Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury ► Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service

Open to Public Inspection

Ā	For the 2	2020 calend	dar year, or tax year beginning 07/01/2020 and ending	06/30/20)21								
В	Check if a		C Name of organization The Concord Fund		D Employer ide	ntification number							
_	Address c		Doing business as		20-2	303252							
뭄	Name cha	- 1	Number and street (or P.O. box if mail is not delivered to street address) Room/st	uite	E Telephone nur								
믐	Initial retu	·	3220 N Street NW Ste 136		202-349-9049								
H		n/terminated	City or town, state or province, country, and ZIP or foreign postal code										
Η	Amended		Washington, DC 20007		G Gross receipt	\$ 48,134,887							
\vdash			F Name and address of principal officer: Gary Marx			nates? Yes V No							
ш	Applicatio	n pending				ded? Yes No							
_	Tax-exem	nt etatue:	022011 04 0011111/ 012 100/ 1110111119		a list. See instru								
÷	Website:	`	- co.(s)(s) - co.(s)(+) (mass-y - c)		xemption number ▶								
<u>, </u>			Corporation ☐ Trust ☐ Association ☐ Other ► L Year of formation:		M State of legal								
K		Water Company	Joseph Land Communication Comm	2004	VI Otate of legal	domicie. VA							
P	art I	Summa	•	of The Co	noord Eupdie	to promote the							
45			cribe the organization's mission or most significant activities: The mission										
Activities & Governance		vision of liberty and justice in America, fidelity to the principles of federalism and the rule of law, to educate and organize											
'n		citizens in	this mission, and to encourage reforms that achieve these ends.	aus than O	EQ/ of ito no								
Ve			box ► ☐ if the organization discontinued its operations or disposed of m	ore man z		2.2							
Ğ			voting members of the governing body (Part VI, line 1a)	* * *	3	1							
ο S			independent voting members of the governing body (Part VI, line 1b)		4	0							
iţie			per of individuals employed in calendar year 2020 (Part V, line 2a)		5	4							
휹			per of volunteers (estimate if necessary)	· * *	6	0							
Ā			ated business revenue from Part VIII, column (C), line 12		7a	0							
_	1 d	Vet unrelat	ed business taxable income from Form 990-T, Part I, line 11		7b	0							
ā				Prior Year		Current Year							
	1		ons and grants (Part VIII, line 1h)	20,42	25,895	48,134,887							
enn	1	•	ervice revenue (Part VIII, line 2g)		0								
Revenue			income (Part VIII, column (A), lines 3, 4, and 7d)										
щ	11 (Other reve	nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0	0							
	12	Total reven	ue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	20,42	48,134,887								
	13 (Grants and	I similar amounts paid (Part IX, column (A), lines 1–3)	8,16	67,066	27,753,200							
	14	Benefits pa	aid to or for members (Part IX, column (A), line 4) 📗		0								
S	15 8	Salaries, ot	her compensation, employee benefits (Part IX, column (A), lines 5-10)		0	786,560							
Expenses	16a F	Profession	al fundraising fees (Part IX, column (A), line 11e)		0	0							
be	b -	Total fundr	aising expenses (Part IX, column (D), line 25)			Variable of the same							
Ω	17 (Other expe	enses (Part IX, column (A), lines 11a-11d, 11f-24e)	8,62	21,210	22,601,619							
		_	nses. Add lines 13-17 (must equal Part IX, column (A), line 25)	16,78	38,276	51,141,379							
	19 F	Revenue le	ess expenses. Subtract line 18 from line 12	3,63	37,619	-3,006,492							
or se				ning of Curre	nt Year	End of Year							
Net Assets or Fund Balances	20	Total asset	s (Part X, line 16)	4,81	16,448	1,809,956							
Ass A Ba	21		ties (Part X, line 26)		0	0							
E Set	22		or fund balances. Subtract line 21 from line 20	4,81	16,448	1,809,956							
P	art II		re Block										
Ur	der penalt	ies of periury	I declare that I have examined this return, including accompanying schedules and statements	s, and to the	best of my know	vledge and belief, it is							
tru	e, correct,	and complet	e. Declaration of preparer (other than officer) is based on all information of which preparer has a	any knowled	ge.								
_		1											
Si	gn	Signat	ure of officer	Date									
	ere	Gary	Marx, Treasurer										
			r print name and title										
_			preparer's name Preparer's signature Date		Check ✓ if	PTIN							
Pa		Shawna	1.14		self-employed	P01779004							
	eparer	Eirm's par	Vercommer	Firm's	FIN ▶								
Us	se Only	Firm's nar	The state of the s	Phone		55-263-6800							
N.4-	w the ID		dress ► PO Box 1056, Plainfield, IN 46168 this return with the preparer shown above? See instructions	FIIOHE	110.	☐ Yes ☑ No							
IVIS	y me in	o discuss	this return with the preparer shown above? See instructions	250 25 35 3									

Part	Statement of Program Service	Accomplishments
4	Briefly describe the organization's missic	esponse or note to any line in this Part III
1		omote the vision of liberty and justice in America, fidelity to the principles of federalism
	and the rule of law to educate and organiz	te citizens in this mission, and to encourage reforms that achieve these ends.
	and the rule of law, to educate and organiz	22 Citizens III uns mission, and to encourage reforms that demove these cross.
2	prior Form 990 or 990-EZ?	ificant program services during the year which were not listed on the
_	If "Yes," describe these new services on	
3	Did the organization cease conducting services? If "Yes," describe these changes on School	g, or make significant changes in how it conducts, any program
4	Describe the organization's program ser expenses. Section 501(c)(3) and 501(c)(4) the total expenses, and revenue, if any, f	rvice accomplishments for each of its three largest program services, as measured b 4) organizations are required to report the amount of grants and allocations to others for each program service reported.
4a		,404,912 including grants of \$ 27,753,200) (Revenue \$ 0) 1. The Concord Fund produced radio and television advertisements regarding
	branch appointments, federalism, and civi of various judicial nominees as well as hig Organization conducted media and public	g United States Supreme Court vacancies and confirmations, court packing, executive ic accountability. The Organization also maintained websites promoting the confirmation phlighting the news of judicial confirmations at the federal and state level. The presentations covering judicial and executive branch nominations, Supreme Court
	vacancies, major Supreme Court cases be accountability. All these activities have he promote fidelity to the principles of federal	eing considered, previews of the upcoming term, and principles of federalism and civic elped to strengthen the rule of law, reinforce the view of a fair and impartial judiciary, lism and civic accountability.
	(O. I	including grants of \$) (Revenue \$)
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)

	/	

-	(0.1)	in the transport of the American to the American terms of the Amer
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
	·	
	·	

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	ADMINISTRATION OF THE PROPERTY	
	ARREMENTATION	
4d	Other program services (Describe on Sc	
	(Expenses \$ 0 including g	
40	Total program service expenses	50 404 912

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

Part	V Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		✓
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	23		
	employees? If "Yes," complete Schedule J	23	<u> </u>	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		√
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25 a		✓_
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		<u>√</u>
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		✓
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		√
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		✓
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c	1	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<u></u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓_
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	1	
Part	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		100	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		10	
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
Ŭ	reportable gaming (gambling) winnings to prize winners?	1c	1	
		For	m 99 0	(2020)

Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)		Van	Nia
	9 17		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	(and		13
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 4	Oh	1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	√	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	3a		1
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3b		V.
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O.	SD		_
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		1
b	If "Yes," enter the name of the foreign country ▶		11 15	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	1	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	1	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7.		
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7e	-	-
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f	_	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
g	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
h				PEUA!
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:		- 3	TEN
а	Initiation fees and capital contributions included on Part VIII, line 12	10	= %	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	100	5. 1	
11	Section 501(c)(12) organizations. Enter:	X		301
а	Gross income from members or shareholders			M.
b	Gross income from other sources (Do not net amounts due or paid to other sources			75
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		0.00
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		30	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120		-
а	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which			ISIV.
	the organization is licensed to issue qualified health plans			100
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		1
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			١.
	excess parachute payment(s) during the year?	15		√
	If "Yes," see instructions and file Form 4720, Schedule N.	6		1
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		1
	If "Yes," complete Form 4720, Schedule O.	2.		100

	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change.					
	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>			✓	
Secti	on A. Governing Body and Management			Yes	No	
	The state of the second of the toy year	1a 1		162	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.	ia i				
b	Enter the number of voting members included on line 1a, above, who are independent .	1b 0	y from	52	518	
2	Did any officer, director, trustee, or key employee have a family relationship or a business any other officer, director, trustee, or key employee?	relationship with	2	PI	1	
3	Did the organization delegate control over management duties customarily performed by or supervision of officers, directors, trustees, or key employees to a management company or or	under the direct	3		√	
4	Did the organization make any significant changes to its governing documents since the prior For	m 990 was filed?	4		1	
5	Did the organization become aware during the year of a significant diversion of the organization	on's assets?.	5		1	
6	Did the organization have members or stockholders?		6		1	
7a	Did the organization have members, stockholders, or other persons who had the power to one or more members of the governing body?		7a		1	
b	Are any governance decisions of the organization reserved to (or subject to approva stockholders, or persons other than the governing body?	l by) members,	7b		1	
8	Did the organization contemporaneously document the meetings held or written actions ur the year by the following:					
а	The governing body?		8a	1		
b	Each committee with authority to act on behalf of the governing body?		8b	1		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot	ot be reached at				
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule	0	9	- d- \	✓	
Secti	on B. Policies (This Section B requests information about policies not required by th	e internai Reve	iue C	Yes	No	
			10a	168	√	
10a	Did the organization have local chapters, branches, or affiliates?	f auch chapters	IVa		·	
b	If "Yes," did the organization have written policies and procedures governing the activities of affiliates, and branches to ensure their operations are consistent with the organization's exemple.	npt purposes?	10b	✓		
11a						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		10-			
12a	Bid the organization have a written commet or interest penel, in the, get a mine		12a	1		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give		120	· V		
С	Did the organization regularly and consistently monitor and enforce compliance with the describe in Schedule O how this was done	policy? II res,	12c	1		
40	Did the organization have a written whistleblower policy?		13	1		
13 14	Did the organization have a written document retention and destruction policy?		14	1		
15	Did the process for determining compensation of the following persons include a review independent persons, comparability data, and contemporaneous substantiation of the deliberation	and approval by				
_	The organization's CEO, Executive Director, or top management official		15a	1		
a b	Other officers or key employees of the organization		15b			
D	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or sim with a taxable entity during the year?	ilar arrangement	16a		1	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps	n to evaluate its				
	organization's exempt status with respect to such arrangements?		16b			
$\overline{}$	on C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed DC, VA	(a) 000 and 000	T /90	otion	501/6	
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable (3)s only) available for public inspection. Indicate how you made these available. Check all that of the own website Another's website Upon request Other (explain on S	at apply. chedule 0)				
19	Describe on Schedule O whether (and if so, how) the organization made its governing doc and financial statements available to the public during the tax year.				oolicy	
20	State the name, address, and telephone number of the person who possesses the organization Neil Corkery, (202)349-9049	on's books and r	ecords			

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

Part VII	Compensation of Officers, Directors,	Trustees	Key Employees	, Highest Compensate	d Employees, and
	Independent Contractors				

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 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 and/or Box 7 of Form 1099-MISC) 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 instructions for the order in which to list the persons above.

Check this box if neither the organization no	any relate	d org	aniz	atio	on c	ompe	nsa	ated any current	officer, director,	or trustee.
					C)					
(A)	(B)	l			sition			(D)	(E)	(F)
Name and title	Average					e than o		Reportable	Reportable	Estimated amount
	hours per week	office	officer and a		a director/truste		tee)	compensation from the	compensation from related	of other compensation
	(list any hours for related organizations	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest co employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
	below dotted line)	trustee	al trustee		уее	Highest compensated employee				
Ann Corkery	30.00									
Counsel	0.00					1		256,063	0	0
Frank J Scaturro	30.00									
Counsel	0.00			_		✓		242,500	0	0
Carrie L Severino	30.00								_	
President	0.00	-		1	-	✓	H	139,667	0	0
Gary Marx	10.00			Ι,						
Secretary, Treasurer, Director	0.00	1	\vdash	√	-			0	0	0
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Name and title Average per vexicity (so not check more by the parton is both or me in the programment of t						-					(-)	l ,	-
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organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4								on a	and other compe	nsation from the	e	
individual	4	organization and related organizations	areater th	an \$	150	.000)?	lf "Υε	es."	complete Sche	dule J for suci	h	
for services rendered to the organization? If "Yes," complete Schedule J for such person			,			٠.							✓
for services rendered to the organization? If "Yes," complete Schedule J for such person	5	Did any person listed on line 1a receive of	or accrue c	ompe	ensa	tior	n fro	m an	y ur	nrelated organiza	tion or individua		
Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year (A) Name and business address CRC Advisors, 2850 Eisenhower Ave, Alexandria, VA 22314 Mentzer Media, 2210 Grey Fox Court, Bel Air, MD 21015 Creative Direct, 1402 Belleville Street, Richmond, VA 23230 MWPolitical, 114 Karland Dr NW, Atlanta, GA 30305 BH Group, 1655 N Fort Meyer Dr, Ste 700, Arlington, VA 22209 Consulting Advocacy Advocacy T25,51 BH Group, 1655 N Fort Meyer Dr, Ste 700, Arlington, VA 22209	_	for services rendered to the organization	? If "Yes," (comp	lete	Sc	hea	lule J	for	such person .	2 2 2 2 3		✓
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BH Group, 1655 N Fort Meyer Dr, Ste 700, Arlington, VA 22209 consulting 500,00	Creati	ive Direct, 1402 Belleville Street, Richmond,	VA 23230						_				1,827,221
Bit Gloup, 1033 let Of the yet Di, Ste 700, Annington, TA 22200		AND DESCRIPTION OF THE PROPERTY OF THE PROPERT											725,519
and the second s	BH G												500,000
2 Total number of independent contractors (including but not limited to those listed above) who	2								o t		ve) who		

12

Total revenue. See instructions

Form 9	90 (2020))					r age o
Part	VIII	Statement of Revenue					
		Check if Schedule O contains a response or note to	any	line in this Pa	rt VIII		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
σ σ	1a	Federated campaigns 1a	0				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b	0				
흥리	C	Fundraising events 1c	0				
A h	d	Related organizations 1d	0				
를 ಪ	e	Government grants (contributions) 1e	0				
ž E	f	All other contributions, gifts, grants,					
is is	٠.	and similar amounts not included above 1f 48,134,8	887				
투 B	g	Noncash contributions included in					The State of the S
들임	9	lines 1a–1f 1g \$	0				
a C	h	Total. Add lines 1a–1f	▶	48,134,887			
-		Business Cod	le				2 10 10 10 7
e	2a						
ا کے ا	b						
Program Service Revenue	c						
	d		\neg				
gra Re	e						
Pro	f	All other program service revenue	_				
	g g		▶	0			F-60 E-1
_	3	Investment income (including dividends, interest, a	nd				
	0	other similar amounts)					
	4	Income from investment of tax-exempt bond proceeds	▶Ì				
	5	Royalties					
	J	(i) Real (ii) Personal					
	6a	Gross rents 6a					
	b	Less: rental expenses 6b	-1				
		Rental income or (loss) 6c 0	0			13.	
	c d	7/4/ ×	D				
	_	(i) Committee (ii) Other		1 12			
	7a	Gross amount from sales of assets (i) Securities (ii) Other					
		other than inventory 7a	_				
Revenue	b	Less: cost or other basis and sales expenses . 7b	9				4.950
Ş.	С	Gain or (loss) 7c 0	0				
		Not goin or (loca)	Ď				
Other		Gross income from fundraising					
₹	oa	events (not including \$					
_		of contributions reported on line					
		1c). See Part IV, line 18 8a					
	b	Less: direct expenses 8b	-1				
	C	Net income or (loss) from fundraising events			THE RESERVE		
	_	Gross income from gaming	- 10				
	9a	activities. See Part IV, line 19 . 9a					
	b	Less: direct expenses 9b	[]				
	С	Net income or (loss) from gaming activities	>				
	10a	Gross sales of inventory, less			Felica III	al Travi	FE HANDS
		returns and allowances 10a	_				Property and
	b	Less: cost of goods sold 10b					
	С	Net income or (loss) from sales of inventory	>				
Si		Business Cod	de				
eo e	11a						
an	b						
Miscellaneous Revenue	С						
lisc R	d	All other revenue			CHEST TO THE TAXABLE PROPERTY.		
2	е	Total. Add lines 11a-11d	>	0			

0

0

0

48,134,887

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 (A) Total expenses (B) Program service (C) Management and general expenses (D) Fundraising expenses Do not include amounts reported on lines 6b. 7b. 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 27,753,200 27,753,200 Grants and other assistance to domestic 2 individuals. See Part IV, line 22 0 Grants and other assistance to foreign 3 organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 0 n 0 0 Benefits paid to or for members Compensation of current officers, directors, 5 trustees, and key employees 0 0 0 0 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 0 0 n 0 0 662,794 73,644 Other salaries and wages 736,438 7 Pension plan accruals and contributions (include 8 0 0 section 401(k) and 403(b) employer contributions) 0 0 0 0 9 Other employee benefits 0 0 5,012 0 10 Payroll taxes 50,122 45,110 Fees for services (nonemployees): 11 0 0 0 1,984 0 198,376 196,392 0 0 0 0 Accounting Lobbying 0 0 0 0 d 0 0 Professional fundraising services. See Part IV, line 17 0 0 0 0 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column 21,550,017 383,608 0 (A) amount, list line 11g expenses on Schedule O.) . 21,933,625 0 0 Advertising and promotion 12 0 0 Office expenses 84,930 16,986 67,944 13 0 84,433 82,744 1,689 Information technology 14 0 0 0 15 0 0 27,998 158,655 186,653 16 0 0 60,507 60,507 17 18 Payments of travel or entertainment expenses 0 0 for any federal, state, or local public officials 0 0 0 0 0 Conferences, conventions, and meetings . 0 19 0 0 0 20 0 0 0 0 0 21 Payments to affiliates 9,164 27,491 0 22 Depreciation, depletion, and amortization . 36,655 0 23 16,440 0 16,440 Other expenses. Itemize expenses not covered 24 above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) а b С d All other expenses 0 0 е 0 50,404,912 736,467 25 Total functional expenses. Add lines 1 through 24e 51,141,379 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

	art X	Check if Schedule O contains a response or note to any line in this Pa	art X		
_		Chookin contacts a contact a contact a	(A) Beginning of year		(B) End of year
_	1	Cash—non-interest-bearing	4,453,245	1	1,483,408
	2	Savings and temporary cash investments	0	2	0
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	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	0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), and persons described in section $4958(c)(3)(B)$.	0	6	0
ts	7	Notes and loans receivable, net	0	7	0
Assets	8	Inventories for sale or use	0	8	0
Ä	9	Prepaid expenses and deferred charges	0	9	0
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 284,371			
	ь	Less: accumulated depreciation 10b 36,655	284,371	10c	247,716
	11	Investments—publicly traded securities	0	11	
	12	Investments—other securities. See Part IV, line 11	0	12	
	13	Investments—program-related. See Part IV, line 11	0	13	
	14	Intangible assets	0	14	
	15	Other assets. See Part IV, line 11	78,832	15	78,832
	16	Total assets. Add lines 1 through 15 (must equal line 33)	4,816,448		1,809,956
_	17	Accounts payable and accrued expenses	0	17	0
	18	Grants payable	0	18	0
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
S	22	Loans and other payables to any current or former officer, director,			
ij		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons	0		0
Ë	23	Secured mortgages and notes payable to unrelated third parties	0		0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X		05	
	l	of Schedule D	0		
_	26	Total liabilities. Add lines 17 through 25	0	26	0
Net Assets or Fund Balances		Organizations that follow FASB ASC 958, check here ► ✓			
au	07	and complete lines 27, 28, 32, and 33. Net assets without donor restrictions	4,816,448	27	1,809,956
Bal	27 28	Net assets without donor restrictions	0		0
Þ	28			20	
필		Organizations that do not follow FASB ASC 958, check here ►			
or	20	and complete lines 29 through 33. Capital stock or trust principal, or current funds		29	
ts	29 30	Paid-in or capital surplus, or land, building, or equipment fund		30	
SSe	31	Retained earnings, endowment, accumulated income, or other funds		31	
ţ	32	Total net assets or fund balances	4,816,448		1,809,956
Ne	33	Total liabilities and net assets/fund balances	4,816,448		1,809,956
_	00	Total nabilities and not assets/fund balances	1,010,010		000

Page **12**

Part	XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI							
1	Total Toverlae (mast equal trait viii, oblaimin viii, into 12)	1		48,134	4,887			
2	Total expenses (must equal that its, oblighting ty, into 20)	2	51,141,379					
3	Revenue less expenses. Subtract line 2 from line 1							
4								
5	Net diffeatized gains (1033c3) on investmente	5			0			
6	Donated Scivices and asc of Idonates 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	6			0			
7	investment expenses	7			0			
8	Thorpenod adjustments	8			0			
9	Other changes in fiet assets of faile balances (explain of considere of	9			0			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line							
	oz, column (b))	10		1,809	9,956			
Part	XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII	8 9			لل			
				Yes	No			
1								
	If the organization changed its method of accounting from a prior year or checked "Other," explain in							
	Schedule O.							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .		2a		✓			
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	oiled or						
	reviewed on a separate basis, consolidated basis, or both:							
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		01		,			
b	Were the organization's financial statements audited by an independent accountant?	•	2b		1			
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ed on a						
	separate basis, consolidated basis, or both:		1 52					
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	sight of	2c					
	the audit, review, or compilation of its financial statements and selection of an independent accountant				1			
	If the organization changed either its oversight process or selection process during the tax year, exp	olain on	J. Lawre		+ 1			
	Schedule O.	1 1 41			- 5-1			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set fort	n in the	3a		,			
	Single Audit Act and OMB Circular A-133?				V			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits?	ergo the	3b					
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such au	iuiis .		000				
			For	n 990	(2020)			

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

Complete if the organization is described below.
 ▶ Attach to Form 990 or Form 990-EZ.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2020
Open to Public

Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

ו מא) וי	see separate mondonomy, a				
	ection 501(c)(4), (5), or (6) orga	nizations: Complete Part III.		Te	etet o at a a month ou
	of organization			1	tification number
	oncord Fund		11. 504/-		20-2303252
Part		e organization is exempt unde			
1		the organization's direct and inc	lirect political car	mpaign activities in Part	IV. (See instructions for
_	definition of "political can			\$	5.609,000
2		y expenditures (See instructions) .			5,609,000
3		cal campaign activities (See instruc			
Part		e organization is exempt under excise tax incurred by the organiza			
1	Enter the amount of any	excise tax incurred by the organization	managere under	section 4955 • \$	***************************************
2	If the expenientian incurre	ed a section 4955 tax, did it file For	managers under m 4720 for this ve	ar?	. Yes No
3					Yes No
4a b	If "Yes," describe in Part				
Part	Complete if the	e organization is exempt unde	er section 501(c), except section 501	(c)(3).
1		ly expended by the filing organization			
	activities			▶ \$	0
2		filing organization's funds contrib	uted to other ora	anizations for section	
-		vities			5,609,000
3	Total exempt function e	expenditures. Add lines 1 and 2.	Enter here and	on Form 1120-POL,	
	line 17b			▶ \$	5,609,000
4		n file Form 1120-POL for this year?			Yes ✓ No
5	Enter the names, address	ses and employer identification nun	nber (EIN) of all se	ection 527 political organia	zations to which the filing
	organization made payme	ents.For each organization listed, e	enter the amount p	paid from the filing organi	zation's funds. Also enter
	the amount of political co	ontributions received that were pror	nptly and directly	delivered to a separate p	olitical organization, such
	as a separate segregated	fund or a political action committee	e (PAC). If addition	nai space is needed, provid	de information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds. If none, enter -0	contributions received and promptly and directly
				(4.100)	delivered to a separate
					political organization. If none, enter -0
	anublican Attornava				
(1) G	epublican Attorneys eneral Assoc	1747 Pennsylvania Ave NW, Ste 800			
	epublican State Leadership	Washington, DC 20006	46-4501717	4,834,000	0
(2)	epublicali State LeaderShip	1201 F St NW, Ste 675		075 000	0
D	epublican Governors	Washington, DC 20004	05-0532524	275,000	U
(3) A	SSOC	1747 Pennsylvania Ave NW, Ste 250		500,000	0
		Washington, DC 20006	11-3655877	500,000	
(4)					
(5)					
(6)					
(U)				1	

Cat. No. 50084S

Par	se	mplete if the organization 501(h)).					
A C		if the filing organization belor				liated group membe	er's name,
		address, EIN, expenses, and					
B C	heck ► 🗌	if the filing organization chec	ked box A and	'limited control" pr	rovisions apply.		
			bying Expendit			(a) Filing	(b) Affiliated
	(The term "expenditures" m	neans amounts	paid or incurred.)	organization's totals	group totals
1a		ring expenditures to influence					
b	Total lobby	ring expenditures to influence	e a legislative bo	ody (direct lobbying	g)		
С	Total lobby	ring expenditures (add lines	la and 1b) .				
d	Other exen	npt purpose expenditures .					
е	Total exem	pt purpose expenditures (ad	d lines 1c and 1	d)			
f	Lobbying	nontaxable amount. Enter	the amount f	rom the following	g table in both		
	columns.						
	If the amour	nt on line 1e, column (a) or (b) is	: The lobbying	nontaxable amoun	t is:		
	Not over \$50	00,000	20% of the ar	nount on line 1e.			
	Over \$500,0	00 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	s 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.			ver \$1,500,000.			
	Over \$17,00	0,000	\$1,000,000.				
g	Grassroots	nontaxable amount (enter 2	5% of line 1f)	* * * * * *			
h	Subtract lir	ne 1g from line 1a. If zero or l	ess, enter -0-				
i		ne 1f from line 1c. If zero or le		* * * * * *			
i	If there is	an amount other than zero	on either line	1h or line 1i, dic	the organization	file Form 4720	
		section 4911 tax for this year					_ Yes N
	(Some or	ganizations that made a se See the	ection 501(h) el e separate inst	ructions for lines	e to complete all 2a through 2f.)	of the five column	s below.
		Lobbyin	g Expenditures	During 4-Year A	veraging Period		
		year (or fiscal year eginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2 a	Lobbying r	nontaxable amount					
b		ceiling amount ne 2a, column (e))					
С	Total lobby	ying expenditures					
d	Grassroots	s nontaxable amount					
е		s ceiling amount ne 2d, column (e))					
f	Grassroots	s lobbying expenditures					

Schedu	le C (Form 990 or 990-EZ) 2020				Page 3
Part					
	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed	(a	1)	(b	
descr	iption of the lobbying activity.	Yes	No	Amo	unt
1 a	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b C	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g h	Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
i	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912	(1.0)	7		
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .				
d		\(F\)			1 100
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	:)(5), (or sec	ction	
	501(c)(6).			Y	es No
1	Were substantially all (90% or more) dues received nondeductible by members?	8 8	8	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	9 9	8	2	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the	prior	year?	3	
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" O answered "Yes."	e)(5), c R (b)	or sec Part	ction III-A, lin	e 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).	s of			
а	Current year	•	2a		
b	Carryover from last year		2b 2c		
C	Total		3		
3 4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of	the			
•	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb	ying			
	and political expenditure next year?		4		
_ 5	Taxable amount of lobbying and political expenditures (See instructions)	9 (48)	5		
Par	Supplemental Information	P.	I) D-	+ II A 1:	1
Provid	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro a instructions); and Part II-B, line 1. Also, complete this part for any additional information.	oup IIS	t); Par	τ II-A, IIII	es i and
	dule C, Part I-A, Line 1 - The Organization contributed funds to entities that are organized and operate un-	der Se	ction 5	27	
Sched					

			sansann		
******	***************************************	-seniente			

SCHEDULE D (Form 990)

Department of the Treasury

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.

Open to Public

OMB No. 1545-0047

► Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service Employer identification number Name of the organization 20-2303252 The Concord Fund Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

1 61	Complete if the organization answered "		i.
	Complete ii iilo organization aneworsa	(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 a	advisors in writing that the assets I	held in donor advised
6	funds are the organization's property, subject to the Did the organization inform all grantees, donors, and	organization's exclusive legal contr	rol? 🗌 Yes 📙 No
	only for charitable purposes and not for the benefit conferring impermissible private benefit?	t of the donor or donor advisor, or	for any other purpose
Par	t 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 o		
	Preservation of land for public use (for example, recreation		ı 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 hel	d a qualified conservation contribut	ion in the form of a conservation
	easement on the last day of the tax year.	•	Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements	S	2b
С	Number of conservation easements on a certified hi		
d	Number of conservation easements included in (
3	Number of conservation easements modified, trans	ferred, released, extinguished, or te	erminated by the organization during the
4	tax year ► Number of states where property subject to consen	vation easement is located	
4 5	Does the organization have a written policy reg	arding the periodic monitoring, in	spection, handling of
	violations, and enforcement of the conservation eas		
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforc	ing conservation easements during the year
-	Amount of expenses incurred in monitoring, inspecting	a bandling of violations, and enforcin	og conservation easements during the year
7	▶ \$		
8	Does each conservation easement reported on line 2 and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports of balance sheet, and include, if applicable, the text of	f the footnote to the organization's fi	le and expense statement and inancial statements that describes the
	organization's accounting for conservation easement		Other Circles Access
Par	Organizations Maintaining Collections Complete if the organization answered "	s of Art, Historical Treasures, o Yes" on Form 990. Part IV. line 8	3.
	If the organization elected, as permitted under FAS		
Ia	of art, historical treasures, or other similar assets service, provide in Part XIII the text of the footnote t	held for public exhibition, education	on, or research in furtherance of public
b	If the organization elected, as permitted under FAS art, historical treasures, or other similar assets held provide the following amounts relating to these item.	for public exhibition, education, or nations:	research in furtherance of public service
	(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, following amounts required to be reported under FA	historical treasures, or other similar	ar assets for financial gain, provide the
a b	Revenue included on Form 990, Part VIII, line 1 . Assets included in Form 990, Part X		▶ \$

Part							
3	Using the organization's acquisition, collection items (check all that apply):						significant use of its
а	☐ Public exhibition				exchange p	_	
b	☐ Scholarly research		e	Other			
С	□ Preservation for future generations						
4	Provide a description of the organiza XIII.						
5	During the year, did the organization assets to be sold to raise funds rather	than to be maintai	donations ned as pa	of art, his art of the o	storical trea organization	sures, or other simi	ar Yes No
Part	IV Escrow and Custodial Arra	angements.					. –
	Complete if the organization 990, Part X, line 21.						
1a	Is the organization an agent, trustee included on Form 990, Part X?					ns or other assets r	ot Yes No
b	If "Yes," explain the arrangement in P	art XIII and comple	te the foll	owing tabl	le:		Amount
							Amount
С	Beginning balance					1c	
d	Additions during the year					1d	
е	Distributions during the year					1e	
f	Ending balance		5 2 2 2	8 8 B	8 8 8	1f	□ Ves □ No
2a	Did the organization include an amou	nt on Form 990, Pa	irt X, line 2	21, for esc	row or cust	odiai account liabilit	y? res No
	If "Yes," explain the arrangement in P Endowment Funds.	art Alli. Gheck here	ii iiie ext	Diamation	ias been pr	Ovided off Late Affi .	
Par	Complete if the organization	answered "Ves"	on Form	990 Pa	rt IV: line 1	0	
	Complete if the organization	(a) Current year	(b) Prior		c) Two years b		ck (e) Four years back
4	Designing of year balance	(a) Current year	(b) Thor	your (oj two jouro z	ack (a) mice years see	(-)
1a	Beginning of year balance			-			
b	Contributions						
c	Net investment earnings, gains, and losses						
d	Grants or scholarships						
е	Other expenditures for facilities and programs						
f	Administrative expenses						
g	End of year balance						
2	Provide the estimated percentage of	the current year en	d balance	(line 1g, c	column (a)) i	neld as:	
а	Board designated or quasi-endowme	nt 🕨	<u>.</u> %				
b	Permanent endowment >						
С	Term endowment ►%						
	The percentages on lines 2a, 2b, and						
3a	Are there endowment funds not in th	e possession of th	e organiza	ation that	are held an	d administered for t	he
	organization by:						Yes No
	(-)						3a(i)
	(11)						3a(ii)
b	If "Yes" on line 3a(ii), are the related of						3b
4	Describe in Part XIII the intended use		n's endov	vment fun	ds.		
Part	VI Land, Buildings, and Equip	oment.	. –	000 D-		Ida Caa Fawa 000	Port V line 10
	Complete if the organization						
	Description of property	(a) Cost or oti (investme		(b) Cost or o (other		(c) Accumulated depreciation	(d) Book value
1a	Land	3	0		0		0
b	Buildings		0		0	0	0
c	Leasehold improvements		0		216,303	27,978	188,325
d	Equipment		0		68,068	8,677	59,391
e	Other		0		0	0	0
	Add lines 1a through 1e. (Column (d)	must equal Form 99		column (B), line 10c.) .	247,716

Part VII	Investments – Other Securities. Complete if the organization answered "Yes" on Form 990, Part I	√. line 11b. See l	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) Financia			
	neld equity interests		
(A)			
(B)			
(C)			
(D)			<u> </u>
(E)			
(F)			
(G)			
(H)	mn (b) must equal Form 990, Part X, col. (B) line 12.) . ▶		VALUE VALUE OF THE RESERVE
Part VIII	Investments – Program Related.		
Part VIII	Complete if the organization answered "Yes" on Form 990, Part I	V line 11c. See I	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)	- 100		
	mn (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX	Other Assets.	Valina 11d Coo	Form 000 Part V line 15
	Complete if the organization answered "Yes" on Form 990, Part I	v, mie i id. See	(b) Book value
(3)	(a) Description		(b) Book value
(1)			
(2)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Colu	mn (b) must equal Form 990, Part X, col. (B) line 15.)		s >
Part X	Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part I line 25.	V, line 11e or 11	f. See Form 990, Part X,
1.	(a) Description of liability		(b) Book value
(1) Federal i			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	WWW		
	mn (b) must equal Form 990, Part X, col. (B) line 25.)		totomente that reports the
Liability fo organization	r uncertain tax positions. In Part XIII, provide the text of the footnote to the organ s liability for uncertain tax positions under FASB ASC 740. Check here if the text	of the footnote has	been provided in Part XIII .

Part	Reconciliation of Revenue per Audited Financial State		Return.
	Complete if the organization answered "Yes" on Form 99		
1	Total revenue, gains, and other support per audited financial statemen	ts	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		To Table
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities	. 2b	
С	Recoveries of prior year grants	. 2c	
d	Other (Describe in Part XIII.)	. 2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b .		
b	Other (Describe in Part XIII.)	. 4b	
С	Add lines 4a and 4b		4c
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, li	ne 12.)	5
Part	XII Reconciliation of Expenses per Audited Financial Stat	ements With Expenses po	er Return.
	Complete if the organization answered "Yes" on Form 99		T . I
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	ř = 1	10000
а	A N	. 2a	
b	Prior year adjustments	. 2b	
С	Other losses	. 2c	
d	Other (Describe in Part XIII.)	. 2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)	. 4b	40
c	Add lines 4a and 4b		4c 5
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I,	III e 16.)	3
Part	XIII Supplemental Information.	and 4. Doubly lines the and O	h. Dort V. line 4: Dort V. line
Provid	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this p	and 4, Part IV, lines ID and 21	nformation
z; Par			
		H	***************************************

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*****		***************************************	
******	***************************************		

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

▶ Attach to Form 990.

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

Employer identification number

OMB No. 1545-0047

The Con	The Concord Fund							20-2303252
Part	General Information on Grants and Assista	on Grants and	Assistance					
	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?	n records to sub award the grants	stantiate the amou	int of the grants or	assistance, the g	rantees' eligibility fo	r the grants or assistance	, and Yes No
2	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	zation's procedu	res for monitoring	the use of grant fu	nds in the United	States.		
Part II	Grants and Other Assistance to Domestic (Part IV, line 21, for any recipient that received	sistance to Do		ations and Dom	l estic Governm Il can be duplica	Organizations and Domestic Governments. Complete if the organizatio more than \$5,000. Part II can be duplicated if additional space is needed.	the organization answe oace is needed.	Drganizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, more than \$5,000. Part II can be duplicated if additional space is needed.
1 (a) Na	1 (a) Name and address of organization or government	(p) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Scł	Sch I, Stmt 1							
(2)								
(3)								
(4)								
(2)								
(9)								
(2)								
(8)								
(6)								
(10)								
(11)								
(12)								
04 64	Enter total number of section 501(c)(3) and government organizat	501(c)(3) and go	vernment organizadin the line 1 table	organizations listed in the line 1 table	ine 1 table			36
For Pape	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instruction	ns for Form 990.		0	Cat. No. 50055P		Schedule I (Form 990) 2020

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. Part III

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
-					
2					
8					
4					
co.					
9					
7					
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	the information	required in Part I, lin	e 2; Part III, column	(b); and any other additi	ional information.

					Schedule I (Form 990) 2020

Form: Schedule I (2020)

EIN: 20-2303252
Part II, Line 1

Page: 1

Description of Grants and Other Assistance to Governments and Organizations in the United States

		Recipient EIN	Amt. of cash grant	Amt. of non- cash asst
Name and address	45Committee Inc PO Box 710993 Herndon, VA 20171	47-3803487	250,000	
IRC code section Method of valuation	501(c)(4)			
Desc. of Non-Cash Asst.				
Purpose of grant	General Operating			
Name and address	The 60 Plus Association Inc 2121 Eisenhower Ave Ste 229 Alexandria, VA 22314	54-1564919	25,000	
IRC code section Method of valuation Desc. of Non-Cash Asst.	501(c)(4)			
Purpose of grant	General Operating			
Name and address	Advancing American Freedom 47 S Pennsylvania St Ste 201 Indianapolis, IN 46204	87-2090900	1,000,000	
IRC code section Method of valuation Desc. of Non-Cash Asst.	501(c)(4)			
Purpose of grant	General Operating			
Name and address	America Rising Squared AR2 1500 Wilson Blvd FI 5 Arlington, VA 22209	46-4544632	80,000	
IRC code section Method of valuation Desc. of Non-Cash Asst.	501(c)(4)			
Purpose of grant	General Operating			
Name and address	American Opportunity Alliance 251 18th ST South Ste 620 Arlington, VA 22202	46-4176170	50,000	
IRC code section	501(c)(4)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	General Operating			
Name and address	American Women's Alliance Inc 1935 Foxview Cir NW Washington, DC 20007	81-1306949	60,000	
IRC code section	501(c)(4)			
Method of valuation				
Desc. of Non-Cash Asst.	General Operating			
Purpose of grant		20.2075500	40,000	
Name and address	Americans for Limited Govt 10332 Main Street Box 326 Fairfax, VA 22030	36-3975580	40,000	

Schedule I, Part IV, Statem			The Concord Fun
RC code section	501(c)(4)		
Method of valuation Desc. of Non-Cash Asst.			
Purpose of grant	General Operating		
		50.4400507	110,000
ame and address	Americans For Tax Reform	52-1403587	110,000
	722 12th St NW		
	4th Fl		
DO	Washington, DC 20005		
RC code section Method of valuation	501(c)(4)		
Desc. of Non-Cash Asst.			
Purpose of grant	General Operating		
		81-2230155	60,000
Name and address	Better Jobs Coalition	61-2230133	60,000
	11757 W Ken Caryl Ave		
	Ste F 260		
RC code section	Littleton, CO 80127		
Method of valuation	501(c)(4)		
Desc. of Non-Cash Asst.			
Purpose of grant	General Operating		
		20-2603413	50,000
Name and address	Catholic Vote Civic Action	20-2003413	30,000
	17 N State St Ste 1590		
BC and anoting	Chicago, IL 60602		
RC code section Method of valuation	501(c)(4)		
Desc. of Non-Cash Asst.			
Purpose of grant	General Operating		
		84-0442429	10,000
Name and address	Centennial Institute	04-0442429	10,000
	8787 W Alameda Avenue		
IDO	Lakewood, CO 80226		
RC code section Method of valuation	501 (c)(3)		
Desc. of Non-Cash Asst.			
Purpose of grant	General Operating		
		E0 045500C	1.100.000
Name and address	Club for Growth	52-2155986	1,100,000
	2001 L St NW		
	Ste 600		
100 d f	Washington, DC 20036		
RC code section	501(c)(4)		
Method of valuation Desc. of Non-Cash Asst.			
Purpose of grant	General Operating		
		95-3580834	440,000
Name and address	Concerned Women for America	95-3560634	440,000
	1015 15th NW		
IDO 1	Washington, DC 20005		
RC code section	501(c)(4)		
Method of valuation Desc. of Non-Cash Asst.			
	General Operating		
Purpose of grant		07.000007	250,000
Name and address	Fair Lines America	27-2885687	250,000
	PO Box 26141		
	Alexandria, VA 22313		
IRC code section	501(c)(4)		
Method of valuation			
Desc. of Non-Cash Asst.			

Schedule I, Part IV, Statement 1 The Concord Fund

			The Concord Fund
Schedule I, Part IV, Staten IRC code section Method of valuation	nent 1 501(c)(4)		ine Concora Fund
Desc. of Non-Cash Asst.			
Purpose of grant	General Operating		
Name and address	One Nation 15405 John Marshall Hwy Haymarket, VA 20169	27-1937961	9,000,000
IRC code section Method of valuation Desc. of Non-Cash Asst.	501(c)(4)		
Purpose of grant	General Operating		
Name and address	Patriot Voices 315 Foxtail Lane Spring City, PA 19475	45-5336275	40,000
IRC code section Method of valuation Desc. of Non-Cash Asst.	501(c)(4)		
Purpose of grant	General Operating	05.0002240	105.000
Name and address	Prairie Fire Freedom PO Box 13395 Springfield, IL 62791	85-0803340	105,000
IRC code section Method of valuation Desc. of Non-Cash Asst.	501(c)(4)		
Purpose of grant	General Operating	05-0532524	275,000
Name and address	Republican State Leadership 1201 F St NW Ste 675 Washington, DC 20004	05-0532524	273,000
IRC code section Method of valuation Desc. of Non-Cash Asst.	527 General Operating		
Purpose of grant Name and address	Republican Attorneys General Assoc 1747 Pennsylvania Ave NW Ste 800 Washington, DC 20006	46-4501717	4,834,000
IRC code section Method of valuation Desc. of Non-Cash Asst.	527		
Purpose of grant	General Operating		
Name and address	Republican Governors Assoc 1747 Pennsylvania Ave NW Ste 250 Washington, DC 20006	11-3655877	500,000
IRC code section	527		
Method of valuation Desc. of Non-Cash Asst.	General Operating		
Purpose of grant Name and address	General Operating Susan B Anthony List Inc	54-1850126	2,254,300

IRC code section Method of valuation Desc. of Non-Cash Asst. 2800 S Shirlington Rd

Ste 1200

Arlington, VA 22206

501(c)(4)

Schedule I, Part IV, Statem	ent 1		The Concord Fu
Purpose of grant	General Operating		
Name and address	SC4US	86-2029056	250,000
	PO Box 12893		
	Columbia, SC 29211		
RC code section	501(c)(4)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	General Operating		
Name and address	Stand for America	83-3203087	500,000
	64 Beaver St		
	Ste 503		
	New York, NY 10004		
IRC code section	501(c)(4)		
Method of valuation			
Desc. of Non-Cash Asst.	General Operating	ja	
Purpose of grant		00.440007	1 000 000
Name and address	N2 America Inc	83-4133867	1,000,000
	1825 I Street NW		
	Ste 900		
IDO do o tion	Washington, DC 20006		
IRC code section Method of valuation	501(c)(4)		
Desc. of Non-Cash Asst.			
Purpose of grant	General Operating		
		82-2189965	265,000
Name and address	Tea Party Patriots Action Inc 80 M St SE	02-2109903	200,000
	1st FI		
	Washington, DC 20003		
IRC code section	501(c)(4)		
Method of valuation	66 (6)(1)		
Desc, of Non-Cash Asst.			
Purpose of grant	General Operating		
Name and address	Texans for Lawsuit Reform	76-0439129	50,000
	1701 Brun St		
	Ste 200		
	Houston, TX 77019		
IRC code section	501(c)(6)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	General Operating		
Name and address	The Family Foundation Action	20-2308649	100,000
	707 E Franklin St		
	Richmond, VA 23219		
IRC code section	501(c)(4)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	General Operating		
Name and address	Virginia Rising Action	85-0686845	100,000
	1500 Wilson Boulevard		
	Ste 500		
	Arlington, VA 22209		
IRC code section	501(c)(4)		
Method of valuation			
Desc. of Non-Cash Asst.	Conord Operating		
Purpose of grant	General Operating		

Schedule I, Part IV, Statement 1

Winning for Women

15191 Montanus Dr

Ste 232

Culpeper, VA 22701

IRC code section

Name and address

501(c)(4)

Method of valuation

Desc. of Non-Cash Asst.

Purpose of grant General Operating

The Concord Fund

82-1505471

450,000

SCHEDULE J (Form 990)

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

The Concord Fund

► 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.

Employer identification number

20-2303252

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form	1	H.E.	DE E
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	(x		
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use	30		111
	☐ Travel for companions ☐ Payments for business use of personal residence			J. Co. H
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees			100
	☐ Discretionary spending account ☐ Personal services (such as maid, chauffeur, chef)			
	If you do not be already alight the exempiration follows a written policy regarding payment			
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	<u></u>		
	explain	1b		
	OAPIGIT.			Test!
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
_	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2		
				No.
3	Indicate which, if any, of the following the organization used to establish the compensation of the	1	DE.	
•	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a	1		1800
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			1,00
	☐ Compensation committee ☐ Written employment contract			100
	☐ Independent compensation consultant ☐ Compensation survey or study			DR.
	☑ Form 990 of other organizations ☑ Approval by the board or compensation committee	E. 79	12.5	K
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		1
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		1
С	Participate in or receive payment from an equity-based compensation arrangement?	4c	- 5	1
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	0 1 10 10 10 10 10 10 1	in		
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
5	compensation contingent on the revenues of:			
_	The organization?	5a		1
a	Any related organization?	5b		1
b	If "Yes" on line 5a or 5b, describe in Part III.		7-0	
	Tes of file of ob, describe in that in.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			Tien.
-	compensation contingent on the net earnings of:		UP)	
а	The organization?	6a		1
	Any related organization?	6b		1
	If "Yes" on line 6a or 6b, describe in Part III.			
				8
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			,
	payments not described on lines 5 and 6? If "Yes," describe in Part III	7		√
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			1
	in Part III	8		1
		8 173		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		1

Page 2

Schedule J (Form 990) 2020

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

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.

Ann Corkery, Counsel (i) Frank J Scaturro, Counsel (ii) 3 (iii) 4 (iii) 5 (iii) 5 (iii)		(i) Base compensation 256,063 0 0 242,500 0	(ii) Bonus & incentive compensation 0 0 0 0 0 0	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(0)-(D)	in column (B) reported as deferred on prior Form 990
Ann Corkery, Counsel Frank J Scaturro, Counsel		256,063 0 242,500 0	0 0 0	0			256 063	
Frank J Scaturro, Counsel		242,500	0 0	0	0	THE RESERVE AND ADDRESS OF THE PARTY OF THE	00,002	0
Frank J Scaturro, Counsel		242,500	0 0			0	0	0
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14 (ii)								
0	[300						
15 (ii)								
0								
16 (ii)	æ							

Page 3 Schedule J (Form 990) 2020

Part III Supplemental Information

Schedule J (Form 990) 2020
or any additional 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

SCHEDULE L

(Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

	of the organization							Em	noyer ide		23032						
_	Concord Fund	era menualis de la	- ((-)(0)	a a a bi a w	E01/a\/4\ =	nd a -	otion F01/c\/C	(0) oraș								
Par	Excess Bene Complete if th	fit Transaction ne organization	is (section 501 answered "Ye	(c)(3), s" on	section Form 99	ou i (c)(4), a 0, Part IV, li	ine 25	5a or 25b, or l	Form 99	nizatio 00-EZ,	Part \	v, line	40b.				
4	(a) Name of diamonthinal	porcon	(b) Relationship be			person and		(c) Descrip	tion of tra	insactio	n		(d) Corrected?				
1	(a) Name of disqualified	person		organiza	ation	ion (c) Description of transaction		(e) Decemplies of the second		(c) Description of transaction			Yes	No			
(1)																	
(2)																	
(3)									_								
(4)																	
(5)																	
(6)				SON ANDS					4000								
2	Enter the amount																
	under section 4958										- 2						
3	Enter the amount o	f tax, if any, on	line 2, above,	reimb	ursed by	the organi	zatio		50 S	· ·	•						
Part	Loans to and	I/or From Inter ne organization	ested Person	s.	Form 00	0_E7 Dart 1	V line	38a or Form	aan P	art IV	line 2	6· or	if the				
	organization r	eported an am	ount on Form!	990, P	art X, lin	e 5, 6, or 22	v, m.c 2.	5 OOA OF TOTAL	550, 1	artiv,	11110 2	0, 01					
				<u> </u>		T		(f) Balance du	T								
(a) N	ame of interested person	(b) Relationship with organization	(c) Purpose of loan							(e) Original principal amount		e (g) In	default?	t? (h) Approved by board or			ritten ment?
		With Organization	loar		nization?	principal air	,ount				committee?						
				To	From	1			Yes	No	Yes	No	Yes	No			
(1)				1	1												
(2)																	
(3)																	
(4)																	
(5)																	
(6)																	
(7)																	
(8)																	
(9)																	
(10)																	
Total				- 10°			<u>.</u> ▶	\$				-1-					
Part	Grants or As:	sistance Bene	fiting Interest	ed Pe	rsons.	0 0-4 1/ /	: 0	7									
	Complete if the	ne organization	answered "Ye														
(a)	Name of interested person		ship between inter		(c) Amount	t of assistance		(d) Type of assist	ance	(€	e) Purpo	ose of a	issistar	ice			
		person	and the organization	ווכ			-			-	_						
(1)							-			+							
(2)				_			_			+	_	_					
(3)							_			+	_						
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(6)																	
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(8)																	
(9)																	
(10)																	
1/																	

Scriedule L (-0/11/ 990 OF 990-LZ/ 2020			
Part IV	Business Transactions Involving Complete if the organization ans	ng Interested Persons. wered "Yes" on Form 990), Part IV, line 28a, 2	28b, or 28c.
	(a) Name of interested person	(b) Relationship between	(c) Amount of	(d) Description of

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz reven	ation's ues?
				Yes	No
(1) Sch L, Stmt 1				_	-
(2)				-	
(3)				_	
(4)					
(5)					
(6)				_	
(7)					
(8)					
(9)					
(10)					
Part V Supplemental Information. Provide additional information formation formation formation formation.	or responses to questions	on Schedule L (see	instructions).		
		***************************************	***************************************		
		**************************************	***************************************		
	******		***************************************		
			••••••		

Schedule L, Part V, Statement 1

Form: Schedule L (2020)

Page: 2

The Concord Fund EIN: 20-2303252

Part IV

:55	Description of Business Transactions Involving Interested Persons	
		Amount of transaction
Name	Madison Strategies	127,825
Relationship with organization	35% controlled entity of Director Gary Marx	
Description of transaction	Consulting services	
Sharing Of Revenues	No	

SCHEDULE O (Form 990 or 990-EZ)

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.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

The Concord Fund	20-2303252
Form 990, Part VI, Section B, Line 11b - The Form 990 is prepared by an independent contractor and revie	wed by outside legal counsel
before it is filed. Officers also review and approve the document before filing with the Internal Revenue Se	ervice.
Form 990, Part VI, Section B, Line 12c - The Organization's conflict of interest Policy is circulated to office	ers and directors annually. Officers
and Directors are required to report interests that could give rise to conflicts.	
No.	
Form 990, Part VI, Section B, Line 15 - The compensation for the Organization's President and other Key E	Employees was approved by
independent directors of the board, using comparable compensation from similarly qualified persons, and	d included contemporaneous
documentation and recordkeeping.	
acountries of the recording	
Form 990, Part VI, Section C, Line 19 - The articles of incorporation are available from the Virginia State C	orporation Commission. Other
governing documents are not available to the public.	************************************
governing about the drainage to the passes.	***************************************
Form 990, Part IX, Line 11g - The amount of \$21,933,625 consists of: Polling: program \$37,728; Consulting	a: \$7,672,161 (program
\$7,288,533 management and general \$383,608); and Advocacy: program \$14,223,736.	
\$7,500,533 Hidragement and general \$600,000/, and \$100,000/. p. 53, and \$1,1229/7001	

