

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2024

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Header section A-M containing organization details: Name (EVERYTOWN FOR GUN SAFETY SUPPORT FUND, INC.), EIN (26-1598353), Telephone (646-324-8250), Gross receipts (\$37,451,770), Website (WWW.EVERYTOWNSUPPORTFUND.ORG), and Form of organization (Corporation).

Part I Summary

Summary table with columns for Revenue, Expenses, and Net Assets or Fund Balances. Rows include mission statement, membership counts, revenue breakdown (Total revenue: 37,348,957), expense breakdown (Total expenses: 42,246,007), and net assets (Total assets: 37,520,362).

Part II Signature Block

Signature block containing officer signature (JOHN FEINBLATT, PRESIDENT), preparer information (JOSEPH KLUEMPER, GELLER & COMPANY LLC), and date (11.4.24).

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

**Application for Extension of Time To File an Exempt Organization
Return or Excise Taxes Related to Employee Benefit Plans**

Department of the Treasury
Internal Revenue Service

File a separate application for each return.
Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Part I - Identification

Type or Print	Name of exempt organization, employer, or other filer, see instructions. EVERYTOWN FOR GUN SAFETY SUPPORT FUND, INC.	Taxpayer identification number (TIN) 26-1598353
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. P.O. BOX 4184	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10163	

Enter the Return Code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08	Form 990-T (governmental entities)	15

• After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.

• If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name _____
 Plan Number _____
 Plan Year Ending (MM/DD/YYYY) _____

Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions)

The books are in the care of **MICHAEL BROUILLARD C/O GELLER & COMPANY LLC**
PO BOX 1510 - NEW YORK, NY 10150

Telephone No. **212-583-6001** Fax No. **646-998-8527**

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15**, 20 **25**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

calendar year 20 **24** or
 tax year beginning _____, 20 _____, and ending _____, 20 _____

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

**MAIL TO: INTERNAL REVENUE SERVICE
 MAIL STOP 6054
 1973 N RULON WHITE BLVD.
 OGDEN, UT 84201-0045**

EVERYTOWN FOR GUN SAFETY SUPPORT FUND,
INC.

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Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
EVERYTOWN FOR GUN SAFETY SUPPORT FUND SEEKS TO IMPROVE OUR UNDERSTANDING OF THE CAUSES OF GUN VIOLENCE AND HELP TO REDUCE IT BY CONDUCTING GROUNDBREAKING ORIGINAL RESEARCH, DEVELOPING EVIDENCE-BASED POLICIES, COMMUNICATING THIS KNOWLEDGE TO THE AMERICAN PUBLIC, AND

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O.

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

4a (Code: _____) (Expenses \$ 34,669,257. including grants of \$ 6,821,157.) (Revenue \$ 52,977.)
SEE SCHEDULE O.

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

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

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

4e Total program service expenses 34,669,257.

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**EVERYTOWN FOR GUN SAFETY SUPPORT FUND,
INC.**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

**EVERYTOWN FOR GUN SAFETY SUPPORT FUND,
INC.**

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Part IV Checklist of Required Schedules *(continued)*

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	X
28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	38	X

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	101
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X

**EVERYTOWN FOR GUN SAFETY SUPPORT FUND,
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Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 124		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? ...		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12 10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders 11a		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state?		
	Note: See the instructions for additional information the organization must report on Schedule O.		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b		
c	Enter the amount of reserves on hand 13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?		X
	If "Yes," see the instructions and file Form 4720, Schedule N.		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		X
	If "Yes," complete Form 4720, Schedule O.		
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		
	If "Yes," complete Form 6069.		

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

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

Section A. Governing Body and Management

			Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	1a	7		
b Enter the number of voting members included on line 1a, above, who are independent	1b	7		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3			X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6 Did the organization have members or stockholders?	6		X	
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?	8a		X	
b Each committee with authority to act on behalf of the governing body?	8b			X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9			X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed AL, AR, CA, FL, GA, HI, IL, KS, KY, MD, MA, MI
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website 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
MICHAEL BROUILLARD C/O GELLER & COMPANY LLC - 212-583-6001
PO BOX 1510, NEW YORK, NY 10150

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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) ERIC TIRSCHWELL EVERYTOWN LAW EXECUTIVE DIRECTOR & C	40.00					X	354,421.	0.	54,860.	
(2) TAMARA FERRELL-ZABALA MOMS DEMAND ACTION EXECUTIVE DIRECTO	40.00					X	355,117.	0.	41,060.	
(3) BECKY GEORGE CHIEF MOVEMENT BUILDING OFFICER	40.00					X	263,892.	0.	27,541.	
(4) MICHAEL-SEAN SPENCE COMMUNITY SAFETY INITIATIVES MANAGIN	40.00					X	220,988.	0.	47,690.	
(5) ALLA LEFKOWITZ AFFIRMATIVE LITIGATION MANAGING DIRE	40.00					X	229,988.	0.	21,400.	
(6) JOHN FEINBLATT PRESIDENT & DIRECTOR	15.00	X		X			0.	0.	0.	
(7) RICHARD K. DESCHERER VICE PRES & DIRECTOR THRU 3/23/24	0.50	X		X			0.	0.	0.	
(8) IAN SHAPIRO SECRETARY & DIRECTOR	0.50	X		X			0.	0.	0.	
(9) MEGAN SHEEKEY DIRECTOR	0.50	X					0.	0.	0.	
(10) SHARI HYMAN DIRECTOR	0.50	X					0.	0.	0.	
(11) MICHAEL BROUILLARD CHIEF FINANCIAL OFFICER & TREASURER	20.00			X			0.	0.	0.	
(12) HOWARD WOLFSON VICE PRES & DIRECTOR AS OF 5/21/24	0.50	X		X			0.	0.	0.	
(13) DENNIS WALCOTT DIRECTOR AS OF 5/21/24	0.50	X					0.	0.	0.	
(14) FATIMA SHAMA DIRECTOR AS OF 5/21/24	0.50	X					0.	0.	0.	

**EVERYTOWN FOR GUN SAFETY SUPPORT FUND,
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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	35,801,796.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 102,813.				
	h Total. Add lines 1a-1f			35,801,796.			
Program Service Revenue	2 a PROGRAM SERVICE REVENUE	Business Code					
		900099	52,977.	52,977.			
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
g Total. Add lines 2a-2f			52,977.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		1,485,337.			1485337.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties		4,347.			4,347.	
	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	103,508.			
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	102,813.				
	c Gain or (loss)	7c	695.				
	d Net gain or (loss)			695.		695.	
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 PRIOR YEAR REFUNDS	Business Code					
		900099	3,805.			3,805.	
	b _____						
	c _____						
	d All other revenue						
e Total. Add lines 11a-11d			3,805.				
12 Total revenue. See instructions			37,348,957.	52,977.	0.	1494184.	

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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 **X**

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	6,821,157.	6,821,157.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	16,177,265.	13,968,327.	1,895,611.	313,327.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	490,895.	423,638.	57,117.	10,140.
9 Other employee benefits	3,041,332.	2,665,559.	336,998.	38,775.
10 Payroll taxes	1,280,906.	1,122,399.	133,857.	24,650.
11 Fees for services (nonemployees):				
a Management				
b Legal	1,044,930.	839,881.	190,503.	14,546.
c Accounting	2,599,670.		2,599,670.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	349,760.			349,760.
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	5,859,406.	5,539,458.	256,617.	63,331.
12 Advertising and promotion	205,838.	190,838.		15,000.
13 Office expenses	506,704.	95,963.	408,728.	2,013.
14 Information technology	596,618.	257,308.	314,133.	25,177.
15 Royalties				
16 Occupancy	106,717.	106,717.		
17 Travel	1,170,757.	1,056,363.	47,661.	66,733.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	971,793.	935,406.	34,562.	1,825.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	336,307.	290,386.	39,407.	6,514.
23 Insurance	202,793.		202,793.	
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 DATA ACQUISITION	208,600.	208,600.		
b BANK & CREDIT CARD FEES	100,018.		100,018.	
c RESEARCH & RECORDS FEES	98,459.	98,459.		
d POSTAGE AND PRINTING	38,381.	36,547.	1,536.	298.
e All other expenses	37,701.	12,251.	5,313.	20,137.
25 Total functional expenses. Add lines 1 through 24e	42,246,007.	34,669,257.	6,624,524.	952,226.
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)				

**EVERYTOWN FOR GUN SAFETY SUPPORT FUND,
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Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	2,108,943.	1	1,653,088.
	2 Savings and temporary cash investments	35,694,270.	2	29,476,106.
	3 Pledges and grants receivable, net	1,600,000.	3	3,160,000.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	192,413.	9	140,539.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	230,385.		
	b Less: accumulated depreciation	184,980.	10c	45,405.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets	424,877.	14	118,689.
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 33)	40,096,027.	16	34,593,827.	
Liabilities	17 Accounts payable and accrued expenses	1,370,310.	17	1,185,450.
	18 Grants payable	1,205,355.	18	785,000.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	2,575,665.	26	1,970,450.
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	35,714,487.	27	29,085,610.
	28 Net assets with donor restrictions	1,805,875.	28	3,537,767.
	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	37,520,362.	32	32,623,377.
	33 Total liabilities and net assets/fund balances	40,096,027.	33	34,593,827.

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**EVERYTOWN FOR GUN SAFETY SUPPORT FUND,
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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	37,348,957.
2	Total expenses (must equal Part IX, column (A), line 25)	2	42,246,007.
3	Revenue less expenses. Subtract line 2 from line 1	3	-4,897,050.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	37,520,362.
5	Net unrealized gains (losses) on investments	5	65.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	32,623,377.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		X
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____		

**EVERYTOWN FOR GUN SAFETY SUPPORT FUND,
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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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	27218030.	29061388.	57899292.	31802725.	35801796.	181783231
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	27218030.	29061388.	57899292.	31802725.	35801796.	181783231
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)						16323996.
6 Public support. Subtract line 5 from line 4.						165459235

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	27218030.	29061388.	57899292.	31802725.	35801796.	181783231
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	67,056.	3,598.	433,078.	1600785.	1489684.	3594201.
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.)						
11 Total support. Add lines 7 through 10						185377432
12 Gross receipts from related activities, etc. (see instructions)					12	
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 2024 (line 6, column (f), divided by line 11, column (f))	14	89.26 %
15 Public support percentage from 2023 Schedule A, Part II, line 14	15	92.74 %
16a 33 1/3% support test - 2024. 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 - 2023. 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 - 2024. 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 - 2023. 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"/>

**EVERYTOWN FOR GUN SAFETY SUPPORT FUND,
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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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(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 2024 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2023 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2023 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2024. 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 - 2023. 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

**EVERYTOWN FOR GUN SAFETY SUPPORT FUND,
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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>		

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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		

**EVERYTOWN FOR GUN SAFETY SUPPORT FUND,
INC.**

Schedule A (Form 990) 2024

26-1598353 Page 6

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		(A) Prior Year	(B) Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)		Current Year
2	Enter 0.85 of line 1.		
3	Minimum asset amount for prior year (from Section B, line 8, column A)		
4	Enter greater of line 2 or line 3.		
5	Income tax imposed in prior year		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).		
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) 2024

**EVERYTOWN FOR GUN SAFETY SUPPORT FUND,
INC.**

Schedule A (Form 990) 2024

26-1598353 Page 7

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 (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2024 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-2024	(iii) Distributable Amount for 2024
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2024			
a From 2019			
b From 2020			
c From 2021			
d From 2022			
e From 2023			
f Total of lines 3a through 3e			
g Applied to under distributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, 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 2024. 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 2025. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020			
b Excess from 2021			
c Excess from 2022			
d Excess from 2023			
e Excess from 2024			

Schedule A (Form 990) 2024

Schedule B (Form 990)

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

Schedule of Contributors

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

OMB No. 1545-0047

Table with 2 columns: Name of the organization (EVERYTOWN FOR GUN SAFETY SUPPORT FUND, INC.) and Employer identification number (26-1598353)

Organization type (check one):

Filers of:

Section:

- Form 990 or 990-EZ: [X] 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

- [X] 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 EVERYTOWN FOR GUN SAFETY SUPPORT FUND, INC.	Employer identification number 26-1598353
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	_____ _____ _____	\$ <u>7,330,161.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>	_____ _____ _____	\$ <u>4,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>	_____ _____ _____	\$ <u>3,603,860.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>	_____ _____ _____	\$ <u>2,080,304.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>	_____ _____ _____	\$ <u>2,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>6</u>	_____ _____ _____	\$ <u>1,168,180.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization EVERYTOWN FOR GUN SAFETY SUPPORT FUND, INC.	Employer identification number 26-1598353
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/>	\$ <u>1,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/>	\$ <u>842,724.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	<hr/> <hr/> <hr/>	\$ <u>789,212.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	<hr/> <hr/> <hr/>	\$ <u>12,987,355.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization EVERYTOWN FOR GUN SAFETY SUPPORT FUND, INC.	Employer identification number 26-1598353
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
10	STOCK - VARIOUS <hr/> <hr/> <hr/>	\$ 102,813.	12/31/24
<hr/>	<hr/> <hr/> <hr/>	\$ _____	_____
<hr/>	<hr/> <hr/> <hr/>	\$ _____	_____
<hr/>	<hr/> <hr/> <hr/>	\$ _____	_____
<hr/>	<hr/> <hr/> <hr/>	\$ _____	_____
<hr/>	<hr/> <hr/> <hr/>	\$ _____	_____
<hr/>	<hr/> <hr/> <hr/>	\$ _____	_____

Name of organization EVERYTOWN FOR GUN SAFETY SUPPORT FUND, INC.	Employer identification number 26-1598353
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

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

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

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

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

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

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

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

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2024

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 I-B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and I-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 EVERYTOWN FOR GUN SAFETY SUPPORT FUND, INC.	Employer identification number (EIN) 26-1598353
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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 EINs 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-.

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)	1,000,000.													
c Total lobbying expenditures (add lines 1a and 1b)	1,000,000.													
d Other exempt purpose expenditures	33,669,257.													
e Total exempt purpose expenditures (add lines 1c and 1d)	34,669,257.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%; text-align: left;">IF the amount on line 1e, column (a) or (b), is:</th> <th style="text-align: left;">THEN 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:	THEN 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:	THEN 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)	250,000.													
h Subtract line 1g from line 1a. If zero or less, enter -0-	0.													
i Subtract line 1f from line 1c. If zero or less, enter -0-	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) 2021	(b) 2022	(c) 2023	(d) 2024	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures			10,000.		10,000.

SCHEDULE D
(Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization **EVERYTOWN FOR GUN SAFETY SUPPORT FUND,
INC.** Employer identification number
26-1598353

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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

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

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

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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

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

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

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

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

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

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

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

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

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

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

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

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

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

LHA 432051 01-02-25

EVERYTOWN FOR GUN SAFETY SUPPORT FUND,

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, line 12, col. (B))		

Part VIII Investments - Program Related.

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

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

Part IX Other Assets

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

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

Part X Other Liabilities

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

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

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

EVERYTOWN FOR GUN SAFETY SUPPORT FUND,

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	38,787,413.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	65.
b	Donated services and use of facilities	2b	1,438,391.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	1,438,456.
3	Subtract line 2e from line 1	3	37,348,957.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	37,348,957.

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	43,684,398.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	1,438,391.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	1,438,391.
3	Subtract line 2e from line 1	3	42,246,007.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	42,246,007.

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 RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF THOSE TAX POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED. EVERYTOWN FOR GUN SAFETY SUPPORT FUND DID NOT HAVE ANY UNCERTAIN TAX POSITIONS IN 2024 AND THEREFORE THERE WAS NO LIABILITY FOR ANY UNCERTAIN TAX POSITIONS.

**SCHEDULE G
(Form 990)**

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

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

OMB No. 1545-0047

**Open to Public
Inspection**

Attach to Form 990 or Form 990-EZ.

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

Name of the organization **EVERYTOWN FOR GUN SAFETY SUPPORT FUND, INC.** Employer identification number **26-1598353**

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 nongovernment 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			
JACKIE BROT-WEINBERG - 11 CYPRESS DRIVE, WOODBURY, NY	IN-PERSON SOLICITATION		X	7,151,500.	104,880.	7,046,620.
CAPITAL STRATEGIES - 3111 VIA DOLCE #601, MARINA DEL REY, LISA PRESTA - 163 FOREST SIDE AVENUE, SAN FRANCISCO, CA	IN-PERSON SOLICITATION		X	4,896,819.	126,297.	4,770,522.
ANNE LEWIS STRATEGIES LLC - 650 MASSACHUSETTS AVENUE NW	FUNDRAISING STRATEGIC CONSULTING		X	2,655,500.	71,040.	2,584,460.
SEA CHANGE STRATEGIES LLC - 7409 BIRCH AVENUE, TAKOMA	FUNDRAISING STRATEGIC CONSULTING		X	0.	26,025.	-26,025.
				0.	24,300.	-24,300.
Total				14,703,819.	352,542.	14,351,277.

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

EVERYTOWN FOR GUN SAFETY SUPPORT FUND,

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: _____

EVERYTOWN FOR GUN SAFETY SUPPORT FUND,

Schedule G (Form 990) (Rev. 12-2024) INC.

26-1598353 Page 3

- 11 Does the organization conduct gaming activities with nonmembers?
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?
13 Indicate the percentage of gaming activity conducted in:
a The organization's facility
b An outside facility
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?

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 the 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?

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: JACKIE BROT-WEINBERG

(I) ADDRESS OF FUNDRAISER: 11 CYPRESS DRIVE, WOODBURY, NY 11797

(I) NAME OF FUNDRAISER: CAPITAL STRATEGIES

(I) ADDRESS OF FUNDRAISER: 3111 VIA DOLCE #601, MARINA DEL REY, CA 90292

(I) NAME OF FUNDRAISER: LISA PRESTA

(I) ADDRESS OF FUNDRAISER: 163 FOREST SIDE AVENUE, SAN FRANCISCO, CA 94127

(I) NAME OF FUNDRAISER: ANNE LEWIS STRATEGIES LLC

(I) ADDRESS OF FUNDRAISER: 650 MASSACHUSETTS AVENUE NW SUITE 505, WASHINGTON, DC 20001

(I) NAME OF FUNDRAISER: SEA CHANGE STRATEGIES LLC

(I) ADDRESS OF FUNDRAISER: 7409 BIRCH AVENUE, TAKOMA PARK, MD 20912

EVERYTOWN FOR GUN SAFETY SUPPORT FUND,
INC.

Part IV Supplemental Information (continued)

PART I, LINE 2B, COLUMN (V):

ANNE LEWIS STRATEGIES LLC INCLUDED SERVICES TO PLACE AND MANAGE DIGITAL ADVERTISING. THIS AGREEMENT INCLUDED SEPARATE PROVISIONS FOR AD BUY EXPENSES TO BE PAID TO DIGITAL ADVERTISING PLATFORMS AND THE VENDOR'S PROFESSIONAL FUNDRAISING FEES RELATED TO THE PLANNING AND PLACEMENT OF THE ADS. EVERYTOWN PAID A MEDIA ADVERTISING FEE OF \$1,725.

**SCHEDULE I
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization **EVERYTOWN FOR GUN SAFETY SUPPORT FUND,
INC.** Employer identification number
26-1598353

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
1 CHURCH 1 SOUL MINISTRY 214 BLUE BONNET STREET SAN ANTONIO, TX 78202	83-2844412	501C3	42,500.	0.			THE CITIES UNITED CONFERENCE SPONSORSHIP & TO SUPPORT COMMUNITY GUN VIOLENCE PREVENTION WORK
2 MOMS BONDED BY GRIEF INC. 4426 ERNIE DAVIS CIRCLE PHILADELPHIA, PA 19154	82-3816386	501C3	10,000.	0.			TO SUPPORT WEAR ORANGE INITIATIVE
ACE PROJECT INC. 2336 STANDARD AVE LOUISVILLE, KY 40210	83-3117851	501C3	10,000.	0.			TO PROVIDE FUNDING FOR SERVICES FOR GUN VIOLENCE SURVIVORS
AMERICAN UNIVERSITY 4400 MASSACHUSETTS AVE NW WASHINGTON, DC 20016	53-0196549	501C3	12,500.	0.			TO SUPPORT THE PROGRAM TO SOCIAL CURRANT
ASSOCIATION OF PROSECUTING ATTORNEYS INC - 11 DUPONT CIRCLE NW SUITE 500 - WASHINGTON, DC 20036	26-3117485	501C3	15,000.	0.			PROSECUTORS AGAINST GUN VIOLENCE ANNUAL SUMMER CONFERENCE SPONSORSHIP
SURVIVORS OF SUICIDE INC. PO BOX 6712 SAGINAW, MI 48608	38-3400293	501C3	15,000.	0.			TO PROVIDE FUNDING FOR SERVICES FOR GUN VIOLENCE SURVIVORS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **89.**

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

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

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

**EVERYTOWN FOR GUN SAFETY SUPPORT FUND,
INC.**

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

(a) Name and address of 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
BUILD PROGRAM 1409 WEST VERNON AVENUE LOS ANGELES, CA 90062	95-4488635	501C3	41,000.	0.			COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN
CENTER FOR AMERICAN PROGRESS 1333 H STREET NW 10TH FLOOR WASHINGTON, DC 20005	30-0126510	501C3	8,000.	0.			NATIONAL GUN VIOLENCE PREVENTION SUMMIT SPONSORSHIP
CHILDREN AND YOUTH JUSTICE CENTER 300 ELLIOTT AVENUE W SUITE 360 SEATTLE, WA 98119	20-4457248	501C3	150,000.	0.			TO PROVIDE FUNDING FOR THE KING COUNTY REGIONAL OFFICE OF VIOLENCE PREVENTION
CENTER FOR HOPE INC 5400 PREAKNESS WAY BALTIMORE, MD 21215	52-1681279	501C3	142,000.	0.			COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN
CHEZ HOPE INC PO BOX 98 FRANKLIN, LA 70538	72-0986472	501C3	10,000.	0.			TO PROVIDE FUNDING TO SUPPORT DOMESTIC VIOLENCE PREVENTION WORK
CHILDREN'S SERVICE SOCIETY OF WISCONSIN - PO BOX 1997 - MILWAUKEE, WI 53201	39-0806380	501C3	102,000.	0.			COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN
CIRCLE OF BROTHERHOOD INC 5120 NORTHWEST 24TH AVENUE MIAMI, FL 33142	47-2382636	501C3	41,000.	0.			COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN
COALITION TO STOP VIOLENCE AGAINST NATIVE WOMEN - 4600 MONTGOMERY BLVD NE SUITE 202B - ALBUQUERQUE, NM 87109	20-1735061	501C3	10,000.	0.			TO PROVIDE FUNDING TO SUPPORT DOMESTIC VIOLENCE PREVENTION WORK
CONNECTICUT VIOLENCE INTERVENTION & PREVENTION INC - 230 ASHMUN STREET - NEW HAVEN, CT 06511	83-2350328	501C3	102,000.	0.			COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN

Schedule I (Form 990)

**EVERYTOWN FOR GUN SAFETY SUPPORT FUND,
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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of 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
DENVER YOUTH PROGRAM 1625 E 35TH AVE DENVER, CO 80205	74-2486208	501C3	44,000.	0.			TO PROVIDE FUNDING FOR STAFF TO ATTEND ROCA CONFERENCE TO DISRUPT VIOLENCE & TO SUPPORT
DUKE UNIVERSITY 220 W MAIN STREET, SUITE 300 DURHAM, NC 27705	56-0532129	501C3	192,500.	0.			TO SUPPORT RESEARCH IN FIREARMS LAW AND POLICY
EDWARD CHARLES FOUNDATION 269 S BEVERLY DRIVE SUITE 338 BEVERLY HILLS, CA 90212	26-4245043	501C3	25,000.	0.			7TH ANNUAL HUNCHO DAY SPONSORSHIP TO HELP PREVENT GUN VIOLENCE
EMORY UNIVERSITY 1599 CLIFTON ROAD NE, THIRD FL 3101 ATLANTA, GA 30322	58-0566256	501C3	30,000.	0.			COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN
EQUALITY FEDERATION INSTITUTE 818 SW 3RD AVENUE, #141 PORTLAND, OR 97204	81-0670151	501C3	10,000.	0.			LEADERSHIP CONFERENCE SPONSORSHIP
EVERYTOWN FOR GUN SAFETY ACTION FUND INC - 909 THIRD AVENUE 18TH FLOOR - NEW YORK, NY 10022	20-8802884	501C4	1,000,000.	0.			EDUCATIONAL AND LOBBYING ACTIVITY - GRANT MADE TO ORGANIZATION IS TAX EXEMPT UNDER SECTION
FAITH IN ACTION ALABAMA 2100 4TH AVENUE NORTH BIRMINGHAM, AL 35203	20-1667945	501C3	48,500.	0.			COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN
FAMILY SURVIVOR NETWORK 1706 LAURENS STREET BALTIMORE, MD 21227	82-5324129	501C3	16,500.	0.			TO PROVIDE FUNDING FOR PUBLIC EDUCATION AND GUN SAFETY AWARENESS
FLOURISHING UNDER DISTRESS GIVEN ENCOURAGEMENT INC - 3448 MAUMEE AVENUE - DAYTON, OH 45414	85-0491579	501C3	10,000.	0.			TO PROVIDE FUNDING FOR SERVICES FOR GUN VIOLENCE SURVIVORS

Schedule I (Form 990)

**EVERYTOWN FOR GUN SAFETY SUPPORT FUND,
INC.**

Schedule I (Form 990)

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

(a) Name and address of 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
FOCUSED INTERRUPTION INC 2820 WALTON COMMONS LANE SUITE 136 MADISON, WI 53718-6797	87-3784685	501C3	41,000.	0.			COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN
FAITHFULLY ORGANIZING RESOURCES FOR COMMUNITY EMPOWERMENT DETROIT D/B/A FORCE DE - 1551 ROSA PARKS BLVD SUITE B - DETROIT, MI 48216	85-2023097	501C3	102,000.	0.			COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN
FRESH START KIDZ INC 992 DAVIDSON DRIVE NASHVILLE, TN 37205	81-1603240	501C3	26,000.	0.			COMMUNITY SAFETY FUND INNOVATION GRANT
FRIENDSHIP CENTER OF HELENA INC 1430 NORTH SANDERS STREET HELENA, MT 59601	23-7131678	501C3	10,000.	0.			TO PROVIDE FUNDING TO SUPPORT DOMESTIC VIOLENCE PREVENTION WORK
FUSION PARTNERSHIPS INC 1601 GUILFORD AVENUE 2 SOUTH BALTIMORE, MD 21202-2877	52-2148413	501C3	10,000.	0.			TO SUPPORT WEAR ORANGE INITIATIVE
GETTING OUT AND STAYING OUT INC 201A E 124TH STREET NEW YORK, NY 10035	06-1711370	501C3	102,000.	0.			COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN
GLOBAL ACTION ON GUN VIOLENCE INC 805 15TH STREET NW UNIT 601 WASHINGTON, DC 20005	88-4053494	501C3	93,750.	0.			TO SUPPORT LITIGATION EFFORTS TO PREVENT GUN VIOLENCE
HELP IN CRISIS INC 205 NORTH COLLEGE AVENUE TAHLEQUAH, OK 74464	73-1125382	501C3	10,000.	0.			TO PROVIDE FUNDING TO SUPPORT DOMESTIC VIOLENCE PREVENTION WORK
INSTITUTE FOR NONVIOLENCE CHICAGO 1856 N LECLAIRE AVENUE 3S CHICAGO, IL 60639	81-1098722	501C3	41,000.	0.			COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN

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**EVERYTOWN FOR GUN SAFETY SUPPORT FUND,
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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of 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
JUANITA STRONG FOREVER PROJECT 921 WEST 6TH AVENUE SUITE 100-A ANCHORAGE, AK 99501	85-1343423	501C3	7,500.	0.			TO PROVIDE FUNDING FOR SERVICES FOR GUN VIOLENCE SURVIVORS
KNOXVILLE FAMILY JUSTICE CENTER 400 HARRIET TUBMAN STREET KNOXVILLE, TN 37915	30-0342598	501C3	10,000.	0.			TO PROVIDE FUNDING TO SUPPORT DOMESTIC VIOLENCE PREVENTION WORK
LIFE GOES ON FOUNDATION INCORPORATED - 15394 HESPERIAN BLVD - SAN LORENZO, CA 94580	26-3751511	501C3	21,500.	0.			TO PROVIDE FUNDING FOR SERVICES FOR GUN VIOLENCE SURVIVORS & WEAR ORANGE INITIATIVE
LIVING CLASSROOMS FOUNDATION INC 1417 THAMES STREET BALTIMORE, MD 21231	52-1369524	501C3	26,000.	0.			COMMUNITY SAFETY FUND INNOVATION GRANT
LOUISVILLE-JEFFERSON COUNTY METRO GOVERNMENT - 611 WEST JEFFERSON STREET - LOUISVILLE, KY 40202	32-0049006	GOVT	50,000.	0.			GUN VIOLENCE DATA FELLOW GRANT
MASS GENERAL BRIGHAM INCORPORATED - THE GENERAL HOSPITAL CORPORATION - 55 FRUIT STREET - BOSTON, MA 02114	04-2697983	501C3	254,000.	0.			TO PROVIDE FUNDING FOR GUN VIOLENCE PREVENTION TRAINING PROGRAM
MEDICAL UNIVERSITY OF SOUTH CAROLINA FOUNDATION - 18 BEE STREET MSC 450 - CHARLESTON, SC 29425	57-6028985	501C3	42,500.	0.			COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN
M-PAC CLEVELAND PO BOX 19081 CLEVELAND, OH 44119	84-4720550	501C3	10,000.	0.			TO PROVIDE FUNDING FOR SERVICES FOR GUN VIOLENCE SURVIVORS
NAACP EMPOWERMENT PROGRAMS INC 4805 MOUNT HOPE DRIVE BALTIMORE, MD 21215	13-1084135	501C3	25,000.	0.			115TH NAACP ANNUAL CONVENTION SPONSORSHIP

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EVERYTOWN FOR GUN SAFETY SUPPORT FUND,
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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of 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
NATIONAL DOMESTIC VIOLENCE HOTLINE PO BOX 90249 AUSTIN, TX 78709	75-1658287	501C3	10,000.	0.			DOMESTIC VIOLENCE NATIONAL CONFERENCE SPONSORSHIP
NATIONAL INSTITUTE FOR CRIMINAL JUSTICE REFORM - 4900 SHATTUCK AVENUE SUITE 3817 - OAKLAND, CA 94609	81-5269212	501C3	100,000.	0.			TO SUPPORT OFFICE OF VIOLENCE PREVENTION TOOLKIT PROJECT
NATIONAL LGBTQ TASK FORCE 1050 CONNECTICUT AVE NW STE 65500 WASHINGTON, DC 20036	52-1624852	501C3	20,000.	0.			CREATING CHANGE CONFERENCE SPONSORSHIP
NATIONAL ORGANIZATION OF BLACK LAW ENFORCEMENT EXECUTIVES NOBLE - 4609 PINECREST OFFICE PARK DRIVE SUITE F - ALEXANDRIA, VA	52-1165531	501C3	15,000.	0.			TO PROVIDE FUNDING FOR GUN VIOLENCE PREVENTION WORK
NAWLEE FOUNDATION INC 486 MAIN STREET TOWNSEND, MA 01474	47-2613587	501C3	20,000.	0.			NAWLEE NATIONAL CONFERENCE SPONSORSHIP
NEVADA PARTNERS INC 690 WEST LAKE MEAD BOULEVARD NORTH LAS VEGAS, NV 89030	88-0291463	501C3	41,000.	0.			COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN
NEW VENTURE FUND 1828 L STREET NW SUITE 300-A WASHINGTON, DC 20036	20-5806345	501C3	7,500.	0.			LATINO LEADERSHIP CONVENING SPONSORSHIP
NO MORE RED DOTS INC 3936 BRISTOL OAKS DRIVE LOUISVILLE, KY 40299	83-1524454	501C3	102,000.	0.			COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN
NOT ANOTHER CHILD INC 301 EAST 108TH STREET SUITE 3 NEW YORK, NY 10029	26-0894097	501C3	43,500.	0.			COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN

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

(a) Name and address of 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
NATIONAL WOMENS COALITION AGAINST VIOLENCE AND EXPLOITATION - 1314 KAUFFMAN AVENUE SUITE 50 - VANCOUVER, WA 98660	45-5514142	501C3	10,000.	0.			TO PROVIDE FUNDING TO SUPPORT DOMESTIC VIOLENCE PREVENTION WORK
PERFECT GENERATION MINISTRIES INC 2603 CARROLLTON ROAD FINKSBURG, MD 21048	86-1987299	501C3	10,000.	0.			TO PROVIDE FUNDING FOR SERVICES FOR GUN VIOLENCE SURVIVORS
POSITIVE CHANGE FOUNDATION 1220 L. STREET, NW #100-181 WASHINGTON, DC 20005	47-1116945	501C3	10,000.	0.			WEEK OF NON-VIOLENCE SPONSORSHIP
POWER4STL 5501 DELMAR BLVD SUITE A430 ST LOUIS, MO 63112	83-2705388	501C3	104,000.	0.			COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN
RALEIGH BOOTS ON THE GROUND INC 6325 FALLS OF NEUSE RD UNIT 35-230 RALEIGH, NC 27609	92-2836736	501C3	15,000.	0.			TO PROVIDE FUNDING FOR SERVICES FOR GUN VIOLENCE SURVIVORS
REIMAGINING JUSTICE INC 114 ALBION STREET PASSAIC, NJ 07055	81-5292120	501C3	114,000.	0.			COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN
RISE UP ROCHESTER INC 244 SOUTH PLYMOUTH AVENUE ROCHESTER, NY 14608	16-1468926	501C3	102,000.	0.			COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN
SACRED GROUND MINISTRIES 346 EAST 89TH PLACE CHICAGO, IL 60619	37-1700537	501C3	10,000.	0.			TO PROVIDE FUNDING FOR SERVICES FOR GUN VIOLENCE SURVIVORS
SAMUEL DEWITT PROCTOR CONFERENCE INC - 4533 S LAKE PARK AVENUE - CHICAGO, IL 60653	06-1707903	501C3	10,000.	0.			UNITY LEVEL CONFERENCE SPONSORSHIP

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

(a) Name and address of 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
SIERRA HEALTH FOUNDATION CENTER FOR HEALTH PROGRAM MANAGEMENT - 1321 GARDEN HIGHWAY SUITE 210 - SACRAMENTO, CA 95833	45-5282243	501C3	51,000.	0.			MOVEMENT FOR LIFE SPONSORSHIP
SPOKANE REGIONAL DOMESTIC VIOLENCE COALITION - 104 SOUTH FREYA STREET SUITE 319A - SPOKANE, WA 99202	84-4167529	501C3	10,000.	0.			TO PROVIDE FUNDING TO SUPPORT DOMESTIC VIOLENCE PREVENTION WORK
STREET PAUSE INC 3132 GUILFORD AVENUE BALTIMORE, MD 21218	88-2050023	501C3	26,000.	0.			COMMUNITY SAFETY FUND INNOVATION GRANT
STRIDES FOR PEACE INC 200 W MADISON STREET FLOOR 3 CHICAGO, IL 60606	46-5174043	501C3	10,000.	0.			2ND ANNUAL GUN VIOLENCE PREVENTION EXPO SPONSORSHIP
TEACHERS COLLEGE COLUMBIA UNIVERSITY - 525 WEST 120TH STREET MAILBOX 30 - NEW YORK, NY 10027	13-1624202	501C3	12,000.	0.			NATIONAL FIREARM VIOLENCE PREVENTION SPONSORSHIP
TEACHERS UNIFY TO END GUN VIOLENCE INC - 11 ROUND HILL DRIVE - DANBURY, CT 06811	88-2513906	501C3	7,500.	0.			TO PROVIDE FUNDING FOR SERVICES FOR GUN VIOLENCE SURVIVORS
THE MAHOGANY PROJECT 9896 BISSONNET STREET SUITE 550 HOUSTON, TX 77036	82-1799016	501C3	10,000.	0.			TO PROVIDE FUNDING FOR SERVICES FOR GUN VIOLENCE SURVIVORS
UNIVERSITY OF CALIFORNIA SAN FRANCISCO - 1855 FOLSOM STREET SUITE 425 - SAN FRANCISCO, CA 94103	94-6036493	501C3	102,000.	0.			COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN
THE REGENTS OF THE UNIVERSITY OF COLORADO - 1800 GRANT STREET SUITE 600 - DENVER, CO 80203	84-6000555	501C3	47,500.	0.			TO SUPPORT THE BE SMART EVALUATION PROJECT

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

(a) Name and address of 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 TRARON CENTER 700 PENNSYLVANIA AVENUE SE SECOND F WASHINGTON, DC 20003	82-3648072	501C3	41,500.	0.			COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN
THE TRIGGER PROJECT 252 37TH STREET SE WASHINGTON, DC 20019	61-1976144	501C3	26,000.	0.			COMMUNITY SAFETY FUND INNOVATION GRANT
THE MUSKETEER ASSOCIATION 6125 BELLEAIR PLACE CINCINNATI, OH 45224	84-4187924	501C3	10,000.	0.			TO PROVIDE FUNDING FOR SERVICES FOR GUN VIOLENCE SURVIVORS
TIDES CENTER 1012 TORNEY AVENUE SAN FRANCISCO, CA 94129	94-3213100	501C3	85,000.	0.			COMMUNITY JUSTICE CBC RECEPTION SPONSORSHIP & CITIES UNITED CONVENING SPONSORSHIP
TRACE MEDIA INC PO BOX 4184 NEW YORK, NY 10163	47-4175513	501C3	1,206,382.	0.			RESEARCH AND PUBLIC EDUCATION INITIATIVES
TYME TO THRIVE BEYOND GRIEF 2835 SPRINGFIELD COURT ATLANTA, GA 30349	88-1866861	501C3	103,500.	0.			COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN
UBUNTU VILLAGE NOLA 2021 SOUTH DUPRE ST NEW ORLEANS, LA 70125	81-3458051	501C3	102,000.	0.			COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN
UNIVERSITY OF CHICAGO 5801 S ELLIS AVENUE CHICAGO, IL 60637	36-2177139	501C3	120,000.	0.			CVILA GRADUATION AND RECEPTION SPONSORSHIP
UNIVERSITY OF MARYLAND 7809 REGENTS DRIVE 3112 LEE BUILDING - COLLEGE PARK, MD 20742-5141	52-6002033	501C3	290,481.	0.			VIOLENCE REDUCTION CENTER SYMPOSIUM SPONSORSHIP

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EVERYTOWN FOR GUN SAFETY SUPPORT FUND,
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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of 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
UNMUTE YOURSELF INC 7860 WEST COMMERCIAL BOULEVARD #985 LAUDERHILL, FL 33351	92-3930865	501C3	10,000.	0.			TO PROVIDE FUNDING FOR SERVICES FOR GUN VIOLENCE SURVIVORS
URBAN AFFAIRS COALITION 1650 ARCH STREET SUITE 2701 PHILADELPHIA, PA 19103	23-7046393	501C3	102,000.	0.			COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN
VA LEAGUE FOR SAFER STREETS INC 2213 ALTHEA STREET RICHMOND, VA 23222	83-0939940	501C3	26,000.	0.			COMMUNITY SAFETY FUND INNOVATION GRANT
VANDERBILT UNIVERSITY MEDICAL CENTER - 1161 21ST AVENUE S D-3300 MEDICAL CENTER NORTH - NASHVILLE, TN 37232	35-2528741	501C3	47,500.	0.			TO SUPPORT THE BE SMART EVALUATION PROJECT
VIOLENCE IMPACT COMMUNITY INTEGRATION PROGRAM INC - 2620 EAST 21ST STREET NORTH - WICHITA, KS 67214	86-3047284	501C3	10,000.	0.			TO PROVIDE FUNDING FOR SERVICES FOR GUN VIOLENCE SURVIVORS
WESLEYAN UNIVERSITY 237 HIGH STREET MIDDLETOWN, CT 06459	06-0646959	501C3	130,000.	0.			TO SUPPORT CENTER FOR HISTORY OF GUN STUDIES
WHAT I WISH I KNEW FOUNDATION INC 3724 N 18TH STREET PHILADELPHIA, PA 19140	92-3457288	501C3	65,000.	0.			BLACK YOUTH ENGAGEMENT TOUR SPONSORSHIP & MOTION CONFERENCE SPONSORSHIP
YAAY ME INC 316 34TH STREET NE WASHINGTON, DC 20019	26-4793282	501C3	41,000.	0.			COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN
YOUTH ADVOCATE PROGRAMS, INC 3899 NORTH FRONT STREET HARRISBURG, PA 17110	23-1977514	501C3	102,000.	0.			COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN

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EVERYTOWN FOR GUN SAFETY SUPPORT FUND,

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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 MONITORS GRANT RECIPIENTS' USE OF GRANT FUNDS THROUGH CONTEMPORANEOUS COMMUNICATIONS WITH GRANTEEES AND THROUGH GRANTEE REPORTING REQUIREMENTS.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: BUILD PROGRAM

(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: CENTER FOR HOPE INC

(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT:

CHILDREN'S SERVICE SOCIETY OF WISCONSIN

Part IV Supplemental Information

(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION
GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR
COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: CIRCLE OF BROTHERHOOD INC
(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION
GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR
COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT:
CONNECTICUT VIOLENCE INTERVENTION & PREVENTION INC
(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION
GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR
COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: DENVER YOUTH PROGRAM
(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE FUNDING FOR STAFF TO
ATTEND ROCA CONFERENCE TO DISRUPT VIOLENCE & TO SUPPORT COMMUNITY GUN
VIOLENCE PREVENTION WORK

NAME OF ORGANIZATION OR GOVERNMENT: EMORY UNIVERSITY
(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION
GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR
COMMUNITIES & INJURY PREVENTION RESEARCH

NAME OF ORGANIZATION OR GOVERNMENT:
EVERYTOWN FOR GUN SAFETY ACTION FUND INC
(H) PURPOSE OF GRANT OR ASSISTANCE: EDUCATIONAL AND LOBBYING ACTIVITY -
GRANT MADE TO ORGANIZATION IS TAX EXEMPT UNDER SECTION 501(C)(4) OF THE
CODE WAS FOR PERMISSIBLE 501(C)(3) ACTIVITIES AND WAS NOT PERMITTED TO BE
USED FOR POLITICAL ACTIVITIES

NAME OF ORGANIZATION OR GOVERNMENT: FAITH IN ACTION ALABAMA
(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION
GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR
COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: FOCUSED INTERRUPTION INC
(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION
GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR
COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT:
FAITHFULLY ORGANIZING RESOURCES FOR COMMUNITY EMPOWERMENT DETROIT D/B/A FORC
(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION
GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR
COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: GETTING OUT AND STAYING OUT INC
(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION
GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR
COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: INSTITUTE FOR NONVIOLENCE CHICAGO
(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION
GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR

Part IV Supplemental Information

COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT:

MEDICAL UNIVERSITY OF SOUTH CAROLINA FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION
GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR
COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: NEVADA PARTNERS INC

(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION
GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR
COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: NO MORE RED DOTS INC

(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION
GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR
COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: NOT ANOTHER CHILD INC

(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION
GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR
COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: POWER4STL

(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION
GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR
COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: REIMAGINING JUSTICE INC

(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION
GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR
COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: RISE UP ROCHESTER INC

(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION
GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR
COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT:

UNIVERSITY OF CALIFORNIA SAN FRANCISCO

(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION
GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR
COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: THE TRARON CENTER

(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION
GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR
COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: TYME TO THRIVE BEYOND GRIEF

(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION
GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR
COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: UBUNTU VILLAGE NOLA

(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION

Part IV Supplemental Information

GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR
COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: URBAN AFFAIRS COALITION
(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION
GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR
COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: YAAY ME INC
(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION
GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR
COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: YOUTH ADVOCATE PROGRAMS, INC
(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION
GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR
COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: YOUTH ALIVE
(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION
GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR
COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: YOUTH DEVELOPMENT INC
(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION
GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR
COMMUNITIES

NAME OF ORGANIZATION OR GOVERNMENT: YOUTURN
(H) PURPOSE OF GRANT OR ASSISTANCE: COMMUNITY GUN VIOLENCE PREVENTION
GRANT TO ORGANIZATIONS WORKING TO REDUCE GUN VIOLENCE IN THEIR
COMMUNITIES

Multiple horizontal lines for additional supplemental information.

**SCHEDULE J
(Form 990)**

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

Compensation Information

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

OMB No. 1545-0047

Open to Public
Inspection

Name of the organization **EVERYTOWN FOR GUN SAFETY SUPPORT FUND, INC.** Employer identification number **26-1598353**

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 checked="" 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 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		

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

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

EVERYTOWN FOR GUN SAFETY SUPPORT FUND,

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) ERIC TIRSCHWELL	(i)	354,421.	0.	0.	13,800.	41,060.	409,281.	0.
EVERYTOWN LAW EXECUTIVE DIRECTOR & C	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) TAMARA FERRELL-ZABALA	(i)	355,117.	0.	0.	0.	41,060.	396,177.	0.
MOMS DEMAND ACTION EXECUTIVE DIRECTO	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) BECKY GEORGE	(i)	263,892.	0.	0.	4,868.	22,673.	291,433.	0.
CHIEF MOVEMENT BUILDING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) MICHAEL-SEAN SPENCE	(i)	220,988.	0.	0.	6,630.	41,060.	268,678.	0.
COMMUNITY SAFETY INITIATIVES MANAGIN	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) ALLA LEFKOWITZ	(i)	229,988.	0.	0.	7,379.	14,021.	251,388.	0.
AFFIRMATIVE LITIGATION MANAGING DIRE	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

EVERYTOWN FOR GUN SAFETY SUPPORT FUND,

Schedule J (Form 990) (Rev. 12-2024) INC.

26-1598353

Page 3

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1A:

FIRST CLASS TRAVEL WAS OCCASIONALLY USED BY THE PRESIDENT AND A LIMITED NUMBER OF THE EXECUTIVE MANAGEMENT TEAM, IN ACCORDANCE WITH THE ORGANIZATION'S DOCUMENTED TRAVEL & EXPENSE POLICY AND AS APPROVED BY THE CHIEF FINANCIAL OFFICER. THE COSTS OF SUCH TRAVEL FOR BUSINESS PURPOSES WERE PROPERLY EXCLUDED FROM TAXABLE COMPENSATION.

PART I, LINE 4A:

BECKY GEORGE RECEIVED SEVERANCE PAYMENTS TOTALING \$142,449.22.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2024

Open to Public Inspection

Complete if the organizations answered "Yes" on Form 990, Part IV, line 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 **EVERYTOWN FOR GUN SAFETY SUPPORT FUND, INC.** Employer identification number **26-1598353**

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	27	102,813.	FMV
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**

	Yes	No
30a During the year, did the organization receive by contribution any property reported on 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.		

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2024

**SCHEDULE O
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization	EVERYTOWN FOR GUN SAFETY SUPPORT FUND, INC.	Employer identification number	26-1598353
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FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
 VIOLENCE AND HELP TO REDUCE IT BY CONDUCTING GROUNDBREAKING ORIGINAL
 RESEARCH, DEVELOPING EVIDENCE-BASED POLICIES, COMMUNICATING THIS
 KNOWLEDGE TO THE AMERICAN PUBLIC, AND ADVANCING GUN SAFETY AND GUN
 VIOLENCE PREVENTION IN COMMUNITIES AND THE COURTS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
 ADVANCING GUN SAFETY AND GUN VIOLENCE PREVENTION IN COMMUNITIES AND THE
 COURTS.

FORM 990, PART III, LINE 4A, DESCRIPTION OF PROGRAM SERVICE ACCOMPLISHMENTS
 IN 2024, EVERYTOWN LAW, THE NATION'S LARGEST AND MOST EXPERIENCED TEAM
 OF LITIGATORS DEDICATED TO COMBATING GUN VIOLENCE IN THE COURTS, HELPED
 LEAD THE WAY IN ADVANCING GUN SAFETY. NOT ONLY DID EVERYTOWN LAW
 CELEBRATE THE UNITED STATE SUPREME COURT UPHOLDING THE LONGSTANDING
 FEDERAL LAW THAT PROHIBITS ABUSERS SUBJECT TO PROTECTIVE ORDERS FROM
 POSSESSING GUNS IN UNITED STATES V. RAHIMI, BUT SAW A STRING OF WINS
 ACROSS THE COUNTRY. IN A MAJOR WIN FOR GUN SAFETY, POLYMER80, THE
 NATION'S LARGEST PRODUCER OF GHOST GUN KITS AND COMPONENT PARTS,
 SHUTTERED IN 2024, FOLLOWING A YEARS-LONG EFFORT BY EVERYTOWN AND
 EVERYTOWN LAW TO HOLD THE GHOST GUN INDUSTRY ACCOUNTABLE FOR ITS
 ILLEGAL AND LIFE-ENDANGERING CONDUCT. EVERYTOWN LAW DIDN'T STOP THERE,
 FILING OR JOINING SEVEN NEW LAWSUITS THIS YEAR, ON BEHALF OF GUN
 VIOLENCE SURVIVORS AND STATES AND CITIES NATIONWIDE, SEEKING TO HOLD
 MEMBERS OF THE GUN INDUSTRY ACCOUNTABLE FOR UNLAWFUL AND RECKLESS
 CONDUCT CONTRIBUTING TO GUN VIOLENCE ACROSS THE COUNTRY.

ADDITIONALLY, IN 2024, THE EVERYTOWN COMMUNITY SAFETY FUND AWARDED OVER
 \$2 MILLION IN GRANTS TO 34 COMMUNITY-BASED VIOLENCE INTERVENTION
 ORGANIZATIONS TO HELP SUSTAIN CRITICAL GUN VIOLENCE PREVENTION WORK
 NATIONWIDE.

OUR BE SMART PROGRAM KICKED OFF THE INAUGURAL SMART WEEK, A DEDICATED
 WEEK WHERE PEOPLE CAME TOGETHER TO SPREAD THE WORD ON THE CRITICAL
 IMPORTANCE OF SECURE GUN STORAGE. AND THANKS TO THE HARD WORK OF MOMS
 DEMAND ACTION AND STUDENTS DEMAND ACTION VOLUNTEERS NATIONWIDE, AT THE
 START OF THE 2024 SCHOOL YEAR, MORE THAN 11 MILLION STUDENTS ACROSS THE
 COUNTRY LIVED IN A DISTRICT THAT REQUIRED SCHOOLS TO EDUCATE PARENTS
 ABOUT THE CRITICAL ROLE OF SECURE FIREARM STORAGE IN KEEPING STUDENTS
 SAFE.

IN JUNE, FOR THE 10TH YEAR, COUNTLESS PEOPLE NATIONWIDE JOINED TOGETHER
 FOR NATIONAL GUN VIOLENCE AWARENESS DAY AND THE WEAR ORANGE CAMPAIGN TO
 HONOR SURVIVORS OF GUN VIOLENCE AND DEMAND A FUTURE FREE FROM GUN
 VIOLENCE. THERE WERE MORE THAN 300 #WEARORANGE EVENTS SCHEDULED ACROSS
 THE COUNTRY.

OUR ONLINE HUB, "THE SMOKING GUN," DEDICATED TO HOLDING THE GUN
 INDUSTRY ACCOUNTABLE, RELEASED NEARLY 90 ARTICLES AND REPORTS EXPOSING
 THE GUN INDUSTRY'S ROLE IN AMERICA'S GUN VIOLENCE EPIDEMIC.

AND AS ADVOCATES, JOURNALISTS, AND POLICYMAKERS SOUGHT CLEAR ANALYSIS

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) (Rev. 12-2024)

LHA 432211 01-15-25

Name of the organization	EVERYTOWN FOR GUN SAFETY SUPPORT FUND, INC.	Employer identification number	26-1598353
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ABOUT AMERICA'S GUN VIOLENCE EPIDEMIC IN 2024, EVERYTOWN'S RESEARCH TEAM WAS A LEADING SOURCE TO PROVIDE CRITICAL DATA AND IMPORTANT CONTEXT.

FORM 990, PART VI, SECTION A, LINE 6:

NEITHER THE ORGANIZATION'S CERTIFICATE OF INCORPORATION NOR ITS BYLAWS PROVIDE FOR MEMBERS. PURSUANT TO SECTION 102(A)(4) OF THE DELAWARE GENERAL CORPORATION LAW ("DGCL"), HOWEVER, THE ORGANIZATION'S DIRECTORS ARE DEEMED TO BE ITS MEMBERS BECAUSE THE DIRECTORS ARE ENTITLED TO VOTE FOR THE ELECTION OF DIRECTORS PURSUANT TO THE ORGANIZATION'S BYLAWS.

FORM 990, PART VI, SECTION A, LINE 7A:

THE ORGANIZATION'S BYLAWS PROVIDE THAT THE DIRECTORS ARE ENTITLED TO VOTE FOR THE ELECTION OF DIRECTORS. AS NOTED ABOVE, NEITHER THE ORGANIZATION'S CERTIFICATE OF INCORPORATION NOR ITS BYLAWS PROVIDES FOR MEMBERS, AND, AS A NON-STOCK CORPORATION, THE ORGANIZATION HAS NO STOCKHOLDERS. DELAWARE LAW, HOWEVER, DEEMS THE ORGANIZATION'S DIRECTORS TO BE THE ORGANIZATION'S MEMBERS UNDER SECTION 102(A)(4) OF THE DGCL.

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

THE CORPORATION HAS NO COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BOARD.

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

(LINE 11A) FORM 990 IS PROVIDED TO THE ENTIRE BOARD OF THE ORGANIZATION FOR REVIEW BEFORE THE RETURN IS SIGNED BY THE PRESIDENT.

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

THE BOARD OF DIRECTORS REQUIRES FULL DISCLOSURE OF ALL ACTUAL AND POTENTIAL CONFLICTS OF INTEREST. EACH DIRECTOR SHALL DISCLOSE ANY AND ALL FACTS THAT MAY BE CONSTRUED AS A CONFLICT OF INTEREST, BOTH THROUGH AN ANNUAL DISCLOSURE PROCESS AND WHENEVER SUCH ACTUAL OR POTENTIAL CONFLICT OCCURS. THE BOARD OF DIRECTORS WILL DETERMINE WHETHER OR NOT A CONFLICT OF INTEREST EXISTS, AND WHETHER OR NOT SUCH CONFLICT MATERIALLY AND ADVERSELY AFFECTS THE INTERESTS OF THE ORGANIZATION. A DIRECTOR WHOSE POTENTIAL CONFLICT IS UNDER REVIEW MAY NOT DEBATE, VOTE, OR OTHERWISE PARTICIPATE IN SUCH DETERMINATION. IF THE BOARD OF DIRECTOR DETERMINES THAT AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST DOES EXIST, THE BOARD SHALL ALSO DETERMINE AN APPROPRIATE REMEDY.

FORM 990, PART VI, SECTION B, LINE 15:

THE BOARD OF DIRECTORS AND THE PRESIDENT HAVE INSTITUTED AN ANNUAL REVIEW AND APPROVAL PROCESS FOR COMPENSATION OF OFFICERS AND KEY EMPLOYEES. THIS PROCESS TAKES INTO ACCOUNT THE ORGANIZATION'S FINANCIAL POSITION AND EVALUATES AVERAGE SALARIES USING COMPARABLE INTERNAL AND EXTERNAL DATA TO ENSURE THAT COMPENSATION IS REASONABLE. OFFICERS WHOSE COMPENSATION IS UNDER REVIEW DO NOT PARTICIPATE IN THE REVIEW AND APPROVAL PROCESS. THE APPROVAL PROCESS INCLUDES CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATION AND DECISION.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, AR, CA, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, MS, NC, NH, NJ, NM, NY, OR, PA, RI, SC, TN, VA, WV, WI

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

Name of the organization	EVERYTOWN FOR GUN SAFETY SUPPORT FUND, INC.	Employer identification number	26-1598353
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THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS AND FORM 990S AVAILABLE TO THE PUBLIC ON ITS WEBSITE OR UPON REQUEST. ADDITIONALLY, THE ORGANIZATION'S FORM 1023 IS AVAILABLE UPON REQUEST. ALL REQUESTS FOR REVIEWING THE ORGANIZATION'S DOCUMENTS CAN BE ADDRESSED TO THE ORGANIZATION IN CARE OF GELLER & COMPANY LLC, AS NOTED IN PART VI, SECTION C, QUESTION 20.

FORM 990, PART IX, LINE 11G, OTHER FEES:

OTHER PROFESSIONAL FEES:	
PROGRAM SERVICE EXPENSES	5,539,458.
MANAGEMENT AND GENERAL EXPENSES	256,617.
FUNDRAISING EXPENSES	63,331.
TOTAL EXPENSES	5,859,406.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	5,859,406.

FORM 990, PART XII, LINE 2C:

THE BOARD OF DIRECTORS DIRECTLY EXERCISE OVERSIGHT ON THE AUDIT OF FINANCIAL STATEMENTS AND THE SELECTION OF AN INDEPENDENT ACCOUNTANT.

COST SHARING AGREEMENT:

THE ORGANIZATION IS PARTY TO A COST SHARING AGREEMENT WITH "EVERYTOWN FOR GUN SAFETY ACTION FUND". THE PURPOSE OF THE COST SHARING AGREEMENT IS TO MINIMIZE DUPLICATIVE EXPENSES AND TO CARRY OUT THE ORGANIZATIONS' MISSIONS IN AN ECONOMICAL AND EFFICIENT MANNER, WHICH INCLUDES THE SHARING OF EMPLOYEES WHOSE SKILLS AND KNOWLEDGE WILL ASSIST BOTH ORGANIZATIONS, CONSISTENT WITH EACH ORGANIZATION'S TAX EXEMPT PURPOSE.

Department of the Treasury
Internal Revenue Service

Go to www.irs.gov/Form4562 for instructions and the latest information.

Attach to your tax return.

Name(s) shown on return

Business or activity to which this form relates

Identifying number

**EVERYTOWN FOR GUN SAFETY SUPPORT FUND,
INC.**

FORM 990 PAGE 10

26-1598353

Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount (see instructions)	1	1,220,000.
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation	3	3,050,000.
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost
7 Listed property. Enter the amount from line 29	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2023 Form 4562	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13 Carryover of disallowed deduction to 2025. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	10,627.

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2024	17	19,492.
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B - Assets Placed in Service During 2024 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2024 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year	/		30 yrs.	MM	S/L	
d 40-year	/		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	30,119.
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

**EVERYTOWN FOR GUN SAFETY SUPPORT FUND,
INC.**

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No **24b** If "Yes," is the evidence written? Yes No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use							25	
26 Property used more than 50% in a qualified business use:								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use:								
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							28	
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1								29

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
30 Total business/investment miles driven during the year (don't include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons.

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2024 tax year:					
43 Amortization of costs that began before your 2024 tax year				STMT 1	43
					306,189.
44 Total. Add amounts in column (f). See the instructions for where to report					44
					306,189.

FORM 4562

PART VI - AMORTIZATION

STATEMENT 1

(A) DESCRIPTION OF COSTS	(B) DATE BEGAN	(C) AMORT. AMOUNT	(D) CODE SECT.	(E) LIFE/ RATE	(F) ACCUM. AMORT.	(G) AMORT. THIS YR.
WEBSITE	08/03/20	342,000.		42M	333,856.	8,144.
WEBSITE	09/18/20	57,000.		42M	52,929.	4,071.
WEBSITE	12/31/20	719,572.		42M	616,776.	102,796.
WEBSITE	03/23/21	77,041.		36M	70,620.	6,421.
WEBSITE	02/28/22	111,135.		36M	67,916.	37,045.
WEBSITE	02/28/23	126,000.		36M	35,000.	42,000.
WEBSITE	09/21/23	98,470.		36M	8,206.	32,823.
WEBSITE	01/20/22	218,668.		36M	139,704.	72,889.
TOTAL TO FORM 4562, LINE 43						306,189.