

PUBLIC DISCLOSURE COPY

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

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.

2022

Open to Public Inspection

A For the 2022 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization HOPEWELL FUND		D Employer identification number 47-3681860		
	Doing business as				
	Number and street (or P.O. box if mail is not delivered to street address)		Room/suite	E Telephone number	
	1828 L STREET, NW		300-D	(202) 664-8763	
	City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20036		G Gross receipts \$ 200,327,802.		
F Name and address of principal officer: LEE BODNER SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No			
J Website: WWW.HOPEWELLFUND.ORG		H(c) Group exemption number			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 2015	M State of legal domicile: DC		

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE HOPEWELL FUND HELPS SOCIAL ENTREPRENEURS AND OTHER CHANGEMAKERS LAUNCH NEW, (CONT. SCHEDULE O)		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	4
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	4
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	139
	6 Total number of volunteers (estimate if necessary)	6	82
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	122,592,892.	174,820,725.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	256,996.	790,032.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	125,202.	1,866,642.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	410,849.	620,522.
		123,385,939.	178,097,921.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	65,385,986.	89,873,264.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	14,204,396.	15,198,379.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	9,000.	336,600.
	b Total fundraising expenses (Part IX, column (D), line 25)	575,114.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	42,453,932.	51,907,771.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	122,053,314.	157,316,014.	
19 Revenue less expenses. Subtract line 18 from line 12	1,332,625.	20,781,907.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	159,581,623.	176,857,021.
	22 Net assets or fund balances. Subtract line 21 from line 20	29,232,792.	24,799,301.
	130,348,831.	152,057,720.	

Part II Signature Block

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

Sign Here	Signature of officer		Date		
	LEE BODNER, BOARD CHAIR				
Type or print name and title					
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	MICHAEL LUMSDEN	MICHAEL LUMSDEN	11/07/23		P01262236
Firm's name MOSS ADAMS LLP			Firm's EIN 91-0189318		
Firm's address 101 SECOND STREET SUITE 900 SAN FRANCISCO, CA 94105			Phone no. 415-956-1500		

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

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

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 expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 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.) (Expenses \$ 5,680,121. including grants of \$ 2,699,589.) (Revenue \$ 407,647.)

4e Total program service expenses 149,276,602.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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

Table with columns for question number, question text, and Yes/No response columns. Includes questions 2a through 17 regarding employee counts, tax returns, business income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body... 1b Enter the number of voting members included on line 1a... 2 Did any officer, director, trustee, or key employee have a family relationship... 3 Did the organization delegate control over management duties... 4 Did the organization make any significant changes to its governing documents... 5 Did the organization become aware during the year of a significant diversion of the organization's assets... 6 Did the organization have members or stockholders... 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body... 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body... 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? 8b Each committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a The organization's CEO, Executive Director, or top management official 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AL, AR, CA, CT, FL, GA, HI, IL, KS, KY, MA, MD
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
ARABELLA ADVISORS, LLC - (202) 595-1020
1828 L STREET NW, SUITE 300, WASHINGTON, DC 20036

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) COURTNEY CUFF PROJECT DIRECTOR	31.00				X		236,417.	0.	32,038.	
(2) BONNIE JONES PROJECT DIRECTOR	40.00				X		233,250.	0.	31,937.	
(3) MEAGAN CAVANAUGH PROJECT DIRECTOR	40.00				X		228,241.	0.	31,637.	
(4) JANET CREPPS HILLER PROJECT DIRECTOR	40.00				X		222,201.	0.	31,917.	
(5) MELANIE GELLING ZUREK PROJECT DIRECTOR	40.00				X		212,745.	0.	32,297.	
(6) ANDREW SCHULZ GENERAL COUNSEL	3.00			X			27,975.	0.	0.	
(7) LEE BODNER BOARD CHAIR	1.00	X		X			0.	0.	0.	
(8) MICHAEL SLABY SECRETARY & TREASURER	1.00	X		X			0.	0.	0.	
(9) LORI CHATMAN DIRECTOR	1.00	X					0.	0.	0.	
(10) CHERYL CONTEE DIRECTOR	1.00	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Subtotal							1,160,829.	0.	159,826.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							1,160,829.	0.	159,826.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 59

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
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? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
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 300, WASHINGTON, DC 20036	ADMIN. & OPERATIONAL SUPPORT 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 those listed above) who received more than \$100,000 of compensation from the organization 59

Part VIII Statement of Revenue

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

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above ...	1f	174,820,725.				
	g	Noncash contributions included in lines 1a-1f	1g	\$ 9,090,794.				
	h	Total. Add lines 1a-1f		174,820,725.				
Program Service Revenue	2 a	CONSULTING REVENUE	Business Code	541900	668,802.	668,802.		
	b	DUES REVENUE		900099	86,950.	86,950.		
	c	SPONSORSHIPS REVENUE		900099	16,758.		16,758.	
	d	PRI INTEREST INCOME		900099	11,967.	11,967.		
	e	REGISTRATION REVENUE		900099	5,555.	5,555.		
	f	All other program service revenue						
	g	Total. Add lines 2a-2f			790,032.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			1,925,822.		1,925,822.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6 a	Gross rents	6a	(i) Real	(ii) Personal			
	b	Less: rental expenses ...	6b					
	c	Rental income or (loss)	6c					
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of assets other than inventory	7a	(i) Securities	(ii) Other			
	b	Less: cost or other basis and sales expenses	7b	22,170,701.	68,372.			
	c	Gain or (loss)	7c	9,192.	-68,372.			
d	Net gain or (loss)			-59,180.		-59,180.		
8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b	Less: direct expenses	8b						
c	Net income or (loss) from fundraising events							
9 a	Gross income from gaming activities. See Part IV, line 19	9a						
b	Less: direct expenses	9b						
c	Net income or (loss) from gaming activities							
10 a	Gross sales of inventory, less returns and allowances	10a						
b	Less: cost of goods sold	10b						
c	Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a	MISCELLANEOUS REVENUE	Business Code	900099	620,522.		620,522.	
	b						
	c						
	d	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.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	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)				
7 Other salaries and wages	12,091,523.	11,958,070.	18,340.	115,113.
8 Pension plan accruals and contributions (include 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):				
a Management	7,030,438.		7,030,438.	
b Legal	19,786,620.	19,749,176.	37,444.	
c Accounting	69,100.		69,100.	
d Lobbying	272,696.	272,696.		
e Professional fundraising services. See Part IV, line 17	336,600.			336,600.
f Investment management fees	21,935.		21,935.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	15,011,168.	14,868,444.	48,412.	94,312.
12 Advertising and promotion	1,651,349.	1,651,349.		
13 Office expenses	1,338,119.	1,337,693.	426.	
14 Information technology	5,297,129.	5,247,912.	49,217.	
15 Royalties				
16 Occupancy	115,880.	115,880.		
17 Travel	505,319.	496,205.	9,114.	
18 Payments of travel or entertainment expenses 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.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a MISCELLANEOUS EXPENSES	56,528.	55,465.	1,063.	
b _____				
c _____				
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash - non-interest-bearing	716,243.	1	1,170,051.
	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 current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	112,292.	9	229,797.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 94,345.		
	b Less: accumulated depreciation	10b 29,088.		
	11 Investments - publicly traded securities	119,168.	10c	65,257.
	12 Investments - other securities. See Part IV, line 11	19,798,203.	11	20,651,626.
	13 Investments - program-related. See Part IV, line 11	2,715,094.	12	
	14 Intangible assets		13	2,736,962.
	15 Other assets. See Part IV, line 11	24,314.	14	
16 Total assets. Add lines 1 through 15 (must equal line 33)	159,581,623.	15	23,360.	
		16	176,857,021.	
Liabilities	17 Accounts payable and accrued expenses	8,203,467.	17	9,877,172.
	18 Grants payable	21,029,325.	18	14,880,766.
	19 Deferred revenue	0.	19	31,779.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	0.	25	9,584.
	26 Total liabilities. Add lines 17 through 25	29,232,792.	26	24,799,301.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	31,614,358.	27	25,356,554.
	28 Net assets with donor restrictions	98,734,473.	28	126,701,166.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	130,348,831.	32	152,057,720.
33 Total liabilities and net assets/fund balances	159,581,623.	33	176,857,021.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	178,097,921.
2	Total expenses (must equal Part IX, column (A), line 25)	2	157,316,014.
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	130,348,831.
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.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant? _____
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? _____
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____

	Yes	No
2a		X
2b	X	
2c		X
3a		X
3b		

Form **990** (2022)

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

2022

Open to Public Inspection

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

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 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).**
- 4 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: _____
- 5 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).**
- 7 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.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 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 university: _____
- 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.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 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.
 - a **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.**
 - 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.**
 - 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.**
 - d **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.**
 - e 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.
 - f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(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 organization'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.
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)						71,870,932.
6 Public support. Subtract line 5 from line 4.						542,470,276.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	64,615,634.	102,295,757.	150,391,200.	122,217,892.	174,820,725.	614,341,208.
8 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 Total support. Add lines 7 through 10						622,148,443.
12 Gross receipts from related activities, etc. (see instructions)					12	2,123,845.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, 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 organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

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

Calendar year (or fiscal year beginning in)	(a) 2018	(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 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 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						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
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

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
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.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2021 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2021 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

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?		
b A family member of a person described on line 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 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? <i>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 supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
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? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
1		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 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)? <i>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).</i>		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 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?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
1		
2		
3		

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).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
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? <i>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.</i>			
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? <i>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.</i>			
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? <i>If "Yes" or "No" provide details in Part VI.</i>			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>			
2a			
2b			
3a			
3b			

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.

Section 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	

Section 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):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
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	

Section 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - <i>explain in Part VI</i>). 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, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . 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			
e Excess from 2022			

Schedule A (Form 990) 2022

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
(See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

GENERAL ADMIN RETAINER

2019 AMOUNT: \$ 209,181.

2020 AMOUNT: \$ 435,481.

2021 AMOUNT: \$ 409,804.

MISCELLANEOUS REVENUE

2018 AMOUNT: \$ 173,875.

2019 AMOUNT: \$ 46,762.

2020 AMOUNT: \$ 58,232.

2021 AMOUNT: \$ 1,045.

2022 AMOUNT: \$ 620,522.

SCHEDULE A, PART II:

SCHEDULE A, PART II HAS BEEN UPDATED FROM THE PREVIOUSLY FILED FORM

990S TO ACCOUNT FOR THE EFFECTS OF A PRIOR PERIOD ADJUSTMENT, AND TO

REMOVE CONTRIBUTIONS AND/OR PLEDGES IN 2019 AND 2021 WHICH WERE DEEMED

UNCOLLECTIBLE.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

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

2022

Name of the organization

HOPEWELL FUND

Employer identification number

47-3681860

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

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

General Rule

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

Special Rules

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

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

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

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

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

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ 70,491,684.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ 16,900,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ 8,155,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ 7,547,316.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ 5,575,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	<hr/> <hr/> <hr/>	\$ 5,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/>	\$ 4,350,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/>	\$ 4,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
4	PUBLICLY TRADED SECURITIES _____ _____ _____	\$ 6,711,869.	05/02/22
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

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

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

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2022

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 organization <p style="text-align: center;">HOPEWELL FUND</p>	Employer identification number <p style="text-align: center;">47-3681860</p>
--	---

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

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures \$ _____
- 3 Volunteer hours for political campaign activities _____

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

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

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

Schedule C (Form 990) 2022

LHA

232041 11-08-22

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

- A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)														
b Total lobbying expenditures to influence a legislative body (direct lobbying)														
c Total lobbying expenditures (add lines 1a and 1b)														
d Other exempt purpose expenditures														
e Total exempt purpose expenditures (add lines 1c and 1d)														
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 65%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)														
h Subtract line 1g from line 1a. If zero or less, enter -0-														
i Subtract line 1f from line 1c. If zero or less, enter -0-														
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

	(a)		(b)
	Yes	No	Amount
For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.			
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..	X		
c Media advertisements?	X		450.
d Mailings to members, legislators, or the public?	X		5,107.
e Publications, or published or broadcast statements?	X		32,789.
f Grants to other organizations for lobbying purposes?	X		5,005,146.
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		237,512.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X		193.
i Other activities?	X		80,510.
j Total. Add lines 1c through 1i			5,361,707.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?	4	
5 Taxable amount of lobbying and political expenditures. See instructions	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

PART II-B, LINE 1, LOBBYING ACTIVITIES:

HOPEWELL HAS CONDUCTED LOBBYING ACTIVITIES WITH RESPECT TO LEGISLATION

RELATED TO EDUCATION, HEALTH, TAX REFORM, AND OTHER ISSUES.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2022

Open to Public
Inspection

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

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply):

Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2022

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

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

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____%
 - b Permanent endowment _____%
 - c Term endowment _____%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|--------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		20,719.	11,905.	8,814.
e Other		73,626.	17,183.	56,443.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				65,257.

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) RIGHT-OF-USE LEASE LIABILITIES	9,584.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	179,446,340.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-46,779.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	1,348,761.
d	Other (Describe in Part XIII.)	2d	
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:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	21,935.
b	Other (Describe in Part XIII.)	4b	-68,372.
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.)	5	178,097,921.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	157,737,451.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	443,372.
e	Add lines 2a through 2d	2e	443,372.
3	Subtract line 2e from line 1	3	157,294,079.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	21,935.
b	Other (Describe in Part XIII.)	4b	
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.)	5	157,316,014.

Part XIII Supplemental Information.

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

PART X, LINE 2:

THE FUND DOES NOT HAVE ANY MATERIAL UNCERTAIN TAX POSITIONS OR UNRELATED

BUSINESS INCOME. THE FUND FILES EXEMPT FUND RETURNS AND, IF APPLICABLE,

UNRELATED BUSINESS INCOME TAX RETURNS IN THE U.S. FEDERAL AND STATE

JURISDICTIONS.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

LOSS ON DISPOSAL OF FIXED ASSETS -68,372.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

REVERSAL OF PRIOR YEAR PLEDGE/CONTRIBUTION REVENUE 375,000.

LOSS ON DISPOSAL OF FIXED ASSETS 68,372.

Part XIII Supplemental Information *(continued)*

TOTAL TO SCHEDULE D, PART XII, LINE 2D 443,372.

Horizontal lines for supplemental information.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

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.

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

Employer identification number

HOPEWELL FUND

47-3681860

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
EUROPE (INCLUDING ICELAND & GREENLAND)	0	7	PROGRAM SERVICES	INTERNATIONAL DEVELOPMENT AND FOREIGN AFFAIRS, TECHNOLOGY AND INNOVATION	199,052.
MIDDLE EAST AND NORTH AFRICA	0	1	PROGRAM SERVICES	INTERNATIONAL DEVELOPMENT AND FOREIGN AFFAIRS	1,250.
NORTH AMERICA	0	2	PROGRAM SERVICES	HEALTH, INTERNATIONAL DEVELOPMENT AND FOREIGN AFFAIRS	227,959.
SUB-SAHARAN AFRICA	0	2	PROGRAM SERVICES	CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	80,650.
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTMAKING		217,000.
NORTH AMERICA	0	0	GRANTMAKING		75,000.
SOUTH AMERICA	0	0	GRANTMAKING		125,000.
SUB-SAHARAN AFRICA	0	0	GRANTMAKING		432,094.
3 a Subtotal	0	12			1,358,005.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	12			1,358,005.

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

Schedule F (Form 990) 2022

Part II **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) 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 & GREENLAND)	HEALTH	34,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	125,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	HEALTH	25,000.	WIRE TRANSFER	0.		
		NORTH AMERICA	HEALTH	75,000.	WIRE TRANSFER	0.		
		SOUTH AMERICA	INTERNATIONAL DEVELOPMENT AND FOREIGN AFFAIRS	100,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	HEALTH	25,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY	162,247.	WIRE TRANSFER	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **11**

3 Enter total number of other organizations or entities **0**

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Name of organization	(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 AFRICA	INTERNATIONAL DEVELOPMENT AND FOREIGN AFFAIRS	149,847.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	INTERNATIONAL DEVELOPMENT AND FOREIGN AFFAIRS	70,000.	WIRE TRANSFER	0.		
		SUB-SAHARAN AFRICA	INTERNATIONAL DEVELOPMENT AND FOREIGN AFFAIRS	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.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the 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 No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be 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 U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the 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 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 Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes 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)* Yes No

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); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

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.

PART I, LINE 3:

ACCRUAL METHOD

**SCHEDULE G
(Form 990)**

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

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.

2022

Department of the Treasury
Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Open to Public
Inspection

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

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

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

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a Mail solicitations
 - b Internet and email solicitations
 - c Phone solicitations
 - d In-person solicitations
 - e Solicitation of non-government grants
 - f Solicitation of government grants
 - g Special fundraising events
- 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
THE BONNER GROUP - 800 MAINE AVE SW, SUITE 450,	PROFESSIONAL FUNDRAISER		X	785,000.	300,000.	485,000.
ABUNDANCE STRATEGIES - 1900 L STREET, NW, WASHINGTON, DC	FUNDRAISING COUNSEL		X	500,000.	36,600.	463,400.
Total				1,285,000.	336,600.	948,400.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		(event type)	(event type)	(total number)	(add col. (a) through col. (c))	
Revenue	1	Gross receipts				
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)				
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses				
	10	Direct expense summary. Add lines 4 through 9 in column (d)				
	11	Net income summary. Subtract line 10 from line 3, column (d)				

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

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

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name _____

Address _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____
- c If "Yes," enter name and address of the third party:

Name _____

Address _____

16 Gaming manager information:

Name _____

Gaming manager compensation \$ _____

Description of services provided _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ _____

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

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: THE BONNER GROUP

(I) ADDRESS OF FUNDRAISER:

800 MAINE AVE SW, SUITE 450, WASHINGTON, DC 20026

(I) NAME OF FUNDRAISER: ABUNDANCE STRATEGIES

(I) ADDRESS OF FUNDRAISER: 1900 L STREET, NW, WASHINGTON, DC 20036

Part IV Supplemental Information *(continued)*

Lined area for supplemental information

**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

2022

**Open to Public
Inspection**

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

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
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) and government organizations listed in the line 1 table 246.

3 Enter total number of other organizations listed in the line 1 table 88.

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

Schedule I (Form 990) 2022

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
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
ABOUT FACE THEATRE COLLECTIVE 5252 N BROADWAY CHICAGO, IL 60640	36-4067995	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT AND 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
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

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
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.			HEALTH
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		554,597.	0.			HEALTH
ALAMO WOMEN'S CLINIC OF ILLINOIS LLC - 2800 W MAIN STREET - CARBONDALE, IL 62901	88-3558903		490,050.	0.			HEALTH
ALASKA PUBLIC INTEREST RESEARCH GROUP - 308 G STREET - ANCHORAGE, AK 99501	92-0047627	501(C)(3)	76,250.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
ALLEGHENY REPRODUCTIVE HEALTH CENTER - 5910 KIRKWOOD ST - PITTSBURGH, PA 15206	82-0598328		483,035.	0.			HEALTH
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, DC 20006	82-1517696	501(C)(3)	300,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICA ACHIEVES INC 244 FIFTH AVENUE NEW YORK, NY 10001	27-3238471	501(C)(3)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
AMERICA VOTES 1155 CONNECTICUT AVE NW WASHINGTON, DC 20036	26-4568349	501(C)(4)	6,323.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
AMERICAN CIVIL LIBERTIES UNION FOUNDATION INC - 125 BROAD STREET - NEW YORK, NY 10004	13-6213516	501(C)(3)	250,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
AMERICAN CONSTITUTION SOCIETY FOR LAW AND POLICY - 1899 L STREET NW - WASHINGTON, DC 20036	52-2313694	501(C)(3)	150,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
AMERICAN INDEPENDENT FOUNDATION 800 MAINE AVENUE SW WASHINGTON, DC 20024	33-1137541	501(C)(3)	1,315,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
APPALACHIAN COMMUNITY FUND 1405 EAST MAGNOLIA AVENUE KNOXVILLE, TN 37917	62-1316019	501(C)(3)	9,944.	0.			TECHNOLOGY AND INNOVATION
ARCHIVE OF CONTEMPORARY MUSIC 54 WHITE ST NEW YORK, NY 10013	13-3347764	501(C)(3)	100,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
ARTICLE IV 2308 MOUNT VERNON AVE NEW YORK, NY 22301	86-2820532	501(C)(4)	433,108.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
ASYLUM SEEKER ADVOCACY PROJECT 228 PARK AVE S NEW YORK, NY 10003	83-3011862	501(C)(3)	250,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
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
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 - WASHINGTON, DC 20036	04-3454684	501(C)(3)	24,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
BESTSELF BEHAVIORAL HEALTH INC 255 DELAWARE AVENUE BUFFALO, NY 14202	16-1004090	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT AND EDUCATION
BETTER PENNSYLVANIA INC 1740 MAIN STREET MECHANICSBURG, PA 17055	84-3194010	501(C)(4)	491,800.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
BLACK PROGRESSIVE ACTION COALITION 1032 15TH STREET NW WASHINGTON, DC 20005	82-1514760	501(C)(4)	1,750,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
BLUE MOUNTAIN CLINIC 610 N CALIFORNIA MISSOULA, MT 59802	81-0365291	501(C)(3)	135,839.	0.			HEALTH

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
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 4477 S ARCHER AVE CHICAGO, IL 60632	36-4229387	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT AND 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)

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
CENTENNIAL STATE PROSPERITY PO BOX 6692 DENVER, CO 80206	84-3973327	501(C)(4)	514,475.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
CENTER FOR AMERICAN PROGRESS 1333 H ST NW WASHINGTON, DC 20005	30-0126510	501(C)(3)	250,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
CENTER FOR MEDIA AND DEMOCRACY, INC. - 122 W WASHINGTON AVENUE - MADISON, WI 53703	39-1777402	501(C)(3)	150,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
CENTER FOR TECHNOLOGY AND CIVIC LIFE - 233 N MICHIGAN AVENUE - CHICAGO, IL 60601	47-2158694	501(C)(3)	1,100,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
CENTER ON HALSTED 3656 N HALSTED ST CHICAGO, IL 60613	51-0178807	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT AND 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 WASHINGTON, DC 20002	52-0895622	501(C)(3)	203,522.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
CHOOSE LOVE INC 45 WEST 36TH ST., 6TH FLOOR NEW YORK, NY 10018-7635	83-1378746	501(C)(3)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CIVIC NATION 1156 15TH ST NW WASHINGTON, DC 20005	47-3576918	501(C)(3)	500,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
COLORADO CENTER ON LAW AND POLICY 789 N SHERMAN ST DENVER, CO 80203	84-1264154	501(C)(3)	20,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
COLORADO CONSUMER HEALTH INITIATIVE - 1420 N OGDEN STREET - DENVER, CO 80218	84-1145452	501(C)(3)	42,500.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
COLORADO DEMOCRACY NETWORK PO BOX 816 DENVER, CO 80201	45-4555568	501(C)(3)	34,000.	0.			CIVIL RIGHTS, SOCIAL 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 AVE - CHICAGO, IL 60647	85-1300728	501(C)(3)	292,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
COMMON CAUSE EDUCATION FUND 805 15TH STREET NW WASHINGTON, DC 20005	31-1705370	501(C)(3)	175,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
COMMUNITY ROOTS MIDWIFE COLLECTIVE 738 COFFMAN STREET LONGMONT, CO 80501	83-2559201	501(C)(3)	9,910.	0.			TECHNOLOGY AND INNOVATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONSERVATION VOTERS OF PENNSYLVANIA - PO BOX 2125 - PHILADELPHIA, PA 19103	11-3399458	501(C)(4)	25,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
CONSUMERS FOR AFFORDABLE HEALTH CARE FOUNDATION - 12 CHURCH STREET - AUGUSTA, ME 04330	04-3366975	501(C)(3)	18,500.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
CONWAYSTRATEGIC, LLC 2202 18TH STREET NW WASHINGTON, DC 20009	47-2702041		152,589.	0.			HEALTH
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 INNOVATION
DC ABORTION FUND PO BOX 65061 WASHINGTON, DC 20035	20-4713150	501(C)(3)	30,015.	0.			TECHNOLOGY AND INNOVATION
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 INNOVATION
DEMOCRACY NORTH CAROLINA 3000 AERIAL CENTER PARKWAY MORRISVILLE, NC 27560	56-2271150	501(C)(3)	31,200.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DESERT STAR FAMILY PLANNING 1526 W GLENDALE AVE PHOENIX, AZ 85021	46-2626520		53,277.	0.			HEALTH
DIVERSIFY OUR NARRATIVE 1968 S COAST HWY LAGUNA BEACH, CA 92651	85-3811196	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT AND EDUCATION
EASTERN MASSACHUSETTS ABORTION FUND INCORPORATED - 995 MASSACHUSETTS AVE - CAMBRIDGE, MA 02139	04-3502604	501(C)(3)	5,888.	0.			TECHNOLOGY AND INNOVATION
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 NEW YORK, NY 10003	85-3888872	501(C)(3)	1,071,793.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
ECUMENICAL COALITION FOR WOMEN AND FAMILIES - 133 SAINT GEORGE AVE - BILOXI, MS 39530	47-3227605	501(C)(3)	107,000.	0.			HEALTH
EMBARC INC PO BOX 221450 CHICAGO, IL 60622	27-3453182	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT AND EDUCATION
EMERGENCY MEDICAL ASSISTANCE INC PO BOX 33552 PALM BEACH GARDENS, FL 33420	51-0198610	501(C)(3)	14,150.	0.			HEALTH
EQUIS INSTITUTE 1728 OCEAN AVE SAN FRANCISCO, CA 94112	87-1337465	501(C)(3)	750,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EXHALE- AN AFTER ABORTION COUNSELING TALKLINE - PO BOX 14562 - SAN FRANCISCO, CA 94114	94-3393719	501(C)(3)	19,305.	0.			TECHNOLOGY AND INNOVATION
EXODUS FINANCIAL SERVICES 2380 WYCLIFF STREET ST PAUL, MN 55114	47-1706853	501(C)(3)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
FAIR DEMOCRACY 918 PENNSYLVANIA AVE SE WASHINGTON, DC 20003	82-2747849	501(C)(4)	3,850,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
FAIR FUTURE NC 8 ST MARY'S STREET RALEIGH, NC 27605	84-3038674	501(C)(4)	140,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
FAMILY FRIENDLY ACTION FUND 114 NORTH MAIN STREET CONCORD, NH 03301	83-1806898	501(C)(4)	1,250,000.	0.			CIVIL RIGHTS, SOCIAL 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 MILWAUKEE, WI 53202	27-0321696	501(C)(3)	50,000.	0.			CIVIL RIGHTS, SOCIAL 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

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FINANCIAL SERVICES STAKEHOLDER ACTION NFP - 2513 N CENTRAL PARK AVE - CHICAGO, IL 60647	82-1727600	501(C)(4)	30,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
FINANCIAL SERVICES STAKEHOLDER PROJECT NFP - 2513 N CENTRAL PARK AVE - CHICAGO, IL 60647	82-1722599	501(C)(3)	25,000.	0.			CIVIL RIGHTS, SOCIAL 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 ROAD - ORLANDO, FL 32811	30-0714793	501(C)(3)	25,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
FLORIDA WATCH ACTION 542 NE 72 ST MIAMI, FL 33138	27-1856471	501(C)(4)	100,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
FOS FEMINISTA 125 MAIDEN LANE NEW YORK, NY 10038	13-1845455	501(C)(3)	500,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
FOUNDATION FOR LOUISIANA 4354 S SHERWOOD FOREST BLVD BATON ROUGE, LA 70816	20-3399944	501(C)(3)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
FREE FAIR PA 121 S BROAD ST PHILADELPHIA, PA 19107	86-1432786	501(C)(4)	45,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
FREE PRESS INC PO BOX 60238 FLORENCE, MA 01062	41-2106721	501(C)(3)	250,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FREEDOM VIRGINIA 103 DUNDEE AVE RICHMOND, VA 23225	85-1257540	501(C)(4)	859,350.	0.			CIVIL RIGHTS, SOCIAL 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 BALTIMORE, MD 21201	52-1129402	501(C)(3)	49,900.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
FUND FOR THE CITY OF NEW YORK INC 121 AVENUE OF THE AMERICAS NEW YORK, NY 10013	13-2612524	501(C)(3)	582,796.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
FUTURE FORWARD USA ACTION 611 PENNSYLVANIA AVE SE WASHINGTON, DC 20003	82-4170762	501(C)(4)	1,545,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
FUTURE GEORGIA INC 1972 BINNIES WAY BUFORD, GA 30519	87-4560489	501(C)(4)	110,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
FUTURE NOW ACTION 700 13TH ST NW WASHINGTON, DC 20005	82-2390410	501(C)(4)	2,322,495.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
FWD.US EDUCATION FUND INC 1101 K STREET NW WASHINGTON, DC 20005	82-0962378	501(C)(3)	200,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GAINESVILLE WOMAN CARE LLC 1233 NW 10TH AVE GAINESVILLE, FL 32601	20-1789123		100,452.	0.			HEALTH
GEARS THE GEORGIA EARLY EDUCATION ALLIANCE FOR READY - 3400 PEACHTREE RD - ATLANTA, GA 30326	46-4250104	501(C)(3)	100,000.	0.			CIVIL RIGHTS, SOCIAL 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 NEW YORK, NY 10001	30-0728021	501(C)(3)	80,000.	0.			YOUTH DEVELOPMENT AND EDUCATION
GLOBAL NOMADS GROUP ONE PENN PLAZA NEW YORK, NY 10119	75-2750127	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT AND EDUCATION
GOOD NATION FOUNDATION INC 100 CROSBY STREET NEW YORK, NY 10012	81-4768448	501(C)(3)	250,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
HEALTH ACCESS FUND 9466 GEORGIA AVE SILVER SPRING, MD 20910	88-0640668	501(C)(3)	100,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
HEALTH ACTION NEW MEXICO 3200 OSUNA RD NE ALBUQUERQUE, NM 87109	85-0481860	501(C)(3)	10,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
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 SHREVEPORT, LA 71104	72-1448398		35,000.	0.			HEALTH
HUMANITY PLUS INC 5042 WILSHIRE BOULEVARD LOS ANGELES, CA 90036	01-0575214	501(C)(3)	212,190.	0.			INTERNATIONAL DEVELOPMENT AND FOREIGN AFFAIRS
IF WHEN HOW 1714 FRANKLIN STREET OAKLAND, CA 94612	90-0181944	501(C)(3)	30,000.	0.			TECHNOLOGY AND INNOVATION
IGH PLLC 1037 NE 65TH ST SEATTLE, WA 98115	83-3587381		136,396.	0.			HEALTH
IMAGINE NC FIRST PO BOX 428 RALEIGH, NC 27602	46-4006055	501(C)(3)	250,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
INNOVATIONS OF REPRODUCTIVE HEALTH ACCESS - 1001 46TH STREET - EMERYVILLE, CA 94608	86-2767502	501(C)(3)	108,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
INSTITUTE ON TAXATION AND ECONOMIC POLICY - 1616 P ST NW - WASHINGTON, DC 20036	04-3688165	501(C)(3)	140,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
INTERNATIONAL PLANNED PARENTHOOD FEDERATION WORLDWIDE - 1129 20TH STREET NW - WASHINGTON, DC 20036	20-4365831	501(C)(3)	300,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INTERNATIONAL REFUGEE ASSISTANCE PROJECT INC - 40 RECTOR ST., 9TH FLOOR - NEW YORK, NY 10006	82-2167556	501(C)(3)	160,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
ISSUE ONE 1401 K ST NW WASHINGTON, DC 20005	32-0384285	501(C)(3)	100,000.	0.			CIVIL RIGHTS, SOCIAL 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 WASHINGTON, DC 20005	52-2346578	501(C)(3)	40,000.	0.			CIVIL RIGHTS, SOCIAL 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 BALTIMORE, MD 21218	52-0595110	501(C)(3)	300,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
JTP PROFESSIONAL SERVICE CORPORATION - 2038 FORD PARKWAY - SAINT PAUL, MN 55116	85-0868142	501(C)(3)	600,700.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
KNOXVILLE CENTER FOR REPRODUCTIVE HEALTH - 1547 W CLINCH AVE - KNOXVILLE, TN 37916	62-0949880		29,869.	0.			HEALTH
LEAD PA INSTITUTE INC 100 SOUTH BROAD STREET PHILADELPHIA, PA 19110	85-3429918	501(C)(3)	79,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEADERSHIP NOW PROJECT 1401 K ST NW WASHINGTON, DC 20005	82-1780610	501(C)(4)	610,070.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
LEADMO 3407 S JEFFERSON AVE ST LOUIS, MO 63118	84-4165460	501(C)(3)	10,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
LIGHTNING BASKETBALL INC 45 CHERRY VALLEY AVENUE WEST HEMPSTEAD, NY 11552	11-3633046	501(C)(3)	25,000.	0.			CIVIL RIGHTS, SOCIAL 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 CHICAGO, IL 60653	81-5487128	501(C)(3)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MAINE CENTER FOR ECONOMIC POLICY ONE WESTON COURT AUGUSTA, ME 04330	22-3317572	501(C)(3)	35,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MAINE CITIZENS FOR CLEAN ELECTIONS PO BOX 18187 PORTLAND, ME 04112	27-2646667	501(C)(3)	20,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MAINERS FOR WORKING FAMILIES 49 QUEBEC ST. APT 3 PORTLAND, ME 04101	84-3390123	501(C)(4)	260,932.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MARYLAND CENTER ON ECONOMIC POLICY 1800 N CHARLES ST BALTIMORE, MD 21201	90-0999151	501(C)(3)	110,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MARYLAND CITIZENS HEALTH INITIATIVE EDUCATION FUND INC - 2600 ST. PAUL STREET - BALTIMORE, MD 21218	52-2173223	501(C)(3)	25,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MARYLAND FAMILY NETWORK, INC 1001 EASTERN AVE 2ND FLOOR BALTIMORE, MD 21202	52-1486702	501(C)(3)	49,750.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MARYLAND PUBLIC INTEREST RESEARCH FOUNDATION - 2209 MARYLAND AVENUE - BALTIMORE, MD 21218	52-1033638	501(C)(3)	35,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MARYLAND RISE 7850 WALKER DRIVE GREENBELT, MD 20770	85-1251741	501(C)(4)	130,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MARYPIRG CITIZEN LOBBY INC 2209 MARYLAND AVE BALTIMORE, MD 21218	52-1818910	501(C)(4)	15,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MAYDAY MEDICINES INC 442 5TH AVENUE MANHATTAN, NY 10018	88-2577468	501(C)(3)	1,586,219.	0.			HEALTH
MEDIA MATTERS FOR AMERICA 800 MAINE AVE SW WASHINGTON, DC 20024	47-0928008	501(C)(3)	250,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MEMPHIS CENTER FOR REPRODUCTIVE HEALTH - 1203 POPLAR AVENUE - MEMPHIS, TN 38104	62-0931089	501(C)(3)	981,426.	0.			HEALTH

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MENDING MATTERS 11835 CARMEL MOUNTAIN RD SAN DIEGO, CA 92128	46-4080792	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT AND EDUCATION
METRO ORGANIZATION FOR RACIAL AND ECONOMIC EQUITY - 3151 OLIVE ST - KANSAS CITY, MO 61409	20-2470054	501(C)(3)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MIAMI FREEDOM PROJECT INC 937 NW 3RD AVENUE MIAMI, FL 33136	84-3808281	501(C)(4)	120,048.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MICHIGAN LEAGUE OF RESPONSIBLE VOTERS - 614 SEYMOUR AVE - LANSING, MI 48933	26-0900990	501(C)(4)	250,000.	0.			CIVIL RIGHTS, SOCIAL 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 DETROIT, MI 48201	83-0612165	501(C)(3)	250,000.	0.			CIVIL RIGHTS, SOCIAL 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 EMERYVILLE, CA 94608	27-3261154	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT AND EDUCATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MINNESOTA VOICE 165 WESTERN AVE NORTH SAINT PAUL, MN 55102	46-4457692	501(C)(3)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MOMSRISING EDUCATION FUND 12011 BEL RED RD BELLEVUE, WA 98005	45-2499952	501(C)(3)	40,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MONTANA BUDGET AND POLICY CENTER 15 WEST 6TH ST HELENA, MT 59601	80-0624179	501(C)(3)	40,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MOORE IMPACT INC 2590 WELTON ST DENVER, CO 80205	84-4714243	501(C)(3)	150,000.	0.			ARTS, CULTURE, AND HUMANITIES
MOTHERING JUSTICE 17320 LIVERNOIS AVE DETROIT, MI 48221	45-3740989	501(C)(3)	80,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
MOVEMENT ADVANCEMENT PROJECT INC 1905 15TH STREET BOULDER, CO 80306	47-3968535	501(C)(3)	300,000.	0.			CIVIL RIGHTS, SOCIAL 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

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
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 WASHINGTON, DC 20036	52-0698385	501(C)(3)	65,000.	0.			ARTS, CULTURE, AND HUMANITIES
NATIONAL EQUITY PROJECT 1720 BROADWAY OAKLAND, CA 94612	94-3222960	501(C)(3)	75,000.	0.			HEALTH
NATIONAL HEALTH LAW PROGRAM INC 3701 WILSHIRE BLVD LOS ANGELES, CA 90010	95-3080947	501(C)(3)	100,000.	0.			HEALTH
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 RALEIGH, NC 27604	58-1534066	501(C)(3)	75,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NC JUSTICE CENTER 224 S. DAWSON ST. RALEIGH, NC 27601	56-1348186	501(C)(3)	23,800.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
NEBRASKA ABORTION RESOURCES 17105 MERION DRIVE OMAHA, NE 68136	85-1982987	501(C)(3)	5,809.	0.			TECHNOLOGY AND INNOVATION
NEBRASKA APPLSEED CENTER FOR LAW IN PUBLIC INTEREST - PO BOX 83613 - LINCOLN, NE 68501	47-0798343	501(C)(3)	14,200.	0.			CIVIL RIGHTS, SOCIAL 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 LAS VEGAS, NV 89120	83-0744945	501(C)(4)	625,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
NEW AMERICAN LEADERS PROJECT INC 530 7TH AVE NEW YORK, NY 10018	45-3770977	501(C)(3)	250,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
NEW DAY NEVADA INC 7991 HACKBERRY DRIVE LAS VEGAS, NV 89123	84-3203462	501(C)(4)	2,088,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
NEW ERA COLORADO FOUNDATION PO BOX 4274 BOULDER, CO 80306	26-1389272	501(C)(3)	20,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
NEW HAMPSHIRE DEMOCRACY FUND PO BOX 176 PORTSMOUTH, NH 03802	84-4003182	501(C)(3)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW MEXICANS TO PREVENT GUN VIOLENCE - 3869 OLD SANTA FE TRAIL - SANTA FE, NM 87505	46-3026846	501(C)(3)	30,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
NEW MEXICO FAMILIES FORWARD PO BOX 7073 ALBUQUERQUE, NM 87194	87-1654225	501(C)(4)	382,400.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
NEW MEXICO VOICES FOR CHILDREN 625 SILVER AVENUE SW ALBUQUERQUE, NM 87102	85-0348301	501(C)(3)	16,910.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
NEW ORLEANS ABORTION FUND INC PO BOX 770141 NEW ORLEANS, LA 70117	46-0950114	501(C)(3)	10,000.	0.			TECHNOLOGY AND INNOVATION
NEW PENNSYLVANIA PROJECT EDUCATION FUND - PO BOX 443 - WEST CHESTER, PA 19381	86-1900180	501(C)(4)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
NEW RIVER ABORTION ACCESS FUND PO BOX 10701 BLACKSBURG, VA 24062	84-2154547	501(C)(3)	7,352.	0.			TECHNOLOGY AND INNOVATION
NEW VENTURE FUND 1828 L STREET, NW SUITE 300-A WASHINGTON, DC 20036	20-5806345	501(C)(3)	5,059,658.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
NEW YORK UNIVERSITY 295 LAFAYETTE STREET NEW YORK, NY 10012	13-5562308	501(C)(3)	243,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
NEXTGEN CHAMBER OF COMMERCE FOUNDATION - 700 PENNSYLVANIA AVE SE - WASHINGTON, DC 20001	82-4835903	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT AND EDUCATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NO LABEL MEDIA GROUP INC 910 LOUISIANA ST HOUSTON, TX 77002	85-3688066	501(C)(3)	36,707.	0.			YOUTH DEVELOPMENT AND EDUCATION
NORTH CAROLINA ALLIANCE FOR HEALTH 5001 S MIAMI BLVD DURHAM, NC 27703	81-4271401	501(C)(3)	30,000.	0.			CIVIL RIGHTS, SOCIAL 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 ST PAUL, MN 55117	86-2157002	501(C)(4)	1,500,750.	0.			CIVIL RIGHTS, SOCIAL 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 INNOVATION
OKLAHOMA RELIGIOUS COALITION FOR REPRODUCTIVE CHOICE - PO BOX 35194 - TULSA, OK 74153	73-1447828	501(C)(3)	9,024.	0.			TECHNOLOGY AND INNOVATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ONE ARIZONA 530 E MCDOWELL ROAD PHOENIX, AZ 85004	37-1782220	501(C)(3)	37,500.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
ONE WEST VIRGINIA INC 135 COMMUNITY RDG CULLODEN, WV 25510	85-3670951	501(C)(3)	171,500.	0.			CIVIL RIGHTS, SOCIAL 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 LOS ANGELES, CA 90067	82-1193619	501(C)(4)	91,355.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
OPPORTUNITIES FOR ALL FLORIDIANS INC - 4151 PARK AVENUE - MIAMI, FL 33136	84-2952039	501(C)(4)	289,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
OPPORTUNITY ARIZONA 3821 N 15TH DRIVE PHOENIX, AZ 85015	84-3103154	501(C)(4)	1,304,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
OUR MINDS MATTER 1300 CARPERS FARM WAY VIENNA, VA 22182	45-4313590	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT AND EDUCATION
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 NW - ALBUQUERQUE, NM 87104	86-2205713	501(C)(4)	112,070.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PEER HEALTH EXCHANGE 100 WEBSTER STREET OAKLAND, CA 94607	56-2374305	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT AND EDUCATION
PEGASUS HEALTH JUSTICE CENTER 1408 N RIVERFRONT BOULEVARD DALLAS, TX 75207	85-4291622		10,000.	0.			HEALTH
PEOPLE FIRST ECONOMY 345 FULLER AVENUE GRAND RAPIDS, MI 49503	20-4696543	501(C)(3)	100,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
PHARE BIO INC 303 CONGRESS ST BOSTON, MA 02210	85-1085804	501(C)(3)	200,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
PILLS BY POST LLC 4134 RUBY STREET YPSILANTI, MI 48197	85-1778926		9,942.	0.			TECHNOLOGY AND INNOVATION
PODER IN ACTION 4415 N MARYVALE PARKWAY PHOENIX, AZ 85063	46-2284158	501(C)(3)	75,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
POLICING EQUITY 1925 CENTURY PARK EAST LOS ANGELES, CA 90067	81-4945849	501(C)(3)	1,500,000.	0.			CIVIL RIGHTS, SOCIAL 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 WASHINGTON, DC 20036	82-0675521	501(C)(3)	1,250,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Schedule I (Form 990)

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

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

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUBLIC DEMOCRACY AMERICA 1901 N FORT MYER DR GREAT FALLS, VA 22066	27-1017781	501(C)(3)	250,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
PUBLIC HEALTH INSTITUTE OF METROPOLITAN CHICAGO - 180 N. MICHIGAN AVENUE - CHICAGO, IL 60601	36-3959353	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT AND EDUCATION
PUBLIC JUSTICE CENTER INC 201 N CHARLES ST BALTIMORE, MD 21201	52-1412226	501(C)(3)	20,000.	0.			CIVIL RIGHTS, SOCIAL 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
REGISTER HER 524 FORDHAM ROAD SAN MATEO, CA 94402	88-1719347	501(C)(3)	60,000.	0.			CIVIL RIGHTS, SOCIAL 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

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
REWIRE NEWS GROUP 1765 GREENSBORO STATION PLACE MCLEAN, VA 22102	27-2289715	501(C)(3)	12,550.	0.			TECHNOLOGY AND INNOVATION
RICHMOND MEDICAL CENTER FOR WOMEN 118 N ARTHUR ASHE BLVD RICHMOND, VA 23220	54-0944108		8,058.	0.			HEALTH
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 MINNEAPOLIS, MN 55402	41-0719631		50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
ROOM TO READ 465 CALIFORNIA STREET SAN FRANCISCO, CA 94104	91-2003533	501(C)(3)	80,000.	0.			YOUTH DEVELOPMENT AND 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 - MOUNTAIN VIEW, CA 94040	20-5205488	501(C)(3)	34,560.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
SILVER STATE HOPE FUND 7260 W AZURE DRIVE LAS VEGAS, NV 89130	46-4972833	501(C)(3)	5,107.	0.			TECHNOLOGY AND INNOVATION
SIRUM 3000 EL CAMINO REAL PALO ALTO, CA 94306	27-1103057	501(C)(3)	900,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SIXTEEN THIRTY FUND 1828 L STREET, NW SUITE 300-B WASHINGTON, DC 20036	26-4486735	501(C)(4)	7,024,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
SMALL BUSINESS MAJORITY FOUNDATION INC - 1015 15TH ST NW - WASHINGTON, DC 20005	03-0576666	501(C)(3)	30,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
SOCIAL GOOD FUND INC 12651 SAN PABLO AVE RICHMOND, CA 94805	46-1323531	501(C)(3)	176,738.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
SOJOURNERS INC 408 C STREET NE WASHINGTON, DC 20002	23-7380554	501(C)(3)	250,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
SOUL 2 SOUL SISTERS 1373 GRANT STREET DENVER, CO 80203	81-1006094	501(C)(3)	12,246.	0.			TECHNOLOGY AND INNOVATION
SOUTHWEST WOMEN'S LAW CENTER 128 QUINCY NE ALBUQUERQUE, NM 87108	20-2884027	501(C)(3)	60,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
SOUTHWESTERN WOMEN'S OPTIONS 522 LOMAS BLVD NE ALBUQUERQUE, NM 87102	85-0335259		452,950.	0.			HEALTH
SOUTHWESTERN WOMEN'S SURGERY CENTER LP - 8616 GREENVILLE AVE - DALLAS, TX 75243	26-3743095		70,148.	0.			HEALTH
STATE LEADERSHIP PROJECT PO BOX 223 RALEIGH, NC 27602	83-4006980	501(C)(3)	880,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STATE VOICES 1616 P STREET NW WASHINGTON, DC 20036	20-1115618	501(C)(3)	250,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
STATES NEWSROOM 1340 ENVIRON WAY, FL. 3 CHAPEL HILL, NC 27517	84-2113822	501(C)(3)	14,045.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
STATES UNITED DEMOCRACY CENTER 1101 17TH ST NW WASHINGTON, DC 20036	86-1704152	501(C)(3)	1,657,543.	0.			CIVIL RIGHTS, SOCIAL 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 NEW YORK, NY 10018	13-4188834	501(C)(3)	257,500.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
TBA FUND INC 690 MAIN ST SAFETY HARBOR, FL 34695	85-2493274	501(C)(3)	11,536.	0.			HEALTH
TED FOUNDATION INC 330 HUDSON STREET NEW YORK, NY 10013	82-1934592	501(C)(3)	100,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
TEXAS EQUAL ACCESS FUND PO BOX 227336 DALLAS, TX 75222	11-3736286	501(C)(3)	17,500.	0.			TECHNOLOGY AND INNOVATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEXAS GUN SENSE PO BOX 92722 AUSTIN, TX 78709	46-2247262	501(C)(3)	45,000.	0.			CIVIL RIGHTS, SOCIAL 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 NEW YORK, NY 10024	82-3843989	501(C)(3)	10,000.	0.			TECHNOLOGY AND INNOVATION
THE COMMON GROUND PROJECT 2578 FLORIDIANE DRIVE MELBOURNE, FL 32935	83-4375307	501(C)(4)	50,000.	0.			CIVIL RIGHTS, SOCIAL 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 WASHINGTON, DC 20009	37-1779557	501(C)(4)	288,186.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
THE FUND FOR A HEALTHIER COLORADO 303 E 17TH AVE DENVER, CO 80203	47-4101801	501(C)(3)	12,500.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
THE GOOD INFORMATION FOUNDATION 101 AVENUE OF AMERICAS NY, NY 10013	86-2025505	501(C)(3)	22,464.	0.			ARTS, CULTURE, AND HUMANITIES

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE HAWKINS PROJECT PO BOX 8368 ANN ARBOR, MI 48107	82-2406138	501(C)(3)	160,000.	0.			INTERNATIONAL DEVELOPMENT 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 ST - BOSTON, MA 02118	88-3171997	501(C)(3)	78,000.	0.			CIVIL RIGHTS, SOCIAL 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 WASHINGTON, DC 20036	55-0889748	501(C)(3)	52,500.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
THE VOTER PROJECT FUND PO BOX 22611 PHILADELPHIA, PA 19110	86-3082391	501(C)(3)	875,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
THE WISCONSIN INITIATIVE INC 420 W DAYTON STREET MADISON, WI 53703	87-1540257	501(C)(4)	393,700.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
THE WOMEN'S CENTER 133 PARK STREET NE VIENNA, VA 22180	23-7423496	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT AND EDUCATION
THIS IS MY BRAVE INC 880 HARRISON ST SE LEESBURG, VA 20175	20-8944419	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT AND EDUCATION

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TIDES ADVOCACY 1014 TORNEY AVE SAN FRANCISCO, CA 94129	94-3153687	501(C)(4)	125,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
TIDES CENTER 1014 TORNEY AVENUE SAN FRANCISCO, CA 94129	94-3213100	501(C)(3)	305,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
TIDES FOUNDATION 1012 TORNEY AVENUE SAN FRANCISCO, CA 94129	51-0198509	501(C)(3)	250,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
TOWARDS JUSTICE 1410 HIGH ST, SUITE 300 DENVER, CO 80218	46-4625504	501(C)(3)	45,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
TRANSFAMILY SUPPORT SERVICES 12463 RANCHO BERNARDO RD SAN DIEGO, CA 92128	47-3880841	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT AND 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 AUSTIN, TX 78715	86-2508677	501(C)(3)	206,938.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
UNIDOSUS 1126 16TH STREET NW WASHINGTON, DC 20036	86-0212873	501(C)(3)	150,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
UNITE AMERICA INSTITUTE INC 1580 N LINCOLN ST DENVER, CO 80203	27-3001286	501(C)(3)	850,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF CHICAGO 1201 E 60TH ST CHICAGO, IL 60637	36-2177139	501(C)(3)	150,000.	0.			CIVIL RIGHTS, SOCIAL 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 - SEATTLE, WA 98195	94-3079432	501(C)(3)	1,666,667.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
US TOGETHER INC 1415 E DUBLIN GRANVILLE RD COLUMBUS, OH 43229	83-0395108	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT AND EDUCATION
VIRGINIA INTERFAITH CENTER FOR PUBLIC POLICY - 1716 E FRANKLIN ST - RICHMOND, VA 23223	54-1362857	501(C)(3)	35,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
VIRGINIA POVERTY LAW CENTER 919 E. MAIN STREET RICHMOND, VA 23219	54-1093402	501(C)(3)	70,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
VOICES FOR VIRGINIA'S CHILDREN 1606 SANTA ROSA ROAD HENRICO, VA 23229	54-1726265	501(C)(3)	35,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
VOTE FORWARD 611 PENNSYLVANIA AVE SE WASHINGTON, DC 20003	84-2427217	501(C)(4)	2,715,585.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VOTE REV ACTION FUND 611 PENNSYLVANIA AVE SE WASHINGTON, DC 20003	84-3996441	501(C)(4)	1,699,683.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
VOTE.ORG 4096 PIEDMONT AVE OAKLAND, CA 94611	26-2094990	501(C)(3)	1,000,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
VOTO LATINO FOUNDATION 1701 RHODE ISLAND AVE NW WASHINGTON, DC 20036	20-1350252	501(C)(3)	250,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
WAVE EDUCATIONAL FUND INC PO BOX 170393 MILWAUKEE, WI 53217	39-1917076	501(C)(3)	45,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
WAY TO WIN ACTION FUND INC 340 S LEMON AVE WALNUT, CA 91789	82-5528039	501(C)(4)	270,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
WEST ALABAMA WOMEN'S CENTER INC 535 JACK WARNER PARKWAY TUSCALOOSA, AL 35404	63-1097123	501(C)(3)	30,000.	0.			HEALTH
WEST VIRGINIA CENTER ON BUDGET AND POLICY - 8 CAPITOL STREET - CHARLESTON, WV 25301	56-2653132	501(C)(3)	50,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
WEST VIRGINIA FREE INC PO BOX 11042 CHARLESTON, WV 25339	55-0715930	501(C)(3)	7,000.	0.			HEALTH
WHITNEYSTRONG INC 1435 WILLOW AVE LOUISVILLE, KY 40204	83-1941981	501(C)(3)	45,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
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)	55,000.	0.			HEALTH
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		17,294.	0.			HEALTH
WHOLE WOMAN'S OF CHARLOTTE LLC 700 EAST HEBRON STREET CHARLOTTE, NC 28273	88-3721936		235,350.	0.			HEALTH
WILD WEST ACCESS FUND OF NEVADA 561 KEYSTONE AVENUE RENO, NV 89503	87-2812330	501(C)(3)	18,300.	0.			HEALTH
WISCONSIN EARLY CHILDHOOD ASSOCIATION INC - 2908 MARKETPLACE DR - FITCHBURG, WI 53719	39-1345572	501(C)(3)	70,000.	0.			CIVIL RIGHTS, SOCIAL ACTION, ADVOCACY
WOMEN LEADERS EMERGE 4 EMBARCADERO CENTER SAN FRANCISCO, CA 94111	83-1787883	501(C)(4)	250,000.	0.			CIVIL RIGHTS, SOCIAL 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

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
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 EDUCATION
YOUTH PASSAGEWAYS PO BOX 46631 KANSAS CITY, MO 64188	47-4750095	501(C)(3)	50,000.	0.			YOUTH DEVELOPMENT AND EDUCATION

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

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.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

HOPEWELL FUND

Employer identification number

47-3681860

Part I Questions Regarding Compensation

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.

- | | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input checked="" type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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

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?

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.

- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- 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:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- 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

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

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7	X	
8		X
9		

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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) 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)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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 Inspection

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.

Department of the Treasury
Internal Revenue Service

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

Part 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	(d) Method of determining noncash contribution amounts
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 DONATION
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				
17 Real estate - Other				
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 organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29** 0

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b 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?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2022

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

THE ORGANIZATION IS REPORTING THE NUMBER OF ITEMS CONTRIBUTED (DEFINED

AS EACH SEPARATE GIFT, RATHER THAN EACH SHARE RECEIVED) IN SCHEDULE M,

PART I, COLUMN (B).

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

HOPEWELL FUND

Employer identification number

47-3681860

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

INNOVATIVE SOCIAL CHANGE PROJECTS, PRIMARILY THROUGH FISCAL

SPONSORSHIP. 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

IMPACT THEY SEEK. HOPEWELL IS MANAGED BY A BOARD OF DIRECTORS WITH

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

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

Schedule O (Form 990) 2022

232211 10-28-22

Name of the organization HOPEWELL FUND	Employer identification number 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.

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.
TOTAL TO FORM 990, PART XI, LINE 9	973,761.