-3740989	501(C)(3)	80,000.	0.			ACTION, ADVOCACY
MOVEMENT ADVANCEMENT PROJECT INC							
1905 15TH STREET							CIVIL RIGHTS, SOCIAL
BOULDER, CO 80306	47-3968535	501(C)(3)	300,000.	0.			ACTION, ADVOCACY
NARAL PRO CHOICE ARIZONA							
FOUNDATION - 4141 N 32ND STREET -							
PHOENIX, AZ 85018	30-0380039	501(C)(3)	10,000.	0.			TECHNOLOGY AND INNOVATION
NARAL PRO CHOICE MISSOURI							
FOUNDATION - 1210 S. VANDEVENTER -							
ST LOUIS, MO 63110	43-1770549	501(C)(3)	11,315.	0.			HEALTH
NARAL PRO CHOICE NC FOUNDATION							
4711 HOPE VALLEY ROAD							
DURHAM, NC 27707	32-0117915	501(C)(3)	7,000.	0.			HEALTH

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Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Scho	edule I (Form 990), Pa	rt II.)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NARAL PRO CHOICE OREGON FOUNDATION							
610 SW ALDER							
PORTLAND, OR 97205	93-0803636	501(C)(3)	12,292.	0.			 HEALTH
NARAL PRO CHOICE WASHINGTON							
FOUNDATION - 1916 PIKE PLACE -							
SEATTLE, WA 98101	91-1353222	501(C)(3)	12,000.	0.			HEALTH
NATIONAL ABORTION FEDERATION							
1090 VERMONT AVENUE NW							
WASHINGTON, DC 20005	43-1097957	501(C)(3)	20,000.	0.			HEALTH
NATIONAL CONFERENCE ON CITIZENSHIP							
1920 L STREET NW	50 060000	504 (5) (3)	65.000				ARTS, CULTURE, AND
WASHINGTON, DC 20036	52-0698385	501(C)(3)	65,000.	0.			HUMANITIES
NAMIONAL POLITMY DROITECT							
NATIONAL EQUITY PROJECT 1720 BROADWAY							
OAKLAND, CA 94612	94-3222960	501(C)(3)	75,000.	0.			HEALTH
OARDAND, CA 94012	J4 3222300	501(0)(3)	73,000.	· ·			IIBAUTII
NATIONAL HEALTH LAW PROGRAM INC							
3701 WILSHIRE BLVD							
LOS ANGELES, CA 90010	95-3080947	501(C)(3)	100,000.	0.			HEALTH
·			1				
NATIONAL LATINA INSTITUTE FOR							
REPRODUCTIVE JUSTICE - 40 EXCHANGE							
PLACE - NEW YORK, NY 10005	52-1891734	501(C)(3)	90,000.	0.			HEALTH
NATIONAL NETWORK OF ABORTION FUNDS							
9450 SW GEMINI DR							
BEAVERTON, OR 97008	04-3236982	501(C)(3)	101,500.	0.			HEALTH
NC CHILD							
3109 POPLARWOOD CT, STE 300							CIVIL RIGHTS, SOCIAL
RALEIGH, NC 27604	58-1534066	501(C)(3)	75,000.	0.			ACTION, ADVOCACY

(a) Name and address of organization or government	<b>(b)</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
NC JUSTICE CENTER							
224 S. DAWSON ST.							CIVIL RIGHTS, SOCIAL
RALEIGH, NC 27601	56-1348186	501(C)(3)	23,800.	0.			ACTION, ADVOCACY
NEBRASKA ABORTION RESOURCES							
17105 MERION DRIVE							
OMAHA, NE 68136	85-1982987	501(C)(3)	5,809.	0.			TECHNOLOGY AND INNOVATION
NEBRASKA APPLESEED CENTER FOR LAW							
IN PUBLIC INTEREST - PO BOX 83613							CIVIL RIGHTS, SOCIAL
- LINCOLN, NE 68501	47-0798343	501(C)(3)	14,200.	0.			ACTION, ADVOCACY
NEO PHILANTHROPY INC							
45 W 36TH STREET							
NEW YORK, NY 10018	13-3191113	501(C)(3)	34,831.	0.			TECHNOLOGY AND INNOVATION
NEVADA ALLIANCE							
3556 E RUSSELL RD							CIVIL RIGHTS, SOCIAL
LAS VEGAS, NV 89120	83-0744945	501(C)(4)	625,000.	0.			ACTION, ADVOCACY
NEW AMERICAN LEADERS PROJECT INC							
530 7TH AVE							CIVIL RIGHTS, SOCIAL
NEW YORK, NY 10018	45-3770977	501(C)(3)	250,000.	0.			ACTION, ADVOCACY
NEW DAY NEVADA INC							
7991 HACKBERRY DRIVE							CIVIL RIGHTS, SOCIAL
LAS VEGAS, NV 89123	84-3203462	501(C)(4)	2,088,000.	0.			ACTION, ADVOCACY
NEW ERA COLORADO FOUNDATION							
PO BOX 4274							CIVIL RIGHTS, SOCIAL
BOULDER, CO 80306	26-1389272	501(C)(3)	20,000.	0.			ACTION, ADVOCACY
NEW HAMPSHIRE DEMOCRACY FUND							
PO BOX 176							CIVIL RIGHTS, SOCIAL
PORTSMOUTH, NH 03802	84-4003182	501(C)(3)	50,000.	0.			ACTION, ADVOCACY

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Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	<b>(b)</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
NEW MEXICANS TO PREVENT GUN							
VIOLENCE - 3869 OLD SANTA FE TRAIL							CIVIL RIGHTS, SOCIAL
- SANTA FE, NM 87505	46-3026846	501(C)(3)	30,000.	0.			ACTION, ADVOCACY
·							,
NEW MEXICO FAMILIES FORWARD							
PO BOX 7073							CIVIL RIGHTS, SOCIAL
ALBUQUERQUE, NM 87194	87-1654225	501(C)(4)	382,400.	0.			ACTION, ADVOCACY
NEW MEXICO VOICES FOR CHILDREN							
625 SILVER AVENUE SW							CIVIL RIGHTS, SOCIAL
ALBUQUERQUE, NM 87102	85-0348301	501(C)(3)	16,910.	0.			ACTION, ADVOCACY
NEW ORLEANS ABORTION FUND INC							
PO BOX 770141	46 0050114	E01/G)/2)	10.000	_			
NEW ORLEANS, LA 70117	46-0950114	DUI(C)(3)	10,000.	0.			TECHNOLOGY AND INNOVATIO
NEW PENNSYLVANIA PROJECT EDUCATION							
FUND - PO BOX 443 - WEST CHESTER,							CIVIL RIGHTS, SOCIAL
PA 19381	86-1900180	501(C)(4)	50,000.	0.			ACTION, ADVOCACY
			,				·
NEW RIVER ABORTION ACCESS FUND							
PO BOX 10701							
BLACKSBURG, VA 24062	84-2154547	501(C)(3)	7,352.	0.			TECHNOLOGY AND INNOVATIO
NEW VENTURE FUND							
1828 L STREET, NW SUITE 300-A							CIVIL RIGHTS, SOCIAL
washingTon, DC 20036	20-5806345	501(C)(3)	5,059,658.	0.			ACTION, ADVOCACY
,							,
NEW YORK UNIVERSITY							
295 LAFAYETTE STREET							CIVIL RIGHTS, SOCIAL
NEW YORK, NY 10012	13-5562308	501(C)(3)	243,000.	0.			ACTION, ADVOCACY
NEXTGEN CHAMBER OF COMMERCE							
FOUNDATION - 700 PENNSYLVANIA AVE							YOUTH DEVELOPMENT AND
SE - WASHINGTON, DC 20001	82-4835903	501(C)(3)	50,000.	0.			EDUCATION
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Part II   Continuation of Grants and Other A	Assistance to Don	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.) T	<u> </u>
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NO LABEL MEDIA GROUP INC							
910 LOUISIANA ST							YOUTH DEVELOPMENT AND
HOUSTON, TX 77002	85-3688066	501(C)(3)	36,707.	0.			EDUCATION
NORTH CAROLINA ALLIANCE FOR HEALTH							
5001 S MIAMI BLVD							CIVIL RIGHTS, SOCIAL
DURHAM, NC 27703	81-4271401	501(C)(3)	30,000.	0.			ACTION, ADVOCACY
NORTH FLORIDA WOMEN'S CENTER 2412 WEST PLAZA DR							
TALLAHASSEE, FL 32308	46-3400566		386,415.	0.			HEALTH
NORTH STAR PROSPERITY							
1010 DALE ST N	06 0157000	501/62/42	1 500 750				CIVIL RIGHTS, SOCIAL
ST PAUL, MN 55117	86-2157002	501(C)(4)	1,500,750.	0.			ACTION, ADVOCACY
NORTHLAND FAMILY PLANNING CLINIC INC - 24450 EVERGREEN RD -							
SOUTHFIELD, MI 48075	38-2118668		35,000.	0.			HEALTH
NORTHLAND FAMILY PLANNING CLINIC INC EAST - 3810 17 MILE RD #1 -							
STERLING HEIGHTS, MI 48310	38-2473074		30,000.	0.			HEALTH
NORTHLAND FAMILY PLANNING CLINIC INC WEST - 35000 FORD RD -							
WESTLAND, MI 48185	38-2231781		35,000.	0.			HEALTH
NORTHWEST ABORTION ACCESS FUND 4325 COMMERCE ST							
EUGENE, OR 97402	72-1553703	501(C)(3)	19,764.	0.			TECHNOLOGY AND INNOVAT
OKLAHOMA RELIGIOUS COALITION FOR REPRODUCTIVE CHOICE - PO BOX 35194							
- TULSA, OK 74153	73-1447828	501(C)(3)	9,024.	0.			TECHNOLOGY AND INNOVAT

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HOPEWELL FUND

Schedule I (Form 990)

(a) Name and address of organization or government	<b>(b)</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
ONE ARIZONA							
530 E MCDOWELL ROAD							CIVIL RIGHTS, SOCIAL
PHOENIX, AZ 85004	37-1782220	501(C)(3)	37,500.	0.			ACTION, ADVOCACY
ONE WEST VIRGINIA INC							
135 COMMUNITY RDG							CIVIL RIGHTS, SOCIAL
CULLODEN, WV 25510	85-3670951	501(C)(3)	171,500.	0.			ACTION, ADVOCACY
OPEN COLLECTIVE FOUNDATION							
340 S LEMON AVENUE							
WALNUT, CA 91789	81-4004928	501(C)(3)	9,783.	0.			TECHNOLOGY AND INNOVATION
OPEN PROGRESS							
1888 CENTURY PARK EAST							CIVIL RIGHTS, SOCIAL
LOS ANGELES, CA 90067	82-1193619	501(C)(4)	91,355.	0.			ACTION, ADVOCACY
OPPORTUNITIES FOR ALL FLORIDIANS							
INC - 4151 PARK AVENUE - MIAMI, FL							CIVIL RIGHTS, SOCIAL
33136	84-2952039	501(C)(4)	289,000.	0.			ACTION, ADVOCACY
OPPORTUNITY ARIZONA							
3821 N 15TH DRIVE							CIVIL RIGHTS, SOCIAL
PHOENIX, AZ 85015	84-3103154	501(C)(4)	1,304,000.	0.			ACTION, ADVOCACY
OUR WANTS WATER							
OUR MINDS MATTER 1300 CARPERS FARM WAY							YOUTH DEVELOPMENT AND
VIENNA, VA 22182	45-4313590	501(C)(3)	50,000.	0.			EDUCATION
			22,220	- •			
PARTNERS IN ABORTION CARE LLC							
3375 ELLICOTT CENTER DRIVE							
ELLICOTT CITY, MD 21041	87-3937812		18,000.	0.			TECHNOLOGY AND INNOVATION
PARTNERSHIP FOR ACTION RESEARCH							
AND EDUCATION - 1523 MOUNTAIN RD							CIVIL RIGHTS, SOCIAL
NW - ALBUQUERQUE, NM 87104	86-2205713	501(C)(4)	112,070.	0.			ACTION, ADVOCACY

Part II Continuation of Grants and Other	er Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	T ago 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PEER HEALTH EXCHANGE							
100 WEBSTER STREET							YOUTH DEVELOPMENT AND
OAKLAND, CA 94607	56-2374305	501(C)(3)	50,000.	0.			EDUCATION
PEGASUS HEALTH JUSTICE CENTER							
1408 N RIVERFRONT BOULEVARD							
DALLAS, TX 75207	85-4291622		10,000.	0.			HEALTH
PEOPLE FIRST ECONOMY							
345 FULLER AVENUE							CIVIL RIGHTS, SOCIAL
GRAND RAPIDS, MI 49503	20-4696543	501(C)(3)	100,000.	0.			ACTION, ADVOCACY
·			<u> </u>				,
PHARE BIO INC							
303 CONGRESS ST							CIVIL RIGHTS, SOCIAL
BOSTON, MA 02210	85-1085804	501(C)(3)	200,000.	0.			ACTION, ADVOCACY
DILLG DU DOGE LLG							
PILLS BY POST LLC							
4134 RUBY STREET YPSILANTI, MI 48197	85-1778926		9,942.	0.			TECHNOLOGY AND INNOVATION
IFSIDANII, MI 40197	03-1770920		9,942.	0.			TECHNOLOGI AND INNOVATION
PODER IN ACTION							
4415 N MARYVALE PARKWAY							CIVIL RIGHTS, SOCIAL
PHOENIX, AZ 85063	46-2284158	501(C)(3)	75,000.	0.			ACTION, ADVOCACY
POLICING EQUITY							
1925 CENTURY PARK EAST							CIVIL RIGHTS, SOCIAL
LOS ANGELES, CA 90067	81-4945849	501(C)(3)	1,500,000.	0.			ACTION, ADVOCACY
			' '	-			,
PRETERM CLEVELAND							
12000 SHAKER BLVD							
CLEVELAND, OH 44120	23-7314836	501(C)(3)	110,063.	0.			HEALTH
PRIORITIES USA FOUNDATION							
1150 18TH ST NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20036	82-0675521	501(C)(3)	1,250,000.	0.			ACTION, ADVOCACY
	1 00,000	1	_,,	ı	I	1	Oakadala I/Farra 000

Part II Continuation of Grants and Other	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	t II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PROGRESSIVE CHANGE INSTITUTE							
1629 K ST NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20006	46-1193049	501(C)(3)	100,000.	0.			ACTION, ADVOCACY
PROGRESSIVE MARYLAND EDUCATION							
FUND - PO BOX 6988 - LARGO, MD							CIVIL RIGHTS, SOCIAL
20792	03-0401249	501(C)(3)	15,000.	0.			ACTION, ADVOCACY
PROGRESSNOW EDUCATION							
215 S. WASHINGTON SQ, SUITE 135							CIVIL RIGHTS, SOCIAL
LANSING, MI 48933	20-8720291	501(C)(3)	10,000.	0.			ACTION, ADVOCACY
PROMOTE THE VOTE 2022							
600 W ST JOSEPH							CIVIL RIGHTS, SOCIAL
LANSING, MI 48933	87-4684409	501(C)(4)	675,000.	0.			ACTION, ADVOCACY
PROSPERITY MICHIGAN							
3265 SKY BLUE LANE							CIVIL RIGHTS, SOCIAL
SAULT STE MARIE, MI 49783	84-3158975	501(C)(4)	1,039,000.	0.			ACTION, ADVOCACY
PROSPERITY WORKS							
909 COPPER AVE. NW							CIVIL RIGHTS, SOCIAL
ALBUQUERQUE, NM 87102	85-0466059	501(C)(3)	20,000.	0.			ACTION, ADVOCACY
PROTECT OUR WINTERS							
4676 BROADWAY STREET							CIVIL RIGHTS, SOCIAL
BOULDER, CO 80304	20-8474909	501(C)(3)	500,000.	0.			ACTION, ADVOCACY
PROTEUS FUND INC							
15 RESEARCH DRIVE							CIVIL RIGHTS, SOCIAL
AMHERST, MA 01002	04-3243004	501(C)(3)	375,000.	0.			ACTION, ADVOCACY
PROVIDE INC							
PO BOX 410164							
CAMBRIDGE, MA 02141	04-3298538	501(C)(3)	9,000.	0.			TECHNOLOGY AND INNOVAT

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	<b>(b)</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 DEMOCRACY AMERICA											
1901 N FORT MYER DR							CIVIL RIGHTS, SOCIAL				
GREAT FALLS, VA 22066	27-1017781	501(C)(3)	250,000.	0.			ACTION, ADVOCACY				
PUBLIC HEALTH INSTITUTE OF			, , , , , ,								
METROPOLITAN CHICAGO - 180 N.											
MICHIGAN AVENUE - CHICAGO, IL							YOUTH DEVELOPMENT AND				
60601	36-3959353	501(C)(3)	50,000.	0.			EDUCATION				
PUBLIC JUSTICE CENTER INC											
201 N CHARLES ST							CIVIL RIGHTS, SOCIAL				
BALTIMORE, MD 21201	52-1412226	501(C)(3)	20,000.	0.			ACTION, ADVOCACY				
RED STATE ACCESS											
224 W 35TH STREET											
NEW YORK, NY 10001	88-3851007		6,325.	0.			TECHNOLOGY AND INNOVATION				
REGENTS OF THE UNIVERSITY OF											
CALIFORNIA, SAN FRANCISCO - 3333											
CALIFORNIA STREET - SAN FRANCISCO,											
CA 94143	94-6036493	GOVERNMENT	130,000.	0.			HEALTH				
DEGLEMED HED											
REGISTER HER 524 FORDHAM ROAD							CTVII DICHMC COCIAI				
	88-1719347	E01/G\/3\	60,000.	0.			CIVIL RIGHTS, SOCIAL				
SAN MATEO, CA 94402	00-1/1934/	501(C)(3)	80,000.	0.			ACTION, ADVOCACY				
REPRODUCTIVE FREEDOM FUND OF NEW											
HAMPSHIRE - 422 CENTRAL AVE -											
DOVER, NH 03820	86-2394891	501(C)(3)	17,000.	0.			TECHNOLOGY AND INNOVATION				
REPRODUCTIVE HEALTH INVESTORS											
ALLIANCE - 47 KEARNY STREET - SAN											
FRANCISCO, CA 94108	83-0828013	501(C)(3)	11,822.	0.			TECHNOLOGY AND INNOVATION				
·											
RESPONSIBLE INNOVATION LABS											
20910 NE UNION HILL RD											
REDMOND, WA 98053	85-3338067	501(C)(3)	353,254.	0.			TECHNOLOGY AND INNOVATION				

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Part II Continuation of Grants and Other A	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	_
(a) Name and address of organization or government	<b>(b)</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
REWIRE NEWS GROUP							
1765 GREENSBORO STATION PLACE							
MCLEAN, VA 22102	27-2289715	501 (C) (3)	12,550.	0.			TECHNOLOGY AND INNOVATIO
Hellin, VII 22102	27 2203713	301(0)(3)	12,330.	<u> </u>			I I I I I I I I I I I I I I I I I I I
RICHMOND MEDICAL CENTER FOR WOMEN							
118 N ARTHUR ASHE BLVD							
RICHMOND, VA 23220	54-0944108		8,058.	0.			 HEALTH
			1,111				
RICHMOND REPRODUCTIVE FREEDOM							
PROJECT - PO BOX 7389 - RICHMOND,							
VA 23221	38-3835776	501(C)(3)	11,972.	0.			HEALTH
ROBINS KAPLAN LLP							
800 LASALLE AVE							CIVIL RIGHTS, SOCIAL
MINNEAPOLIS, MN 55402	41-0719631		50,000.	0.			ACTION, ADVOCACY
ROOM TO READ							
465 CALIFORNIA STREET							YOUTH DEVELOPMENT AND
SAN FRANCISCO, CA 94104	91-2003533	501(C)(3)	80,000.	0.			EDUCATION
SCOTSDALE WOMEN'S CENTER - SWC							
DETROIT - 19305 W SEVEN MILE RD -							
DETROIT, MI 48219	46-0637541		30,000.	0.			HEALTH
SILICON VALLEY COMMUNITY							
FOUNDATION - 2440 W EL CAMINO REAL							CIVIL RIGHTS, SOCIAL
- MOUNTAIN VIEW, CA 94040	20-5205488	501(C)(3)	34,560.	0.			ACTION, ADVOCACY
SILVER STATE HOPE FUND							
7260 W AZURE DRIVE							
LAS VEGAS, NV 89130	46-4972833	501(C)(3)	5,107.	0.			TECHNOLOGY AND INNOVATIO
SIRUM							
3000 EL CAMINO REAL							CIVIL RIGHTS, SOCIAL
PALO ALTO, CA 94306	27-1103057	501(C)(3)	900,000.	0.			ACTION, ADVOCACY

Part II Continuation of Grants and Other A	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	<b>(b)</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				
SIXTEEN THIRTY FUND											
1828 L STREET, NW SUITE 300-B							CIVIL RIGHTS, SOCIAL				
WASHINGTON, DC 20036	26-4486735	501(C)(4)	7,024,000.	0.			ACTION, ADVOCACY				
SMALL BUSINESS MAJORITY FOUNDATION											
INC - 1015 15TH ST NW -							CIVIL RIGHTS, SOCIAL				
WASHINGTON, DC 20005	03-0576666	501(C)(3)	30,000.	0.			ACTION, ADVOCACY				
GOGIN, GOOD FIND ING											
SOCIAL GOOD FUND INC 12651 SAN PABLO AVE							CIVIL RIGHTS, SOCIAL				
RICHMOND, CA 94805	46-1323531	501(C)(3)	176,738.	0.			ACTION, ADVOCACY				
	10 1010001		270,700.				1022011, 1221001102				
SOJOURNERS INC											
408 C STREET NE							CIVIL RIGHTS, SOCIAL				
WASHINGTON, DC 20002	23-7380554	501(C)(3)	250,000.	0.			ACTION, ADVOCACY				
_											
SOUL 2 SOUL SISTERS											
1373 GRANT STREET	01 1006004	F01/G1/21	12.246				TEGUNOLOGY AND INDOVATION				
DENVER, CO 80203	81-1006094	501(C)(3)	12,246.	0.			TECHNOLOGY AND INNOVATION				
SOUTHWEST WOMEN'S LAW CENTER											
128 QUINCY NE							CIVIL RIGHTS, SOCIAL				
ALBUQUERQUE, NM 87108	20-2884027	501(C)(3)	60,000.	0.			ACTION, ADVOCACY				
GOTIMITE CHEEDY FOWEN, G ODILLONG											
SOUTHWESTERN WOMEN'S OPTIONS 522 LOMAS BLVD NE											
ALBUQUERQUE, NM 87102	85-0335259		452,950.	0.			HEALTH				
mbegenger, mr e,rer	03 0333233		132,330.								
SOUTHWESTERN WOMEN'S SURGERY											
CENTER LP - 8616 GREENVILLE AVE -											
DALLAS, TX 75243	26-3743095		70,148.	0.			HEALTH				
STATE LEADERSHIP PROJECT											
PO BOX 223							CIVIL RIGHTS, SOCIAL				
RALEIGH, NC 27602	83-4006980	501(C)(3)	880,000.	0.			ACTION, ADVOCACY				
101111111111111111111111111111111111111	03 4000000	001(0)(0)	1 550,000.	ı			Calcadala I (Farma 200)				

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Part II Continuation of Grants and Other	Assistance to Dor	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STATE VOICES							
1616 P STREET NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20036	20-1115618	501(C)(3)	250,000.	0.			ACTION, ADVOCACY
,			,				,
STATES NEWSROOM							
1340 ENVIRON WAY, FL. 3							CIVIL RIGHTS, SOCIAL
CHAPEL HILL, NC 27517	84-2113822	501(C)(3)	14,045.	0.			ACTION, ADVOCACY
STATES UNITED DEMOCRACY CENTER							ATTITE DEGUME GOGENI
1101 17TH ST NW	06 4504450	504 (5) (2)	4 655 543				CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20036	86-1704152	501(C)(3)	1,657,543.	0.			ACTION, ADVOCACY
SUMMIT MEDICAL ASSOCIATES PC							
1874 PIEDMONT AVENUE NE							
ATLANTA, GA 30324	58-1965193		539,048.	0.			   HEALTH
			,				
SUMMIT WOMEN'S CENTER OF DETROIT							
INC - 15801 W MCNICHOLS ROAD -							
DETROIT, MI 48235	26-1695672		25,000.	0.			HEALTH
SUSTAINABLE MARKETS FOUNDATION							
45 W 36TH STREET							CIVIL RIGHTS, SOCIAL
NEW YORK, NY 10018	13-4188834	501(C)(3)	257,500.	0.			ACTION, ADVOCACY
TBA FUND INC							
690 MAIN ST	85-2493274	E01/G)/3\	11 520	_			UENT MU
SAFETY HARBOR, FL 34695	85-24932/4	DUI(C)(3)	11,536.	0.			HEALTH
TED FOUNDATION INC							
330 HUDSON STREET							CIVIL RIGHTS, SOCIAL
NEW YORK, NY 10013	82-1934592	501(C)(3)	100,000.	0.			ACTION, ADVOCACY
	52 2331332			· ·			
TEXAS EQUAL ACCESS FUND							
PO BOX 227336							
DALLAS, TX 75222	11-3736286	501(C)(3)	17,500.	0.			TECHNOLOGY AND INNOVA

Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	and Domestic Go	overnments (Sch	edule I (Form 990), Pa	rt II.)	47-3001000 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEXAS GUN SENSE							
PO BOX 92722							CIVIL RIGHTS, SOCIAL
AUSTIN, TX 78709	46-2247262	501(C)(3)	45,000.	0.			ACTION, ADVOCACY
THE AFIYA CENTER 7220 S WESTMORELAND RD							
DALLAS, TX 75237	36-4625704	501(C)(3)	50,000.	0.			HEALTH
THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS - 1901 S FIRST ST - CHAMPAIGN, IL 61820	37-6000511	GOVERNMENT	24,900.	0.			EMPLOYMENT
THE BRIGID ALLIANCE INC							
PO BOX 58		504 (5) (2)	10.000				
NEW YORK, NY 10024	82-3843989	501(C)(3)	10,000.	0.			TECHNOLOGY AND INNOVATION
THE COMMON GROUND PROJECT							
2578 FLORIDIANE DRIVE							CIVIL RIGHTS, SOCIAL
MELBOURNE, FL 32935	83-4375307	501(C)(4)	50,000.	0.			ACTION, ADVOCACY
THE DOOR A CENTER OF ALTERNATIVES 121 AVENUE OF THE AMERICAS NEW YORK, NY 10013	13-6127348	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT AND EDUCATION
THE FAIRNESS PROJECT							
1342 FLORIDA AVE NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20009	37-1779557	501(C)(4)	288,186.	0.			ACTION, ADVOCACY
THE FUND FOR A HEALTHIER COLORADO							
303 E 17TH AVE							CIVIL RIGHTS, SOCIAL
DENVER, CO 80203	47-4101801	501(C)(3)	12,500.	0.			ACTION, ADVOCACY
THE GOOD INFORMATION FOUNDATION							ADMC CITIMITE AND
101 AVENUE OF AMERICAS NY, NY 10013	86-2025505	501(C)(3)	22,464.	0.			ARTS, CULTURE, AND HUMANITIES
MI, MI 10012	00-2025505	Por(C)(2)	22,404.	<u>.                                    </u>			HUMANITIES

Schedule i (Form 990) - Hot Ewell 1 900							ray
Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE HAWKINS PROJECT							
PO BOX 8368							INTERNATIONAL DEVELOPMEN
ANN ARBOR, MI 48107	82-2406138	501(C)(3)	160,000.	0.			AND FOREIGN AFFAIRS
THE HOPE CLINIC FOR WOMEN LTD							
1602 21ST ST							
GRANITE CITY, IL 62040	37-1017984		1,263,440.	0.			HEALTH
			, ,				
THE INTERNATIONAL FOUNDATION FOR							
VALUING IMPACTS - 97 W SPRINGFIELD							CIVIL RIGHTS, SOCIAL
ST - BOSTON, MA 02118	88-3171997	501(C)(3)	78,000.	0.			ACTION, ADVOCACY
THE TREVOR PROJECT							
8704 SANTA MONICA BLVD							
WEST HOLLYWOOD, CA 90069	95-4681287	501(C)(3)	100,000.	0.			HEALTH
THE VOTER PARTICIPATION CENTER							
1707 L STREET NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20036	55-0889748	501(C)(3)	52,500.	0.			ACTION, ADVOCACY
THE VOTER PROJECT FUND							
PO BOX 22611							GIVII DIGUMG GOGIAI
	06 2002201	E01/G\/3\	075 000	,			CIVIL RIGHTS, SOCIAL
PHILADELPHIA, PA 19110	86-3082391	501(C)(3)	875,000.	0.			ACTION, ADVOCACY
THE WISCONSIN INITIATIVE INC							
420 W DAYTON STREET							CIVIL RIGHTS, SOCIAL
MADISON, WI 53703	87-1540257	501(C)(4)	393,700.	0.			ACTION, ADVOCACY
INDIBON, WI SSYSS	0, 131023,	501(0)(1)	333,700.	•			Inciton, indicated
THE WOMEN'S CENTER							
133 PARK STREET NE							YOUTH DEVELOPMENT AND
VIENNA, VA 22180	23-7423496	501(C)(3)	50,000.	0.			EDUCATION
			30,000.	-			
THIS IS MY BRAVE INC							
880 HARRISON ST SE							YOUTH DEVELOPMENT AND
LEESBURG, VA 20175	20-8944419	501(C)(3)	50,000.	0.			EDUCATION
		1 111	1 , , , , , , , , ,		L		Schodulo I (Form 99

Part II Continuation of Grants and Oth		mestic Organizations	and Domestic Go	vernmente (Sch	edule I (Form 990) Da		17 3001000
raiting Continuation of Grants and Otr	IEI ASSISIANCE IO DOI			John (SCH)	=uuie i (Foilli 990), Pa	u c 11. <i>)</i>	
(a) Name and address of organization or government	<b>(b)</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
FIDES ADVOCACY							
1014 TORNEY AVE							CIVIL RIGHTS, SOCIAL
SAN FRANCISCO, CA 94129	94-3153687	501(C)(4)	125,000.	0.			ACTION, ADVOCACY
·							,
TIDES CENTER							
1014 TORNEY AVENUE							CIVIL RIGHTS, SOCIAL
SAN FRANCISCO, CA 94129	94-3213100	501(C)(3)	305,000.	0.			ACTION, ADVOCACY
TIDES FOUNDATION							OTTATA DEGIME GOGTAL
1012 TORNEY AVENUE	F1 0100F00	E01/G\/3\	250.000	_			CIVIL RIGHTS, SOCIAL
SAN FRANCISCO, CA 94129	51-0198509	501(C)(3)	250,000.	0.			ACTION, ADVOCACY
TOWARDS JUSTICE							
1410 HIGH ST, SUITE 300							CIVIL RIGHTS, SOCIAL
DENVER, CO 80218	46-4625504	501(C)(3)	45,000.	0.			ACTION, ADVOCACY
,			,				,
TRANSFAMILY SUPPORT SERVICES							
12463 RANCHO BERNARDO RD							YOUTH DEVELOPMENT AN
SAN DIEGO, CA 92128	47-3880841	501(C)(3)	50,000.	0.			EDUCATION
TRUST WOMEN FOUNDATION							
5107 E KELLOGG AVE							
WICHITA, KS 67218	27-3246473	501(C)(3)	955,228.	0.			HEALTH
TRUTHNOTLIES EDUCATION FUND							
PO BOX 151052							CIVIL RIGHTS, SOCIAL
AUSTIN, TX 78715	86-2508677	501(C)(3)	206,938.	0.			ACTION, ADVOCACY
,		, , , , ,					
UNIDOSUS							
1126 16TH STREET NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20036	86-0212873	501(C)(3)	150,000.	0.			ACTION, ADVOCACY
INITED AMEDICAL TRANSPORTED THE							
UNITE AMERICA INSTITUTE INC							OTATI DIGITAL COCTA
1580 N LINCOLN ST	27 2001006	E01/a)/3\	050.000	_			CIVIL RIGHTS, SOCIAL
DENVER, CO 80203	27-3001286	DOT(C)(3)	850,000.	0.			ACTION, ADVOCACY

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					appraisal, other)		
UNIVERSITY OF CHICAGO							
1201 E 60TH ST							CIVIL RIGHTS, SOCIAL
CHICAGO, IL 60637	36-2177139	501(C)(3)	150,000.	0.			ACTION, ADVOCACY
UNIVERSITY OF NEW MEXICO							
1 UNIVERSITY OF NEW MEXICO							
ALBUQUERQUE, NM 87131	85-6000642	GOVERNMENT	121,050.	0.			HEALTH
UNIVERSITY OF PITTSBURGH							
3100 CATHEDRAL OF LEARNING							
PITTSBURGH, PA 15260	25-0965591	501(C)(3)	20,000.	0.			HEALTH
UNIVERSITY OF WASHINGTON							
FOUNDATION - 407 GERBERDING HALL -							CIVIL RIGHTS, SOCIAL
SEATTLE, WA 98195	94-3079432	501(C)(3)	1,666,667.	0.			ACTION, ADVOCACY
			_,,	- •			
US TOGETHER INC							
1415 E DUBLIN GRANVILLE RD							YOUTH DEVELOPMENT AND
COLUMBUS, OH 43229	83-0395108	501(C)(3)	50,000.	0.			EDUCATION
VIRGINIA INTERFAITH CENTER FOR							
PUBLIC POLICY - 1716 E FRANKLIN ST							CIVIL RIGHTS, SOCIAL
- RICHMOND, VA 23223	54-1362857	501(C)(3)	35,000.	0.			ACTION, ADVOCACY
VIRGINIA POVERTY LAW CENTER							OTTITI DIGUMS COCTA
919 E. MAIN STREET	54-1093402	501/C\/3\	70 000	0.			CIVIL RIGHTS, SOCIAL
RICHMOND, VA 23219	34-1033407	301(C)(3)	70,000.	0.			ACTION, ADVOCACY
VOICES FOR VIRGINIA'S CHILDREN							
1606 SANTA ROSA ROAD							CIVIL RIGHTS, SOCIAL
HENRICO, VA 23229	54-1726265	501(C)(3)	35,000.	0.			ACTION, ADVOCACY
VOTE FORWARD							
611 PENNSYLVANIA AVE SE							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20003	84-2427217	501(C)(4)	2,715,585.	0.			ACTION, ADVOCACY

Part II Continuation of Grants and Other A	ssistance to Do	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	47-3681860 P
(a) Name and address of organization or government	<b>(b)</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
VOTE REV ACTION FUND							
611 PENNSYLVANIA AVE SE							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20003	84-3996441	501(C)(4)	1,699,683.	0.			ACTION, ADVOCACY
VOTE.ORG							
4096 PIEDMONT AVE							CIVIL RIGHTS, SOCIAL
OAKLAND, CA 94611	26-2094990	501(C)(3)	1,000,000.	0.			ACTION, ADVOCACY
VOTO LATINO FOUNDATION							
1701 RHODE ISLAND AVE NW							CIVIL RIGHTS, SOCIAL
WASHINGTON, DC 20036	20-1350252	501(C)(3)	250,000.	0.			ACTION, ADVOCACY
WAVE EDUCATIONAL FUND INC							
PO BOX 170393							CIVIL RIGHTS, SOCIAL
MILWAUKEE, WI 53217	39-1917076	501(C)(3)	45,000.	0.			ACTION, ADVOCACY
,			, -	-			,
WAY TO WIN ACTION FUND INC							
340 S LEMON AVE							CIVIL RIGHTS, SOCIAL
WALNUT, CA 91789	82-5528039	501(C)(4)	270,000.	0.			ACTION, ADVOCACY
WEGE ALADAMA MOMEN'S SERVED THE							
WEST ALABAMA WOMEN'S CENTER INC 535 JACK WARNER PARKWAY							
TUSCALOOSA, AL 35404	63-1097123	501/01/31	30,000.	0.			   HEALTH
TUSCALOUSA, AL 35404	03-109/123	501(0)(3)	30,000.	0.			nealin
WEST VIRGINIA CENTER ON BUDGET AND							
POLICY - 8 CAPITOL STREET -							CIVIL RIGHTS, SOCIAL
CHARLESTON, WV 25301	56-2653132	501(C)(3)	50,000.	0.			ACTION, ADVOCACY
·							
WEST VIRGINIA FREE INC							
PO BOX 11042							
CHARLESTON, WV 25339	55-0715930	501(C)(3)	7,000.	0.			HEALTH
LIVI THIND VALUE ON A THA							
WHITNEYSTRONG INC							OTATI DIGUES SOSTI
1435 WILLOW AVE	02 1041001	E01/G)/3)	45 000	0			CIVIL RIGHTS, SOCIAL
LOUISVILLE, KY 40204	83-1941981	DOT(C)(3)	45,000.	0.			ACTION, ADVOCACY  Schedule I (Forn

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 (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) WHOLE WOMAN'S HEALTH ALLIANCE AUSTIN - 4100 DUVAL ROAD BUILDING 2 SUITE 201 - AUSTIN, TX 78754 46-5318393 501(C)(3) 17,715, 0. HEALTH WHOLE WOMAN'S HEALTH ALLIANCE INC 1001 EAST MARKET ST CHARLOTTESVILLE, VA 22902 46-5318393 501(C)(3) 0. HEALTH 55,000 WHOLE WOMAN'S HEALTH ALLIANCE OF SOUTH BEND - 3511 LINCOLN WAY WEST - SOUTH BEND, IN 46628 46-5318393 501(C)(3) 15,000 0. HEALTH WHOLE WOMAN'S HEALTH OF MCALLEN LLC - 1001 EAST MARKET STREET -CHARLOTTESVILLE, VA 29902 20-0627497 0 HEALTH 17,294, WHOLE WOMAN'S OF CHARLOTTE LLC 700 EAST HEBRON STREET CHARLOTTE, NC 28273 0. HEALTH 88-3721936 235,350. WILD WEST ACCESS FUND OF NEVADA 561 KEYSTONE AVENUE RENO, NV 89503 87-2812330 501(C)(3) HEALTH 18,300, 0. WISCONSIN EARLY CHILDHOOD ASSOCIATION INC - 2908 MARKETPLACE CIVIL RIGHTS, SOCIAL DR - FITCHBURG, WI 53719 ACTION, ADVOCACY 39-1345572 501(C)(3) 70,000. 0. WOMEN LEADERS EMERGE 4 EMBARCADERO CENTER CIVIL RIGHTS, SOCIAL SAN FRANCISCO, CA 94111 83-1787883 501(C)(4) 250,000. 0. ACTION, ADVOCACY WOMEN'S HEALTH CENTER OF WEST VIRGINIA INC - PO BOX 20580 -CHARLESTON, WV 25362 55-0559874 501(C)(3) 172,159. 0. HEALTH

Page 1

Schedule I (Form 990)

47-3681860

Schedule I (Form 990) HOPEWELL FUND

Page 1

Part II Continuation of Grants and Other	Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WOMEN'S MARCH FOUNDATION 10250 CONSTELLATION BLVD LOS ANGELES, CA 90067	81-4450467	501(C)(3)	7,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY			
WOMEN'S MEDICAL FUND INC PO BOX 248 MADISON, WI 53701	51-0189614	501(C)(3)	18,846.	0.			TECHNOLOGY AND INNOVATION			
YOUTH GUIDANCE 1 N LASALLE STREET CHICAGO, IL 60602	36-2167032	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT AND			
YOUTH PASSAGEWAYS PO BOX 46631 KANSAS CITY, MO 64188	47-4750095	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT AND			
			<u> </u>				Sobodulo I (Form 000)			

HOPEWELL FUND 47-3681860 Schedule I (Form 990) 2022 Page 2 Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III Part III can be duplicated if additional space is needed. (e) Method of valuation (book, FMV, appraisal, other) (a) Type of grant or assistance (b) Number of (c) Amount of (d) Amount of non-(f) Description of noncash assistance recipients cash grant cash assistance 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 ORGANIZATION GENERALLY REQUIRES A WRITTEN PROPOSAL DESCRIBING HOW THE GRANT FUNDS WILL BE USED. AND A PRE-GRANT INQUIRY IS THEN CONDUCTED TO EVALUATE THE GRANTEE. ALL GRANTS ARE SUBJECT TO A WRITTEN GRANT AGREEMENT THAT IMPOSES REPORTING OBLIGATIONS. REQUIRES FUNDS BE USED SOLELY AS SPECIFIED IN THE PROPOSAL. AND REQUIRES THAT FUNDS BE RETURNED IF NOT SPENT APPROPRIATELY OR IF REPORTS ARE NOT FILED AS REQUIRED.

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#### SCHEDULE J (Form 990)

**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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization

HOPEWELL FUND

For I Questions Regarding Compensation

Employer identification number
47-3681860

	att   Quoduono negaramig compensation			
<b>1</b> a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,  Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.    First-class or charter travel		Yes	No
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.  Compensation committee  Written employment contract  Independent compensation consultant  Compensation survey or study  Approval by the board or compensation committee  During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filling			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
5	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.  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:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	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:	_		
а	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments		v	
_	not described on lines 5 and 6? If "Yes," describe in Part III	7	Х	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			v
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		I

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

Schedule J (Form 990) 2022

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

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

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

	(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation		(iii) Other reportable compensation			reported as deferred on prior Form 990
(1) COURTNEY CUFF	(i)	229,162.	0.	7,255.	14,216.	17,822.	268,455.	0.
PROJECT DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) BONNIE JONES	(i)	233,250.	0.	0.	13,995.	17,942.	265,187.	0.
PROJECT DIRECTOR	(ii)	0.	0.	0.	0.	0.	0,	0,
(3) MEAGAN CAVANAUGH	(i)	226,741.	1,500.	0.	13,695.	17,942.	259,878.	0,
PROJECT DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JANET CREPPS HILLER	(i)	220,701.	1,500.	0.	13,356.	18,561.	254,118.	0,
PROJECT DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) MELANIE GELLING ZUREK	(i)	212,745.	0.	0.	12,855.	19,442.	245,042.	0.
PROJECT DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2022 Page 3 Part III | Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. PART I, LINE 1A: THE ORGANIZATION PROVIDES \$75 PER MONTH FOR FITNESS RELATED COSTS WHICH MAY INCLUDE CLUB FEES. THE AMOUNTS WERE CONSIDERED TAXABLE COMPENSATION TO THE EMPLOYEES. PART I, LINE 3: HOPEWELL FUND DOES NOT HAVE A CEO/EXECUTIVE DIRECTOR. PART I, LINE 7: THE ORGANIZATION PROVIDED BONUSES TO CERTAIN EMPLOYEES. WHICH WOULD BE CONSIDERED A "NON-FIXED PAYMENT". BONUSES PAID BY THE ORGANIZATION ARE (IN GENERAL) NOT SPECIFIED BY A FIXED FORMULA IN EMPLOYMENT CONTRACTS AND DETERMINED (IN PART) WITH DISCRETION IN DETERMINING THE AMOUNT OF BONUS OR WHETHER TO MAKE A BONUS PAYMENT.

# SCHEDULE M (Form 990)

## **Noncash Contributions**

OMB No. 1545-0047

2022

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

Inspection
Employer identification number

	HOPEWELL FUND					47-3681860			
Par	rt I Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o noncash cont	(d) f determini ribution an	•	s	
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded	X	23	9,090,794.	FMV AT TIME OF	DONATIO	ON		
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial	I							
17	Real estate - Other	I							
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other ()								
26	Other ()								
27	Other ()								
28	Other (								
29	Number of Forms 8283 received by the organ								
	for which the organization completed Form 8283, Part V, Donee Acknowledgement						0		
							Yes	No	
30a	During the year, did the organization receive l	•	, , , , ,		•				
	must hold for at least 3 years from the date o								
	exempt purposes for the entire holding period	d?				30a		X	
	If "Yes," describe the arrangement in Part II.								
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?  31 X								
32a	a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?					32a		х	
b	If "Yes," describe in Part II.								
33	If the organization didn't report an amount in	column (c) fo	r a type of property	for which column (a) is chec	cked,				
	describe in Part II.								
LHA	For Paperwork Reduction Act Notice, see	e the Instruc	tions for Form 990	).	Schedu	le M (Form	n 990)	2022	

ıs rep	plemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization porting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete part for any additional information.
SCHEDULE M, PA	ART I, COLUMN (B):
THE ORGANIZAT	ION IS REPORTING THE NUMBER OF ITEMS CONTRIBUTED (DEFINED
AS EACH SEPARA	ATE GIFT, RATHER THAN EACH SHARE RECEIVED) IN SCHEDULE M,
PART I, COLUM	N (B).

232142 09-09-22

#### **SCHEDULE 0** (Form 990)

### 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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Inspection

**Employer identification number** 

HOPEWELL FUND 47-3681860 PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: INNOVATIVE SOCIAL CHANGE PROJECTS, PRIMARILY THROUGH FISCAL HOPEWELL IS DESIGNED TO FACILITATE RAPID AND EFFICIENT LAUNCHES OF WELL-RESOURCED PROJECTS WITH DIVERSE REVENUE & FUNDING MODELS INCLUDING CHARITABLE CONTRIBUTIONS AND INVESTMENTS. MANY OF HOPEWELL'S PROJECTS EMPLOY BOLD AND AMBITIOUS STRATEGIES TO ACHIEVE THE HOPEWELL IS MANAGED BY A BOARD OF DIRECTORS WITH IMPACT THEY SEEK. EXPERIENCE IN STARTING UP INNOVATIVE ORGANIZATIONS FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: OTHER PROGRAM SERVICES INCLUDING INTERNATIONAL DEVELOPMENT AND FOREIGN AFFAIRS, AND YOUTH DEVELOPMENT AND EDUCATION. EXPENSES \$ 5,680,121. INCL GRANTS OF \$ 2,699,589. REVENUE \$ 407,647. FORM 990, PART VI, SECTION A, LINE 3: HOPEWELL FUND CONTRACTED WITH ARABELLA ADVISORS. A PROFESSIONAL SERVICES FIRM THAT SUPPORTS PHILANTHROPISTS, IMPACT INVESTORS, AND NONPROFIT ORGANIZATIONS. TO PROVIDE BUSINESS AND ADMINISTRATIVE SERVICES UNDER AN ADMINISTRATIVE AGREEMENT. IN THAT CAPACITY, ARABELLA SUPPLIES THE SYSTEMS AND SERVICES TO ENSURE COMPLIANCE WITH FEDERAL, STATE, AND LOCAL REGULATIONS RELATED TO CHARITABLE SOLICITATION AND PROVIDES HR, COMPLIANCE PAYROLL. AND OTHER ADMINISTRATIVE FUNCTIONS FOR HOPEWELL. THEREBY ENABLING HOPEWELL TO BETTER FURTHER ITS MISSION AND ACHIEVE IMPACT, FORM 990, PART VI, SECTION B, LINE 11B: THE FORM 990 IS PREPARED BY AN INDEPENDENT TAX ACCOUNTANT AND REVIEWED BY

232211 10-28-22

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

<u>Schedule O (Form 990) 2022</u> Page **2** 

**Employer identification number** Name of the organization HOPEWELL FUND 47-3681860 THE ORGANIZATION'S LEGAL COUNSEL AND BOARD OF DIRECTORS PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE. FORM 990, PART VI, SECTION B, LINE 12C: ALL BOARD MEMBERS ARE REQUIRED TO DISCLOSE CONFLICTS OF INTEREST. THE POLICY IS MONITORED AT THE BOARD LEVEL. COVERED INDIVIDUALS CANNOT VOTE ON MATTERS BEFORE THE BOARD WHEN THEY HAVE A CONFLICT IN THE MATTER. DISINTERESTED MEMBERS MUST DETERMINE WHETHER OR NOT THERE ARE ANY SUITABLE ALTERNATIVES TO POTENTIAL TRANSACTIONS THAT CAUSE CONFLICT. IF A COVERED PERSON IS FOUND IN VIOLATION OF THIS POLICY, IT MAY BE CAUSE FOR REMOVAL FROM THE BOARD OF DIRECTORS. FORM 990, PART VI, SECTION B, LINE 15: THE ORGANIZATION DID NOT DIRECTLY COMPENSATE ANY OFFICERS OR KEY EMPLOYEES. ACCORDINGLY, FORM 990, PART VI, SECTION B, LINES 15A AND 15B HAVE BEEN MARKED "NO", AS PROVIDED IN THE FORM 990 INSTRUCTIONS. FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL, AR, CA, CT, FL, GA, HI, IL, KS, KY, MA, MD, MN, MS, NH, NJ, NM, NY, NC, ND, OR, PA, RI, SC, TN UT, VA, WI, WV FORM 990, PART VI, SECTION C, LINE 19: HOPEWELL MAKES ITS FORM 1023, APPLICATION FOR RECOGNITION OF EXEMPTION AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST. THOSE MATERIALS INCLUDE HOPEWELL'S INITIAL GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND OTHER POLICIES. HOPEWELL DOES NOT MAKE FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC.

Schedule O (Form 990) 2022		Page 2
Name of the organization  HOPEWELL FUND		Employer identification number 47-3681860
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:		
REVERSAL OF PRIOR YEAR CONTRIBUTION/PLEDGE REVENUE	-375,000.	
RETURN OF PRIOR YEAR GRANT EXPENSE	1,348,761.	
FOTAL TO FORM 990, PART XI, LINE 9	973,761.	