

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

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047
2022
Open to Public
Inspection

A I	For the	<b>2022</b> calendar year, or tax year beginning Ju	љ 1, 2022 <b>and</b>	ending J	UN 30, 2023				
	Check if applicable	C Name of organization			D Employer identi	fication number			
	Addres								
Ē	Name change	5			13-3976062	2			
F	Initial return Final	Number and street (or P.O. box if mail is not de 40 WEST 20TH STREET	E Telephone numb						
_	⊥return/ termin ated		ZIP or foreign postal code		G Gross receipts \$	18,517,994.			
Г	Ameno	H(a) Is this a group							
	Applic	F Name and address of principal officer: MANIS	SH BAPNA		for subordinate				
	pendir	g SAME AS C ABOVE			H(b) Are all subordinates	included? Yes No			
1	Гах-ехе	empt status: 501(c)(3) X 501(c) ( 4 )	(insert no.) 4947(a)(1)	or 527	If "No," attach	a list. See instructions			
J١	Websit				H(c) Group exempti	on number			
		organization: X Corporation Trust As Summary	sociation Other	<b>L</b> Year	of formation: 1996	M State of legal domicile: NY			
	_	Briefly describe the organization's mission or most	significant activities: TO BUI	LD POLITI	CAL SUPPORT FOR				
Governance	-	ADVANCING THE GOALS OF THE NATURAL RE							
nar	2	Check this box if the organization disco	ntinued its operations or dispos	sed of more	than 25% of its net as	ssets.			
Ver	3	Number of voting members of the governing body	(Part VI, line 1a)		3	16			
		Number of independent voting members of the gov				15			
တ္တ	5	Total number of individuals employed in calendar y				0			
Vitie	6	Total number of volunteers (estimate if necessary)			6	0			
Activities &	7 a	Total unrelated business revenue from Part VIII, co				0.			
_	b	Net unrelated business taxable income from Form	990-T, Part I, line 11	<u></u>	7k	0.			
					Prior Year	Current Year			
<u>o</u>	8	Contributions and grants (Part VIII, line 1h)	15,520,221	<del></del>					
Revenue	9	Program service revenue (Part VIII, line 2g)		0	·				
3e	10	Investment income (Part VIII, column (A), lines 3, 4,		12,363	<del>'</del>				
_	יין	Other revenue (Part VIII, column (A), lines 5, 6d, 8c		0	<u> </u>				
		Total revenue - add lines 8 through 11 (must equal	15,532,584						
	1	Grants and similar amounts paid (Part IX, column (			2,215,448	<del>-</del>			
	1	Benefits paid to or for members (Part IX, column (A			0				
es	15	Salaries, other compensation, employee benefits (F			2,832,618				
Expenses	16a	Professional fundraising fees (Part IX, column (A), I			343,377	318,286.			
X	_b	Total fundraising expenses (Part IX, column (D), line	· · · · · · · · · · · · · · · · · · ·		13,038,528	8,482,001.			
_	''	Other expenses (Part IX, column (A), lines 11a-11d,							
	1	Total expenses. Add lines 13-17 (must equal Part I)			-2,897,387				
0	19	Revenue less expenses. Subtract line 18 from line	12	Be	ginning of Current Year				
Net Assets or	20	Total assets (Part X, line 16)		50	14,034,850				
ASSE	21	Total liabilities (Part X, line 26)			898,608				
Net.	22	Net assets or fund balances. Subtract line 21 from	line 20		13,136,242	<del> </del>			
	art II	Signature Block			, ,	· ·			
Und	er pena	Ities of perjury, I declare that I have examined this return,	including accompanying schedule	s and stateme	ents, and to the best of n	ny knowledge and belief, it is			
true	, correc	t, and complete. Declaration of preparer (other than office	r) is based on all information of wl	nich preparer	has any knowledge.				
Sig	n	Signature of officer			Date				
Her	e	VERONICA FOO, CFO							
		Type or print name and title							
		Print/Type preparer's name	Preparer's signature		Date Check	PTIN			
Paid	i	SCOTT THOMPSETT	Sith Shargaeth		5/10/2024 self-empl	·			
	parer	Firm's name GRANT THORNTON LLP			Firm's EIN	36-6055558			
Use	Only	Firm's address 757 THIRD AVENUE, 3RD FLOO	DR						
_		NEW YORK, NY 10017-2013			Phone no.21	2-599-0100			
May	y the IF	RS discuss this return with the preparer shown abo	ve? See instructions			X Yes No			

#### Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

# Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). 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. Type or Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) print NRDC ACTION FUND INC. 13-3976062 File by the Number, street, and room or suite no. If a P.O. box, see instructions. filing your 40 WEST 20TH STREET return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions. NEW YORK, NY 10011 Enter the Return Code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Is For Code Is For Code Form 990 or Form 990-EZ Form 1041-A 01 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 Form 990-T (corporation) VERONICA FOO, CFO The books are in the care of ▶ 40 WEST 20TH STREET - NEW YORK, NY 10011 Telephone No. ▶ 212-727-2700 Fax No. 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 If it is for part of the group, check this box MAY 15, 2024 I request an automatic 6-month extension of time until , to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year ► X tax year beginning JUL 1, 2022 JUN 30, 2023 , and ending Tinal return Initial return If the tax year entered in line 1 is for less than 12 months, check reason: Change in accounting period If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 0. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b 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. 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

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

Form 8868 (Rev. 1-2022)

13,338,461.

Total program service expenses

13-3976062

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# Form 990 (2022) NRDC ACTION 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)?			
	If "Yes," complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_	Х	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5	Х	
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		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? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			,,
_	Schedule D, Part III	8_		Х
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?			,
40	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			x
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		
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.  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а	$^{\prime}$	11a		x
h	Part VI  Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	IIa		
b	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	115		
Ŭ	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	l		,,
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	١		ļ "
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		Х	
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	Λ	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		x
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	19		x
20a	complete Schedule G, Part III	20a		X
zua b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		<del></del>
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	х	
	, , , , , , , , , , , , , , , , , , ,			

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# Form 990 (2022) NRDC ACTION FUND INC. Part IV Checklist of Required Schedules (continued)

	· (continued)		V	NIa			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No			
22		22		х			
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current						
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete						
	· · ·	23	х				
24.5	Schedule J	25					
<b>24</b> a	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			1			
		24a		х			
h	Schedule K. If "No," go to line 25a	24b					
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240					
C		24c		1			
٨	any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d					
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u					
<b>2</b> 5a		25a		Х			
<b>L</b>	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a					
D	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	051		х			
00	Schedule L, Part I	25b		- 1			
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%			х			
	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,			1			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			177			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х			
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,						
	instructions for applicable filing thresholds, conditions, and exceptions):						
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If						
	"Yes," complete Schedule L, Part IV	28a		Х			
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х			
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			1			
	"Yes," complete Schedule L, Part IV	28c		Х			
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	<u> </u>			
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			1			
	contributions? If "Yes," complete Schedule M	30		Х			
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х			
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete						
	Schedule N, Part II	32		Х			
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			1			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х			
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			1			
	Part V, line 1	34	Х				
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х				
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity						
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х			
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		Х			
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?						
	Note: All Form 990 filers are required to complete Schedule O	38	х				
Pa							
	Check if Schedule O contains a response or note to any line in this Part V						
	, , , , , , , , , , , , , , , , , , , ,		Yes	No			
12	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 87		. 55	.,0			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0	-					
2	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming						
٠	(gambling) winnings to prize winners?	10	х				

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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									
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b								
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х						
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b								
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)?									
b	<b>b</b> If "Yes," enter the name of the foreign country									
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).									
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X						
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х						
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c								
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit		77							
	any contributions that were not tax deductible as charitable contributions?	6a	Х							
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	۵.	v							
_	were not tax deductible?	6b	Х							
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?	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 required	7-								
لم	to file Form 8282?  If "Yes," indicate the number of Forms 8282 filed during the year  7d	7c								
d	,	70								
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f								
g	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								
9 h	If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?	79 7h								
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7.1								
	sponsoring organization have excess business holdings at any time during the year?	8								
9	Sponsoring organizations maintaining donor advised funds.									
а	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:									
а	Initiation fees and capital contributions included on Part VIII, line 12									
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities									
11	Section 501(c)(12) organizations. Enter:									
а	Gross income from members or shareholders									
b	Gross income from other sources. (Do not net amounts due or paid to other sources 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								
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.									
а	Is the organization licensed to issue qualified health plans in more than one state?	13a								
	<b>Note:</b> 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									
	Enter the amount of reserves on hand			77						
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х						
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b								
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	4-		x						
	excess parachute payment(s) during the year?	15		^						
16	If "Yes," see the instructions and file Form 4720, Schedule N.	46		Х						
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16								
17	If "Yes," complete Form 4720, Schedule O.  Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities.									
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?	17								
	If "Yes," complete Form 6069.	- 17								
	11 100, Complete 1 01111 0000.									

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Form 990 (2022) NRDC ACTION FUND INC. 13-3976062 Page **6** 

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	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		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			1
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	401		
44-	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Α	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	40-	Х	
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	Λ	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	10-	Х	
12	on Schedule O how this was done	12c 13	Х	
13 14	Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent	14		
13	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		х
b	Other officers or key employees of the organization	15b		Х
J	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	100		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
iou	taxable entity during the year?	16a		х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	100		
-	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE O			
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)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.	,,		
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	VERONICA FOO, CFO - 212-727-2700			
	40 WEST 20TH STREET NEW YORK NY 10011			

Form 990 (2022) NRDC ACTION FUND INC. 13-3976062 Page **7** 

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

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- 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.

(A)	(B)	Jigu	11124		C)	прсі	louit	(D)	(E)	(F)
Name and title	Average	Position (do not check more than one						Reportable	Reportable	Estimated
	hours per					is botl or/trus		compensation	compensation from related	amount of other
	week (list any	tor						from the	organizations	compensation
	hours for	r direc				ted		organization	(W-2/1099-MISC/	from the
	related	stee	truste		ao	bensa		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	ual tr	ional		ploye	t com	١.	1099-NEC)		and related organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) MANISH BAPNA	1.00									
PRESIDENT/CEO	40.00			Х				0.	688,612.	51,074.
(2) MITCHELL BERNARD	1.00									
CHIEF COUNSEL	40.00						Х	0.	436,922.	52,998.
(3) VERONICA FOO	3.00									
CFO AND TREASURER	40.00			Х				0.	355,533.	59,585.
(4) KEVIN CURTIS	40.00									
EXECUTIVE DIRECTOR	0.00			Х				0.	264,142.	58,655.
(5) DANIEL KIM - CHIEF OPERATING	1.00									
OFFICER (03/2022 TO 11/2022)	40.00			Х				0.	279,463.	25,207.
(6) EMILY GRAY	2.00									
ASSOCIATE DIRECTOR, MAJOR GIFTS	40.00					_	Х	0.	167,197.	38,505.
(7) TIMOTHY MEINKE	40.00									
DIRECTOR OF DEVELOPMENT	0.00					Х		0.	168,546.	25,980.
(8) DENIS DISON	40.00									
COMMUNICATIONS DIRECTOR	0.00					Х		0.	151,850.	27,922.
(9) ALEXANDRA SHAPIRO	40.00	1								
DIRECTOR OF PAC & CANDIDATE SVS	0.00					Х		0.	150,255.	23,179.
(10) PATRICIA BAUMAN	1.00	-								
CHAIR/DIRECTOR	1.00	Х		Х		_		0.	0.	0.
(11) JOHN H. ADAMS	1.00	-								
DIRECTOR	20.00	Х				_		0.	0.	0.
(12) SIGMUND ANDERMAN	1.00	-								
DIRECTOR	0.00	Х						0.	0.	0.
(13) CHRISTOPHER ARNDT	1.00	-						_	_	
DIRECTOR	0.00	Х				<u> </u>		0.	0.	0.
(14) RICHARD E. AYRES	1.00									
DIRECTOR	1.00	Х	_			┝		0.	0.	0.
(15) ANNE BARTLEY	1.00								_	_
DIRECTOR (16) GUEDA DEL GUE	0.00	Х	_		-	_		0.	0.	0.
(16) CHERI BEASLEY	1.00									_
DIRECTOR (AS OF 06/2023)	<del> </del>	Х	-	-	-	$\vdash$	-	0.	0.	0.
(17) FRANCES BEINECKE	1.00									^
DIRECTOR 232007 12-13-22	0.00	Х						0.	0.	0. Form <b>990</b> (2022)

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Part VII Section A Officers Directors True									13-337000	z Page <b>O</b>
Section A. Officers, Directors, 11d		oloy	ees,			ghes	t Co		,	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average		Position (do not check more than one					Reportable	Reportable	Estimated
	hours per week					s both		compensation	compensation	amount of
	(list any					T		from the	from related	other compensation
	hours for	direct				_		organization	organizations (W-2/1099-MISC/	from the
	related	e or (	stee			ısatec		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	ndividual trustee or director	Institutional trustee		yee	ım per		1099-NEC)	,	and related
	below	idual	ution	la e	Key employee	est co	er	,		organizations
	line)	Indiv	Instii	Officer	Key 6	Highest compensated employee	Former			
(18) EDUARDO BHATIA	1.00									
DIRECTOR	0.00	Х						0.	0.	0.
(19) HAMILTON CANDEE	1.00									
DIRECTOR	0.00	Х						0.	0.	0.
(20) JON FRIEDLAND	1.00									
DIRECTOR (THRU 02/2023)	0.00	Х						0.	0.	0.
(21) JO ANN KAPLAN	1.00									
DIRECTOR	0.00	Х						0.	0.	0.
(22) JOSH MCNEIL	1.00									
DIRECTOR (AS OF 06/2023)	0.00	Х						0.	0.	0.
(23) VERNICE MILLER-TRAVIS	1.00									
DIRECTOR	0.00	Х						0.	0.	0.
(24) ROBERT RABEN	1.00									
DIRECTOR	0.00	Х						0.	0.	0.
(25) GERALD TORRES	1.00									
DIRECTOR	1.00	Х						0.	0.	0.
(26) DAVID VLADECK	1.00									
DIRECTOR	1.00	Х						0.	0.	0.
1b Subtotal								0.	2,662,520.	363,105.
c Total from continuation sheets to Part V	II, Section A							0.	0.	0.
d Total (add lines 1b and 1c)								0.	2,662,520.	363,105.

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

3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

5 X

#### Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
BULLY PULPIT INTERACTIVE, LLC, 1750 K ST		
NW, SUITE 450, WASHINGTON, DC 20036	ADVERTISING & CONSULTING	1,650,438.
SKDKNICKERBOCKER LLC, 1150 18TH ST NW,	PUBLIC AFFAIRS AND POLITICAL	
SUITE 800, WASHINGTON, DC 20006	CONSULTING	1,022,632.
DECLARATION MEDIA LLC	TV & DIGITAL ADVERTISING;	
18 BUIST AVENUE, GREENVILLE, SC 29609	STRATEGIC CONS	755,000.
M & R STRATEGIC SERVICES, INC., 1901 L	DIGITAL ADVOCACY/FUNDRAISING	
STREET NW, SUITE 800, WASHINGTON, DC 20036	CONSULTANT	727,090.
META PLATFORMS, INC., 15161 COLLECTIONS	LOBBYING; ADVERTISING;	
CENTER DRIVE, CHICAGO, IL 60693	OUTREACH	511,847.
2 Total number of independent contractors (including but not limited to those listed	l above) who received more than	
\$100,000 of compensation from the organization 19		200

SEE PART VII, SECTION A CONTINUATION SHEETS

NRDC ACTION FUND INC. 13-3976062 Form 990

Form 990 NRDC ACTION I	FUND INC.								13-39760	062
Part VII   Section A. Officers, Directors, Tru	ıstees, Key En	nplo	yee	s, aı	nd F	ligh	est	Compensated Employe	ees (continued)	
(A)	(D)	(E)	(F)							
Name and title	(B) Average	(C) Position				1		Reportable	Reportable	Estimated
	hours	(cl	(check all th				ly)	compensation	compensation	amount of
	per						from	from related	other	
	week	_				) yee		the	organizations	compensation
	(list any	recto				empl		organization	(W-2/1099-MISC)	from the
	hours for	ordi	ee			ated		(W-2/1099-MISC)		organization
	related organizations	ustee	trust		ee	ubeus				and related
	below	dual tr	tional	١.	n ploy	stcon	_			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) CRYSTAL FRIERSON	1.00									
SECRETARY	1.00			х				0.	0.	0.
(28) ASHLEY GHERLONE	1.00									
ASSISTANT SECRETARY	1.00			Х				0.	0.	0.
(29) DOROTHY HECTOR	1.00									
ASSISTANT SECRETARY	1.00			х				0.	0.	0.
(30) KRISTA MCMANUS	1.00									
ASSISTANT SECRETARY	1.00		_	Х		_		0.	0.	0.
		-								
						_				
Total to Part VII, Section A, line 1c										

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Statement of Revenue

			Check if Schedule O c	onta	ains a	response	or note to any lin	e in this Part VIII			
								<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ည လ	1	a	Federated campaigns			1a					
an			Membership dues			1b	791,110.				
يَ ق				ng events 1c							
ifts IrA						1d	125,000.				
nii.G			Government grants (contri				·				
Sign			All other contributions, gifts,								
k či		-	similar amounts not included			1f	17,133,500.				
풀		g	Noncash contributions included in I		•••	1g \$	202,095.				
Contributions, Gifts, Grants and Other Similar Amounts		_	Total. Add lines 1a-1f					18,049,610.			
							Business Code				
o l	2	а									
Ş		b									
Ser		С									
am eve		d									
Program Service Revenue		е									
ğ.		f	All other program service r	ever	nue						
		g	Total. Add lines 2a-2f								
	3		Investment income (includ	ing o	divider	nds, intere	est, and				
			other similar amounts)					266,289.			266,289.
	4		Income from investment o	f tax	-exem	pt bond p	roceeds				
	5		Royalties								
					(i	) Real	(ii) Personal				
	6	а	Gross rents	6a							
		b	Less: rental expenses	6b							
		С	Rental income or (loss)	6с							
		d	Net rental income or (loss)								
	7	а	Gross amount from sales of			ecurities	(ii) Other				
			assets other than inventory	7a	2	02,095.					
		b	Less: cost or other basis								
ne			and sales expenses	7b	2	02,621.					
ther Revenue			Gain or (loss)	7с		-526.					
~			Net gain or (loss)				· · · · · · · · · · · · · · · · · · ·	-526.			-526.
HE I	8	а	Gross income from fundraisin	ig eve	ents (n	ot					
Ò			including \$			of					
			contributions reported on								
			Part IV, line 18								
			Less: direct expenses								
			Net income or (loss) from f Gross income from gaming								
	9	а	Part IV, line 19								
		h	Less: direct expenses								
			Net income or (loss) from (								
			Gross sales of inventory, le				<u> </u>				
		u	and allowances								
		h	Less: cost of goods sold								
			Net income or (loss) from s								
			2. (.555) 5111 (			1	Business Code				
snc	11	а									
Miscellaneous Revenue		b									
ella		С									
lisc R			All other revenue								
2			Total. Add lines 11a-11d								
	12		Total revenue. See instructio					18,315,373.	0.	0.	265,763.

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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 respons  Do not include amounts reported on lines 6b,  7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1 Grants and other assistance to domestic organizations				
and domestic governments. See Part IV, line 21	4,153,356.	4,153,356.		
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				
<b>5</b> Compensation of current officers, directors,				
trustees, and key employees	412,191.	374,452.	37,739.	
6 Compensation not included above to disqualified				
persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)	1 0-0 50-			
7 Other salaries and wages	1,978,607.	1,028,433.	409,598.	540,576
8 Pension plan accruals and contributions (include				
section 401(k) and 403(b) employer contributions)	606.060	252 252	425 242	450 000
9 Other employee benefits	686,060.	372,358.	135,312.	178,390
10 Payroll taxes				
11 Fees for services (nonemployees):				
a Management	40.500		40 500	
b Legal	48,529.		48,529.	
c Accounting	4 065 010	4 061 540	6.050	111
d Lobbying	4,967,912.	4,961,742.	6,059.	111
e Professional fundraising services. See Part IV, line 17	318,286.			318,286
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25,	052 520	CE1 2E2	100 000	02.465
column (A), amount, list line 11g expenses on Sch O.)	853,520.	651,253.	109,802.	92,465
12 Advertising and promotion	1,292,471.	1,268,157.	24 207	24,314
13 Office expenses	509,930. 246,877.	22,308.	24,297.	463,325
14 Information technology	240,077.	242,203.	3,414.	1,260
15 Royalties	404 722	200 526	07 505	107 602
16 Occupancy	404,733.	209,536. 41,863.	87,505.	107,692
17 Travel	62,050.	41,003.	3,953.	16,234
Payments of travel or entertainment expenses				
for any federal, state, or local public officials	26 210	6,951.		10 260
19 Conferences, conventions, and meetings	26,219.	6,951.		19,268
20 Interest				
Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
a DONATION PROCESSING FEE	31,409.	240.	30,969.	200
b TEMPORARY/CLERICAL	16,311.	234.	16,077.	0
c FILING FEES	14,666.	- 0	14,666.	
d INSTIT. MGMT TRAINING	4,398.	4,275.	123.	0
e All other expenses	2,976.	1,100.	386.	1,490
25 Total functional expenses. Add lines 1 through 24e	16,030,501.	13,338,461.	928,429.	1,763,611
26 Joint costs. Complete this line only if the organization		. ,	,	· · ·
reported in column (B) joint costs from a combined				
educational campaign and fundraising solicitation.				
Check here if following SOP 98-2 (ASC 958-720)				

## Form 990 (2022) Part X | Balance Sheet

Par	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	2,922,355.	1	4,278,283
	2	Savings and temporary cash investments		2	482,13
	3	Pledges and grants receivable, net		3	5,471,85
	4	Accounts receivable, net		4	12,62
	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	
छ	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
۲	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation		10c	
	11	Investments - publicly traded securities	4,468,159.	11	6,721,13
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)		16	16,966,02
	17	Accounts payable and accrued expenses	871,438.	17	1,467,97
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ģ	22	Loans and other payables to any current or former officer, director,			
litie		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		22	
ן כ	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	27,170.	25	76,93
	26	Total liabilities. Add lines 17 through 25	898,608.	26	1,544,91
		Organizations that follow FASB ASC 958, check here			
Ses		and complete lines 27, 28, 32, and 33.			
au	27	Net assets without donor restrictions		27	
Ba	28	Net assets with donor restrictions	13,136,242.	28	15,421,11
pur		Organizations that do not follow FASB ASC 958, check here			
년		and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
As	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances	13,136,242.	32	15,421,114
	33	Total liabilities and net assets/fund balances	14 024 050	33	16,966,028

	n 990 (2022) NRDC ACTION FUND INC.	13-397606	2	Pag	ge <b>12</b>
Pa	rt 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		315,	
2	Total expenses (must equal Part IX, column (A), line 25)	2	16	030,	501.
3	Revenue less expenses. Subtract line 2 from line 1	3	2	284,	872.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	13	136,	242.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	15	421,	114.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				Х
		,		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	dule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

### Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

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

OMB No. 1545-0047

2022

**Employer identification number** 

NRDC ACTION FUND INC. 13-3976062 Organization type (check one): Filers of: Section: Form 990 or 990-EZ X 501(c)( 4 ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990). LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990) (2022)

Part I	Contributors (see instructions). Use duplicate copies of Part I if add	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$	Person X Payroll
(a)	(b)	(c)	(d)
No. <u>4</u>	Name, address, and ZIP + 4	* \$ 1,190,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$\$	Person X Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6_		\$\$	Person X Payroll

Part I	Contributors (see instructions). Use duplicate copies of Part I if ad	lditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$\$	Person X Payroll
(a)	(b) Name, address, and ZIP + 4	(c) Total contributions	(d)
No. 8	Name, address, and ZIP + 4	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$\$	Person X Payroll
(a)	(b)	(c)	(d)
10	Name, address, and ZIP + 4	* \$ \$ 300,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	Humo, audi 655, and £if T T	\$\$	Person X Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	Training access oddy unite and 1 1	\$\$ 192,050.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15		\$\$	Person X Payroll
(a)	(b)	(c)	(d)
No. 16	Name, address, and ZIP + 4	Total contributions  \$ 60,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
17		\$\$	Person X Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
18		\$\$	Person X Payroll

Part I	Contributors (see instructions). Use duplicate copies of Part I if ad	lditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19		\$\$	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
20	Name, address, and ZIF + 4	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d) Type of contribution
No. 21	Name, address, and ZIP + 4	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 22	Name, address, and ZIP + 4	\$\$ 25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
23	ivalite, audi ess, and ZIF + 4	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
24	Talloj adalogoj alia Eli TT	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	onal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25		\$	Person X Payroll
(a)	(b)	(c)	(d)
No. 26	Name, address, and ZIP + 4	Total contributions  \$ 12,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
27		\$10,000.	Person X Payroll
(a)	(b)	(c)	(d)
No. 28	Name, address, and ZIP + 4	Total contributions	Person X Payroll
(a)	(b)	(c)	(d) Type of contribution
No. 29	Name, address, and ZIP + 4	Total contributions  10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
30	Humo, addi 655, and ZiF T T	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

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

Part I	Contributors (see instructions). Use duplicate copies of Part I if ac	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
37		\$\$	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 38	Name, address, and ZIP + 4	Total contributions  \$ 6,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
39		\$\$	Person X Payroll
(a)	(b)	(c)	(d)
40	Name, address, and ZIP + 4	Total contributions  \$ 5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
41	Haine, addiess, and Eir + 4	\$\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
42	Tullio, addi 655, alia Eli TT	\$\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
43		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
44		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
45		\$\$,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
46	Name, address, and ZIF + 4	\$ \$ 5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
47		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
48		\$	Person X Payroll

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
49		- - \$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
50		- - \$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
51		- - \$\$5,000.	Person X Payroll
(a)	(b)	(c) Total contributions	(d) Type of contribution
No. 52	Name, address, and ZIP + 4	- \$ 5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
53		- \$ 100,661.	Person X Payroll  Noncash X  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
54		- \$ 100,125.	Person X Payroll X Noncash X (Complete Part II for noncash contributions.)

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
55		\$\$	Person X Payroll  Noncash X  (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
<b>No.</b> 56	Name, address, and ZIP + 4	### Total contributions    1	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
57		\$\$	Person X Payroll
(a)	(b)	(c)	(d)
<b>No.</b> 58	Name, address, and ZIP + 4	Total contributions  \$\$ 5,187.	Person X Payroll
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4	\$	Person Payroll Complete Part II for noncash contributions.
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4	\$	Person Payroll Complete Part II for noncash contributions.

Name of organization Employer identification number

NRDC ACTION FUND INC. 13-3976062

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
53	STOCK		
(2)		\$50,661.	06/30/23
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
54	STOCK		06/20/03
(0)		\$100,125.	06/30/23
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
55	STOCK	_	
		\$\$	06/30/23
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
56	STOCK	_	
		\$\$	06/30/23
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
57	STOCK	_	
		\$	06/30/23
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
58	STOCK	_	
			06/30/23

Name of organization **Employer identification number** NRDC ACTION FUND INC. 13-3976062 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 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (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

Open to Public Inspection

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

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

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

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

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

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

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

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

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

Name of organization			Er	mployer identification number
NRDC ACTION				13-3976062
Part I-A Complete if the org	anization is exempt under	section 501(c) o	or is a section 527	organization.
<ol> <li>Provide a description of the organiz</li> <li>Political campaign activity expendit</li> <li>Volunteer hours for political campai</li> </ol>	ures			
Part I-B Complete if the org	anization is exempt under	section 501(c)(3	3).	
<ol> <li>Enter the amount of any excise tax</li> <li>Enter the amount of any excise tax</li> <li>If the organization incurred a sectio</li> <li>Was a correction made?</li> <li>If "Yes," describe in Part IV.</li> </ol>	incurred by organization managers n 4955 tax, did it file Form 4720 for	under section 4955 this year?		\$ Yes
Part I-C Complete if the org	anization is exempt under	section 501(c),	except section 501	. , , ,
1 Enter the amount directly expended	, ,	·		\$ 1,125,563.
2 Enter the amount of the filing organ exempt function activities				\$\$
3 Total exempt function expenditures line 17b		·		\$ 3,705,563.
4 Did the filing organization file Form				
5 Enter the names, addresses and en made payments. For each organizar contributions received that were pro- political action committee (PAC). If	nployer identification number (EIN) of tion listed, enter the amount paid fromptly and directly delivered to a so	of all section 527 poli om the filing organiza eparate political orga	tical organizations to whation's funds. Also enter nization, such as a sepa	hich the filing organization the amount of political
(a) Name	(b) Address	(c) EIN	(d) Amount paid fror filing organization's funds. If none, enter -	contributions received and
	40 W 20TH ST NEW YORK, NY 10011	84-4788745	2,080,00	00.
	740 15 ST NW WASHINGTON,			
GIVEGREEN UNITED ACTION	DC 20005	87-4411631	500,00	00.

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

Schedule C (Form 990) 2022

LHA

232041 11-08-22

Scl	hedule C (F	Form 990) 2022	NRDC ACT	ION FUND	INC.		13-3	3976062	Page 2
P	art II-A	Complete if the org	anizatio	n is exen	npt under sectior	1 501(c)(3) and file	d Form 5768 (el	ection un	
		section 501(h)).							
Α	Check	if the filing organiza	tion belong	gs to an affil	liated group (and list in	Part IV each affiliated	group member's nam	ne, address,	EIN,
		expenses, and share	re of excess	s lobbying e	expenditures).				
B	Check	if the filing organiza	tion check	ed box A ar	nd "limited control" pro	visions apply.			
				ying Exper eans amou	nditures nts paid or incurred.)		(a) Filing organization's totals		ted group als
_		la la cita de la companya di la comp					totalo		
1		bbying expenditures to influence to influenc	•		ري (ب (مانيم ما يا مام ام ما				
		bbying expenditures to influence (calculated)	_		• • • • • •				
		bbying expenditures (add li							
		xempt purpose expenditure							
		empt purpose expenditure							
		ng nontaxable amount. Ente							
		nount on line 1e, column (a) o	or (b) is:	The lob	bying nontaxable am	ount is:			
		r \$500,000			the amount on line 1e.				
		00,000 but not over \$1,000			00 plus 15% of the exc				
	Over \$1	,000,000 but not over \$1,5	00,000		00 plus 10% of the exc				
	Over \$1	,500,000 but not over \$17,	000,000	\$225,00	00 plus 5% of the exces	ss over \$1,500,000.			
	Over \$1	7,000,000		\$1,000,0	000.				
	<b>g</b> Grassro	ots nontaxable amount (en	ter 25% of	line 1f)					
	h Subtrac	t line 1g from line 1a. If zer	o or less, e	nter -0					
	i Subtrac	t line 1f from line 1c. If zero	o or less, er	nter -0					
	j If there	is an amount other than ze	ro on eithe	r line 1h or l	line 1i, did the organiza	ation file Form 4720			
	reportin	g section 4911 tax for this	year?					Yes	No No
		(Some organizations t	hat made a	a section 50	eraging Period Under 01(h) election do not l ate instructions for lir	have to complete all o	f the five columns b	elow.	
			Lobb	ying Exper	nditures During 4-Yea	r Averaging Period		1	
		Calendar year al year beginning in)	(a) 2	2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) <sup>-</sup>	Γotal
2	<b>?a</b> Lobbyir	ng nontaxable amount							
	,	ng ceiling amount							
	(150% c	of line 2a, column(e))							
	• Total la	hhving ovnandituras							
	C TOTAL IO	bbying expenditures						+	
	<b>d</b> Grassro	ots nontaxable amount							
		ots ceiling amount							
		of line 2d, column (e))							

Schedule C (Form 990) 2022

f Grassroots lobbying expenditures

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

or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(k	o)
f the lobbying activity.	Yes	No	Amo	ount
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:				
<ul><li>a Volunteers?</li><li>b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?</li></ul>				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j 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>b</b> If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5),	or sec	tion	
501(c)(6).				
			Yes	No
		1 1	X	
1 Were substantially all (90% or more) dues received nondeductible by members?				
		_		Х
<ul> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political campaign activity expenditures from the</li> </ul>	e prior year?	3	tion	X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?  3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the long and political campaign activity expenditures from the long and the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	ne prior year? n 501(c)(5),	2 3 or sec		Х
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	ne prior year? n 501(c)(5), "No" OR (b	or sec ) Part I		Х
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members	n 501(c)(5), "No" OR (b	or sec ) Part I		Х
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the late of the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	n 501(c)(5), "No" OR (b	or sec ) Part I		Х
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the local section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	n 501(c)(5), "No" OR (b)	or sec ) Part I		Х
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Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditures next year?  Taxable amount of lobbying and political expenditures. See instructions  Part IV Supplemental Information  rovide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group istructions); and Part II-B, line 1. Also, complete this part for any additional information.  ART I-A, LINE 1:	e prior year? n 501(c)(5), "No" OR (b) cal ess	2 3 or sec ) Part I 2 2b 2c 3	II-A, line	Х
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Schedule C (Form 990) 2022

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

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Inspection

Name of the organization

NRDC ACTION FUND INC.

**Employer identification number** 

13-3976062

Pai	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		r Si	milar Funds o	r Ac	coun	ts. Complete if the
	organization anomorou neo orni om oco, natriv, iiii	(a) Donor adv	vised	funds	(1	<b>b)</b> Fun	ds 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 v	vriting that the assets	held	d in donor advised	d fund	s	
	are the organization's property, subject to the organization's	-					Yes No
6	Did the organization inform all grantees, donors, and donor ad						
	for charitable purposes and not for the benefit of the donor or						
	impermissible private benefit?						
Par	t II Conservation Easements. Complete if the org	ganization answered "	Yes	" on Form 990, Pa	art IV,	line 7.	
1	Purpose(s) of conservation easements held by the organization	on (check all that appl	y).				
	Preservation of land for public use (for example, recreat	tion or education)		Preservation of a	a histo	rically	important land area
	Protection of natural habitat			Preservation of a	certif	fied his	storic structure
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation cont	ribu	tion in the form of	a cor	servat	
	day of the tax year.						Held at the End of the Tax Year
а	Total number of conservation easements					2a	
b						2b	
С	Number of conservation easements on a certified historic stru					2c	
d	Number of conservation easements included in (c) acquired a						
	historic structure listed in the National Register					2d	
3	Number of conservation easements modified, transferred, rele	eased, extinguished, o	or te	rminated by the o	organiz	zation	during the tax
	year						
4	Number of states where property subject to conservation eas	_					
5	Does the organization have a written policy regarding the per						
	violations, and enforcement of the conservation easements it						Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, l	handling of violations,	, and	l enforcing conse	rvatioi	n ease	ments during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and	enfo	orcina conservatio	on eas	ement	ts during the vear
		,		J			<b>5</b> ,
8	Does each conservation easement reported on line 2(d) above	e satisfy the requireme	ents	of section 170(h)	(4)(B)(	i)	
	and section 170(h)(4)(B)(ii)?						Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its re	venu	ue and expense st	tateme	ent and	d
	balance sheet, and include, if applicable, the text of the footn	ote to the organization	n's f	inancial statemen	its tha	t desc	ribes the
Da	organization's accounting for conservation easements.	Aut Historiaal T		Oth	- · · · ·	:1	w Accete
Pai	t III Organizations Maintaining Collections of		rea	sures, or Oth	er Si	ımııaı	r Assets.
	Complete if the organization answered "Yes" on Form						
1a	If the organization elected, as permitted under FASB ASC 956	•					
	of art, historical treasures, or other similar assets held for pub	•				ce of p	DUDIIC
	service, provide in Part XIII the text of the footnote to its finan						
b	If the organization elected, as permitted under FASB ASC 956	•					
	art, historical treasures, or other similar assets held for public	exhibition, education	, or	research in furthe	rance	of pub	olic service,
	provide the following amounts relating to these items:						•
	(i) Revenue included on Form 990, Part VIII, line 1						
•							\$
2	If the organization received or held works of art, historical treat				gain, p	rovide	)
_	the following amounts required to be reported under FASB AS						Φ
a	Revenue included on Form 990, Part VIII, line 1						Φ
D	Assets included in Form 990, Part X					;	φ

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

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022

e Other

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

Schedule D (Form 990) 2022 NRDC ACTION FUND	INC.		13-3976062	Page 3
Part VII Investments - Other Securities.				<u> </u>
Complete if the organization answered "Yes"		T		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market	value
(1) Financial derivatives				
(2) Closely held equity interests				
(3) Other				
(A)				
(B)				
(C) (D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.		
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market	value
<u>(1)</u>				
(2)				
(3)				
(4)				
(5)				
(6)				
<u>(7)</u>				
(8)				
(9) Total (Col. /h) must equal Form 000. Part V. col. (P.) line 12.)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)  Part IX Other Assets.				
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.		
-	Description		(b) Book	value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line  Part X Other Liabilities.	15.)			
Complete if the organization answered "Yes"	on Form 000 Dort IV line	11a or 11f Son Form 000 Dort V line	25	
. (a) Description of liability	on Form 990, Fait IV, line	The or Th. See Form 990, Part X, line 2	(b) Book	value
(1) Federal income taxes			(D) Book	<del>value</del>
(2) DUE TO RELATED PARTIES				76,935.
(3)				,
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.)			76,935.

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 .... X

Schedule D (Form 990) 2022

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

	Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.		
1			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1.1		
a	Net unrealized gains (losses) on investments			
b	Donated services and use of facilities			
C	Recoveries of prior year grants	1 4.1		
d	Other (Describe in Part XIII.)		0.0	
e	Add lines 2a through 2d			
3	Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
4	Investment expenses not included on Form 990, Part VIII, line 7b	42		
a	Other (Describe in Part XIII.)			
b			4c	
5	Add lines <b>4a</b> and <b>4b</b> Total revenue. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990. Part I, line 12			
	rt XII   Reconciliation of Expenses per Audited Financial St	atements With Exper	nses per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, li	=		
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:		•	
– a	Donated services and use of facilities	2a		
b	Prior year adjustments			
c	Other losses			
d	Other (Describe in Part XIII.)			
e	Add lines 2a through 2d		2e	
3	Subtract line <b>2e</b> from line <b>1</b>			
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	4a		
b	Other (Describe in Part XIII.)			
С	Add lines <b>4a</b> and <b>4b</b>		4c	
5				
	rotal expenses. Add lines 3 and 40. (This must equal Form 990, Part I. line I	8.)	5	
Pa	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1 rt XIII Supplemental Information.	8.)	5	
Pa	rt XIII Supplemental Information.  ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and			l,
<b>Pa</b> l Prov	rt XIII Supplemental Information.	4; Part IV, lines 1b and 2b;		l,
<b>Pa</b> l Prov	rt XIII Supplemental Information.  ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	4; Part IV, lines 1b and 2b;		l,
<b>Pa</b> l Prov	rt XIII Supplemental Information.  ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	4; Part IV, lines 1b and 2b;		I,
Prov lines	rt XIII Supplemental Information.  ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	4; Part IV, lines 1b and 2b;		I,
Prov lines	rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a	4; Part IV, lines 1b and 2b;		l,
Prov lines	rt XIII Supplemental Information. Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a	4; Part IV, lines 1b and 2b; ny additional information.		l,
Prov lines	rt XIII Supplemental Information.  ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a E.X., LINE 2:	4; Part IV, lines 1b and 2b; ny additional information.		l,
Part NRDC	rt XIII Supplemental Information.  ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a E.X., LINE 2:	4; Part IV, lines 1b and 2b; ny additional information.		l,
Part NRDC	rt XIII Supplemental Information.  Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a Ex., LINE 2:  Ex. ACTION FUND IS INCLUDED WITHIN THE CONSOLIDATED FINANCIA  ETS PARENT, THE NATURAL RESOURCES DEFENSE COUNCIL, INC. TO	4; Part IV, lines 1b and 2b; ny additional information.  AL STATEMENTS  HE BELOW		l,
Part NRDC	rt XIII Supplemental Information.  Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a Part XII, LINE 2:  E. ACTION FUND IS INCLUDED WITHIN THE CONSOLIDATED FINANCIA	4; Part IV, lines 1b and 2b; ny additional information.  AL STATEMENTS  HE BELOW		Ι,
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PARTINATION NRDC	rt XIII Supplemental Information.  Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a Ex., LINE 2:  Ex. ACTION FUND IS INCLUDED WITHIN THE CONSOLIDATED FINANCIANTS PARENT, THE NATURAL RESOURCES DEFENSE COUNCIL, INC. THE 48 FOOTNOTE IS REPRODUCED FROM THE CONSOLIDATED FINANCIANTS FOLLOWS GUIDANCE THAT CLARIFIES THE ACCOUNTING FOR UNCESTED FOR THE CONSOLIDATED FINANCIANTS.	4; Part IV, lines 1b and 2b; ny additional information.  AL STATEMENTS  HE BELOW  A STATEMENTS.		1,
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PARTINATION NRDO POST PROVIDENCE	THE XIII Supplemental Information.  Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a 2d and 4b; and Part XIII, lines 1a and 2d and 4b; and 9; Part III, lines 1a and 2d and 4b; and 9; Part III, lines 1a and 2d and 4b; and 9; Part III, lines 1a and 2d and 4b; and 9; Part III, lines 1a and 2d and 4b; and 9; Part III, lines 1a and 2d and 4b; and 9; Part III, lines 1a and 2d and 4b. Also complete this part to provide a 2d and 4b. Also complete thi	4; Part IV, lines 1b and 2b; ny additional information.  AL STATEMENTS  HE BELOW  C STATEMENTS.  RETAINTY IN TAX  LUDING ISSUES  THIS GUIDANCE  CAN ONLY BE  DESITION IS		1,
PARTINATION NRDO POST PROVIDENCE	The composition of the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a complete th	4; Part IV, lines 1b and 2b; ny additional information.  AL STATEMENTS  HE BELOW  C STATEMENTS.  RETAINTY IN TAX  LUDING ISSUES  THIS GUIDANCE  CAN ONLY BE  DESITION IS		I,

# SCHEDULE G (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization						Employer identification number			
	ON FUND INC.					13-397606			
Part I Fundraising Activities required to complete this pa	<ul> <li>Complete if the organization answrt.</li> </ul>	vered "Y	es" or	n Form 990, Part IV, li	ine 17	7. Form 990-EZ	filers are not		
1 Indicate whether the organization rai  a X Mail solicitations  b X Internet and email solicitation  c X Phone solicitations  d X In-person solicitations  2 a Did the organization have a written key employees listed in Form 990, F  b If "Yes," list the 10 highest paid indicompensated at least \$5,000 by the	sed funds through any of the follow  e X Solicit  s f Solicit  g Special  or oral agreement with any individual  Part VII) or entity in connection with inviduals or entities (fundraisers) purs	tation of tation of al fundra al (includ professi	non-g gover aising ling of onal fu	overnment grants nment grants events fficers, directors, trus undraising services?		X Yes			
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or cor contrib	ustody itrol of	(iv) Gross receipts from activity	tò (o f	Amount paid r retained by) iundraiser ed in col. (i)	(vi) Amount paid to (or retained by) organization		
O'BRIEN GARRETT - 1133 19TH		Yes	No						
ST NW, WASHINGTON, DC 20036	FUNDRAISING CONSULTANT		Х	750,724.		60,000.	690,724.		
M&R STRATEGIC SERVICES - 1101	DIGITAL ADVOCACY &								
CT AVE, WASHINGTON, DC 20036	FUNDRAISING CONSULTANT		Х	692,804.		258,286.	434,518.		
Total				1,443,528.		318,286.	1,125,242.		
3 List all states in which the organization or licensing.	on is registered or licensed to solicit	t contrib	utions	or has been notified	it is e	exempt from reg	gistration		
AL,AK,AR,AZ,CA,CO,CT,DC,DE,FL,G	A, HI, IA, ID, IL, IN, LA, KS, KY,	ME, MD,	MA,M	I,MN,MS					
MO,MT,NE,NH,NV,NJ,NM,NY,NC,ND,C	OH,OK,OR,PA,RI,SC,SD,TN,TX,	UT,VA,	VT,W	A,WV,WI					
WY									

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Schedule G (Form 990) 2022

			(a) Event #1	(b) Event #2	(c) Other events	(al) Tatal const-
						(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	col. <b>(c)</b> )
Revenue						
5	1	Gross receipts				
	2	Less: Contributions				
1	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
	5	Noncash prizes				
201120	6	Rent/facility costs				
DII GOL EADGI 19G9	7	Food and beverages				
_ [	8	Entertainment				
1	9	Other direct expenses				
1	10	Direct expense summary. Add lines 4 through	n 9 in column (d)			
_	11	Net income summary. Subtract line 10 from li				
'aı	rt II		answered "Yes" on Form	n 990, Part IV, line 19, or	reported more than	
_		\$15,000 on Form 990-EZ, line 6a.	T		T	T
al ne			(a) Bingo	<b>(b)</b> Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (d
Hevenue	1	Gross revenue				
2	2	Cash prizes				
חוופרו באלפו ואפא	3	Noncash prizes				
5	,					
	4	Rent/facility costs				
Z L						
	5	Other direct expenses	Yes %	Yes %	Yes %	
1	5			Yes%  No	Yes %	
	<u>5</u>	Other direct expenses	Yes %		No No	
	5 6 7	Other direct expenses  Volunteer labor	Yes% No  1 5 in column (d)	No No	No No	
	5 6 7 8	Other direct expenses  Volunteer labor  Direct expense summary. Add lines 2 through  Net gaming income summary. Subtract line 7	Yes%  No  1 5 in column (d)	No	No No	
9	5 6 7 8 Ent	Other direct expenses  Volunteer labor  Direct expense summary. Add lines 2 through  Net gaming income summary. Subtract line 7  ter the state(s) in which the organization condu	Yes%  No  1 5 in column (d)  2 from line 1, column (d)  3 ucts gaming activities:	No	No	
) a	5 6 7 8 Ent	Other direct expenses  Volunteer labor  Direct expense summary. Add lines 2 through  Net gaming income summary. Subtract line 7	Yes%  No  15 in column (d)  7 from line 1, column (d)  acts gaming activities:ctivities in each of these	No States?	No	
) a	5 6 7 8 Ent	Other direct expenses  Volunteer labor  Direct expense summary. Add lines 2 through  Net gaming income summary. Subtract line 7  ter the state(s) in which the organization conducte organization licensed to conduct gaming and	Yes%  No  15 in column (d)  7 from line 1, column (d)  acts gaming activities:ctivities in each of these	No States?	No	
a b	5 6 7 8 Ent lis ti	Other direct expenses  Volunteer labor  Direct expense summary. Add lines 2 through  Net gaming income summary. Subtract line 7  ter the state(s) in which the organization conducte organization licensed to conduct gaming and	Yes%  No  1 5 in column (d)	states?	No No	Yes N
a b	5 6 7 8 Ent lis ti	Other direct expenses  Volunteer labor  Direct expense summary. Add lines 2 through  Net gaming income summary. Subtract line 7  ter the state(s) in which the organization conduct organization licensed to conduct gaming action, "explain:  ere any of the organization's gaming licenses re-	Yes%  No  1 5 in column (d)	states?	No No	Yes N

Schedule G (Form 990) 2022 NRDC ACTION FUND INC.	13-397	76062	Page <b>3</b>
11 Does the organization conduct gaming activities with nonmembers?	[	Yes	☐ No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity form			
to administer charitable gaming?	[	Yes	☐ No
13 Indicate the percentage of gaming activity conducted in:			
a The organization's facility		13a	%
<b>b</b> An outside facility	<u></u>	13b	%
14 Enter the name and address of the person who prepares the organization's gaming/special events books and	records:		
Name			
Address			
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue	?[	Yes	☐ No
<b>b</b> If "Yes," enter the amount of gaming revenue received by the organization \$ and t	he amount		
of gaming revenue retained by the third party \$	no amount		
c If "Yes," enter name and address of the third party:			
on 150, Shiel hand address of the time party.			
Name			
Address			
<b>16</b> Gaming manager information:			
Name			
Gaming manager compensation \$			
Description of any transport deal			
Description of services provided			
Director/officer Employee Independent contractor			
17 Mandatory distributions:			
a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
retain the state gaming license?	[	Yes	☐ No
<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations or s	pent 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) a	nd (v); and Part I	II, lines 9,	9b, 10b,
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
PART I, LINE 2B, COLUMN (V):			
THE PROFESSIONAL FUNDRAISERS DISCLOSED ON NRDC ACTION FUND'S FORM 990			
PROVIDE A SUITE OF CONSULTING AND FUNDRAISING SERVICES THAT ENHANCE THE			
ODGANIZATION G ADILITMY TO ADVIANCE ITEG OUR TAY DYDNOT MIGGION AG MILL AG			
ORGANIZATION'S ABILITY TO ADVANCE ITS OWN TAX-EXEMPT MISSION, AS WELL AS			
THAT OF THE NATURAL RESOURCES DEFENSE COUNCIL. NRDC ACTION FUND DOES NOT			
THAT OF THE MATURAL RESOURCES DEFENSE COUNCIL, NRDC ACTION FOND BOES NOT			
SPECIFICALLY TRACK THE FUNDRAISING DOLLARS EACH FUNDRAISER GENERATED AND			
SO DETERMINING AN ACCURATE ALLOCATION OF THESE RECEIPTS TO ALIGN WITH THE			
990 REPORTING REQUIREMENTS IS DIFFICULT. NEVERTHELESS, THE NRDC ACTION			
PIND DOES DOITHING V DEVIEW THE PINDDATSING DELATIONSHIPS TO ENGINE THAT			

Schedule G (Form 990)

### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

Attach to Form 990.

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

2022
Open to Public

Inspection

Name of the organization  NRDC ACTION FU	JND INC.						Employer	13-3976062
Part I General Information on Grants ar	nd Assistance							
Does the organization maintain records to criteria used to award the grants or assis     Describe in Part IV the organization's pro  Part II Grants and Other Assistance to I	tance? cedures for monit	oring the use of grant	funds in the United	States.				X Yes No
recipient that received more than \$					anization answered h	res on Form 990, Pan	ı ıv, ıırıe ∠ı,	for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance		Purpose of grant or assistance
AMERICA VOTES 1401 NEW YORK AVE., NW #720 WASHINGTON, DC 20005	26-4568349	501(C)(4)	7,425.	0.			ENVIRON.	ADVOCACY
BICYCLE COLORADO 1525 MARKET STREET, STE 100 DENVER, CO 80202	84-1201078	501(C)(3)	23,000.	0.			ENVIRON.	ADVOCACY
CLEAN AIR CALIFORNIA C/O ELLI ABDOLI, TREASURER SAN RAFAEL, CA 94901	87-4292770	501(C)(4)	40,000.	0.			ENVIRON.	ADVOCACY
COMMUNITY PARTNERS 1000 NORTH ALAMEDA STREET, STE 240 LOS ANGELES, CA 90012	95-4302067	501(C)(3)	25,000.	0.			ENVIRON.	ADVOCACY
CONSERVATIVES FOR A CLEAN ENERGY FUTURE - 106 W. ALLEGAN ST., STE 200 - LANSING, MI 48933	82-5201195	501(C)(4)	50,000.	0.			ENVIRON.	ADVOCACY
DIVISION OF HOMELAND MINISTRIES OF THE CHRISTIAN CHURCH, INC 1099 N. MERIDIAN STREET, SUITE 700 - INDIANAPOLIS, IN 46204	35-1290911	501(C)(3)	10,000.	0.			ENVIRON	ADVOCACY
2 Enter total number of section 501(c)(3) ar	nd government org	ganizations listed in th	o lino 1 tablo	- •				10
3 Enter total number of other organizations	listed in the line	1 table						10

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Schedule I (Form 990) 2022

Schedule I (Form 990) NRDC ACTION FO							13-3976062	Page
Part II Continuation of Grants and Other	Assistance to Doi	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	t II.)	T	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance	t
FARM SCHOOL NYC 505 EIGHTH AVE., STE 2100 NEW YORK, NY 10018	84-2867079	501(C)(3)	10,000.	0.			ENVIRON, ADVOCACY	
FRACK ACTION FUND PO BOX 1443 HIGHLAND, NY 12528	45-2989965	501(C)(3)	25,000.	0.			ENVIRON. ADVOCACY	
GIVEGREEN UNITED ACTION 740 15TH ST., NW, STE 700 WASHINGTON, DC 20005	87-4411631		500,000.	0.			ENVIRON. ADVOCACY	
JB INAUGURATION COMMITTEE 2023 C/O MICHAEL OLLEN, 70 W MADISON, 3 CHICAGO, IL 60602			10,000.	0.			ENVIRON. ADVOCACY	
LEAGUE OF CONSERVATION VOTERS 740 15TH ST., NW, STE 700 WASHINGTON, DC 20005	52-1733698		1,017,500.	0.			ENVIRON. ADVOCACY	
MULTIPLIER 548 MARKET STREET, PMB 81178 SAN FRANCISCO, CA 94104-5401	91-2166435	501(C)(3)	70,000.	0.			ENVIRON. ADVOCACY	
NATURAL RESOURCES DEFENSE COUNCIL 40 WEST 20TH STREET, FL 11 NEW YORK, NY 10011	13-2654926	501(C)(3)	140,431.	0.			ENVIRON. ADVOCACY	
NRDC ACTION VOTES 40 WEST 20TH STREET, FL 11 NEW YORK, NY 10011	84-4788745	527	2,080,000.	0.			ENVIRON. ADVOCACY	
PA ALLIANCE ACTION 121S BROAD ST., SUITE 400 PHILADELPHIA, PA 19107	82-3537729	501(C)(4)	25,000.	0.			ENVIRON. ADVOCACY	

Schedule I (Form 990)

Schedule I (Form 990) NRDC ACTION FU	JND INC.						13-3976062 Page
Part II Continuation of Grants and Other A	Assistance to Do	mestic Organizations	and Domestic Go	overnments (Scho	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PESTICIDE ACTION NETWORK NORTH AMERICA - 2029 UNIVERSITY AVE., SUITE 200 - BERKELEY, CA 94704-1015	94-2949686	501(C)(3)	7,500.	0.			ENVIRON. ADVOCACY
SHAPIRO-DAVIS INAUGURATION 1617 JOHN F KENNEDY BLVD, SUITE 16	5						
PHILADELPHIA, PA 19103	92-1042075	501(C)(4)	10,000.	0.			ENVIRON. ADVOCACY
STATE DEMOCRACY ACTION FUND 1225 EYE ST NW SUITE 1250 WASHINGTON, DC 20005	81-4100201	501(C)(4)	25,000.	0.			ENVIRON. ADVOCACY
WASHINGTON, DC 20003	01 4100201	301(0)(4)	23,000.	<u> </u>			ENVIRON. ADVOCACI
SUSTAINABLE MARKETS FOUNDATION 45 WEST 36TH STREET, 6TH FLOOR NEW YORK, NY 10018	13-4188834	501(C)(3)	25,000.	0.			ENVIRON. ADVOCACY
THE PARTNERSHIP PROJECT, INC. PO BOX 65826							
WASHINGTON, DC 20035	52-2192070	501(C)(3)	45,000.	0.			ENVIRON. ADVOCACY
							<u> </u>

13-3976062 NRDC ACTION FUND INC. Schedule I (Form 990) 2022 Page 2 Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III Part III can be duplicated if additional space is needed. (e) Method of valuation (book, FMV, appraisal, other) (a) Type of grant or assistance (b) Number of (c) Amount of (d) Amount of non-(f) Description of noncash assistance recipients cash grant cash assistance Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. PART I, LINE 2: IN FISCAL YEAR 2023. THE NRDC ACTION FUND INC. PROVIDED GRANTS TO SUPPORT ENVIRONMENTAL INITIATIVES. NRDC ACTION FUND INC. ONLY PROVIDES FUNDING TO ORGANIZATIONS THAT HAVE AN ENVIRONMENTAL MISSION THAT ALIGNS WITH THE ORGANIZATION'S OWN MISSION. GRANTEES ARE EXPECTED TO PROVIDE THE ORGANIZATION WITH PERIODIC STATUS REPORTS ABOUT THEIR ENVIRONMENTAL

NRDC ACTION FUND ISSUED GRANTS TO TWO SECTION 527 POLITICAL ORGANIZATIONS:

PROJECTS.

Schedule I (Form 990)

# **SCHEDULE J** (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

Employer identification number NRDC ACTION FUND INC. 13-3976062

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
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		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			v
	The organization?	6a		X
b	Any related organization?	6b		
_	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	_		v
	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			Х
•	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Λ
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	a		
	Bennauous secuou 53 4958-NC17			

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

Schedule J (Form 990) 2022

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

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

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

		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) MANISH BAPNA	(i)	0.	0.	0.	0.	0.	0.	0.
PRESIDENT/CEO	(ii)	667,534.	0.	21,078.	23,427.	27,647.	739,686.	0.
(2) MITCHELL BERNARD	(i)	0.	0.	0.	0.	0.	0.	0.
CHIEF COUNSEL	(ii)	401,577.	19,792.	15,553.	32,831.	20,167.	489,920.	0.
(3) VERONICA FOO	(i)	0.	0.	0.	0.	0.	0.	0.
CFO AND TREASURER	(ii)	325,782.	22,800.	6,951.	29,471.	30,114.	415,118.	0,
(4) KEVIN CURTIS	(i)	0.	0.	0.	0.	0.	0.	0.
EXECUTIVE DIRECTOR	(ii)	252,898.	5,440.	5,804.	28,580.	30,075.	322,797.	0.
(5) DANIEL KIM - CHIEF OPERATING	(i)	0.	0.	0.	0.	0.	0.	0.
OFFICER (03/2022 TO 11/2022)	(ii)	266,698.	0.	12,765.	7,108.	18,099.	304,670.	0.
(6) EMILY GRAY	(i)	0.	0.	0.	0.	0.	0.	0.
ASSOCIATE DIRECTOR, MAJOR GIFTS	(ii)	165,402.	0.	1,795.	19,798.	18,707.	205,702.	0.
(7) TIMOTHY MEINKE	(i)	0.	0.	0.	0.	0.	0.	0.
DIRECTOR OF DEVELOPMENT	(ii)	165,879.	0.	2,667.	15,211.	10,769.	194,526.	0.
(8) DENIS DISON	(i)	0.	0.	0.	0.	0.	0.	0.
COMMUNICATIONS DIRECTOR	(ii)	148,345.	0.	3,505.	17,035.	10,887.	179,772.	0.
(9) ALEXANDRA SHAPIRO	(i)	0.	0.	0.	0.	0.	0.	0.
DIRECTOR OF PAC & CANDIDATE SVS	(ii)	137,985.	11,017.	1,253.	12,292.	10,887.	173,434.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

#### Part III Supplemental Information

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

FORM 990, PART VII & SCHEDULE J, PART I

THE FOLLOWING INDIVIDUALS REPORTED ON NRDC ACTION FUND'S FORM 990.

MITCHELL BERNARD, VERONICA FOO, MANISH BAPNA, DANIEL KIM, AND EMILY

GRAY, RECEIVE THEIR COMPENSATION FROM THE PARENT ORGANIZATION, NATURAL

RESOURCES DEFENSE COUNCIL, INC. (NRDC). ACCORDINGLY, ALL COMPENSATION

IS BEING REPORTED ON NRDC ACTION FUND'S FORM 990 AS RELATED

ORGANIZATION COMPENSATION. HOWEVER, A PORTION OF EACH OFFICER'S

COMPENSATION IS REIMBURSED BY NRDC ACTION FUND TO NRDC BASED ON

SERVICES RENDERED TO NRDC ACTION FUND. IN THE INTEREST OF CLARITY, NRDC

ACTION FUND IS DISCLOSING THE FOLLOWING SALARY AND BENEFITS AMOUNTS AS

HAVING BEEN REIMBURSED BY NRDC ACTION FUND TO NRDC FOR THESE SERVICES:

MITCHELL BERNARD

SALARY - \$1,209

BENEFITS - \$411

VERONICA FOO

SALARY - \$24,671

BENEFITS - \$8,266

#### Part III Supplemental Information

Schedule J (Form 990) 2022

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.

MANISH BAPNA

SALARY - \$16,154

BENEFITS - \$5,383

DANIEL KIM

SALARY - \$330

BENEFITS - \$109

EMILY GRAY

SALARY - \$6,302

BENEFITS - \$2,107

100% OF THE FOLLOWING INDIVIDUALS' TIME (OFFICER KEVIN CURTIS AND THE

TOP 3 HIGHLY COMPENSATED EMPLOYEES. DENIS DISON. TIMOTHY MEINKE &

ALEXANDRA SHAPIRO) ARE SPENT PROVIDING SERVICES TO THE NRDC ACTION

FUND. EACH OF THESE INDIVIDUALS RECEIVES THEIR W-2 FROM NRDC AND THEIR

RESPECTIVE COMPENSATION (DISCLOSED IN PART VII OF THE FORM 990) IS

REPORTED IN COLUMN E ACCORDINGLY. THEIR COMPENSATION IS REIMBURSED BY

Schedule J (Form 990) 2022

Page 3

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
NRDC ACTION FUND TO NRDC.
NRDC ACTION FUND REIMBURSES NRDC FOR THE SERVICES OF OTHER NRDC
EMPLOYEES. THOSE INDIVIDUALS DO NOT MEET THE CRITERIA OF AN OFFICER,
KEY EMPLOYEE OR HIGHLY COMPENSATED EMPLOYEE OF THE ACTION FUND AND
ACCORDINGLY ARE NOT DISCLOSED IN PART VII OR SCHEDULE J OF THE 990.

# **SCHEDULE M** (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

NRDC ACTION FUND INC.

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

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

Employer identification number

13-3976062

Par	t I Types of Property							
		(a) Check if applicable	(b) Number of contributions or	(c) Noncash contribution amounts reported on	(d) Method of de noncash contribu	etermin	_	 s
			items contributed	Form 990, Part VIII, line 1g				
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	Х	6	202,095.	FMV			
10	Securities - Closely held stock			,				
11	Securities - Partnership, LLC, or							
••								
12	•							
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								
25	<b>.</b> .							
26								
27	Other (							
28								
29	·	ation during	the tax vear for co	ontributions				
		=	•					
	Tel Willer and organization completed from 520	50, r art <b>v</b> , D	onee mean	omone			Ves	No
30a	During the year did the organization receive by	, contributio	n any property rep	orted in Part I lines 1 throug	h 28 that it		100	
oou								
						200		x
<b>L</b>						Sua		
	,	valiou that "a	auiros tha raviour	of any populational contribution	ions?	24	y	
						31	Λ	
32a			•			32a	х	
h						<u></u>		
	•	olumn (c) for	r a type of property	for which column (a) is show	sked			
33		olullii (C) 101	a type of property	non willion column (a) is chec	oneu,			
		the Instruct	tions for Form 000	<u> </u>	Cabadula M	/ (Ear-	n 000)	2022
22 23 24 25 26 27 28 29 30a b 31 32a	Taxidermy Historical artifacts Scientific specimens Archeological artifacts Other (	y contribution the initial cooling that report related or related or column (c) for	n any property rep ntribution, and whi equires the review of ganizations to solic	orted in Part I, lines 1 through the isn't required to be used to be used to be used to be used to be any nonstandard contribution, process, or sell noncash or for which column (a) is check	ions?	30a 31 32a		х

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
SCHEDULE M, LINE 32A:
TO THE EXTENT THAT THE ORGANIZATION RECEIVES CONTRIBUTIONS OF STOCK,
THE ORGANIZATION USES ITS INVESTMENT BROKER TO CONVERT THOSE STOCKS
INTO CASH.

232142 09-09-22

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

# Supplemental Information to Form 990 or 990-EZ

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

Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

**Employer identification number** 

NRDC ACTION FUND INC. 13-3976062 PART III LINE 1 - ORGANIZATION'S MISSION THE NRDC ACTION FUND'S MISSION IS TO BUILD POLITICAL SUPPORT IN THE UNITED STATES FOR PROTECTING THE PLANET AND ITS PEOPLE. WE WORK TO FURTHER THE POLICY GOALS OF THE NATURAL RESOURCES DEFENSE COUNCIL, DURING THE FISCAL YEAR THAT ENDED JUNE 30, 2023, THE NRDC ACTION FUND WORKED TO EXPAND AND MOBILIZE OUR INFLUENTIAL CONSTITUENCIES, EXPERTS COMMUNITY LEADERS, AND OTHERS TO CHAMPION CLEAN AIR AND WATER PUBLIC HEALTH, BIODIVERSITY, AND A STABLE CLIMATE. WE LOBBIED DECISION MAKERS ON THE FEDERAL AND STATE LEVELS TO PROTECT AND STRENGTHEN ENVIRONMENTAL POLICIES. WE HELD ELECTED OFFICIALS ACCOUNTABLE BY EDUCATING CONSTITUENTS WHEN THEIR CONGRESSIONAL REPRESENTATIVES VOTED FOR OR AGAINST ENVIRONMENTAL PRIORITIES AND EXPOSING THOSE WHO SIDED WITH POLLUTERS RATHER THAN THE PUBLIC GOOD. WE SUPPORTED POLITICAL CANDIDATES WHO STOOD UP FOR THE ENVIRONMENT AND EQUITABLE CLIMATE ACTION AND WORKED TO HELP ELECT CLIMATE CHAMPIONS TO CONGRESS. FORM 990, PART VI, SECTION A, LINE 6: NRDC ACTION FUND'S SOLE INSTITUTIONAL MEMBER IS ITS PARENT ORGANIZATION NATURAL RESOURCES DEFENSE COUNCIL, INC ("NRDC"). FORM 990, PART VI, SECTION A, LINE 7A: AS THE SOLE INSTITUTIONAL MEMBER, NRDC ANNUALLY APPOINTS EACH CLASS OF THE NRDC ACTION FUND'S BOARD OF DIRECTORS. THIS POWER IS RESERVED SOLELY TO NRDC IN THE NRDC ACTION FUND'S ORGANIZATIONAL DOCUMENTS. ONE MEMBER OF THE BOARD IS ELECTED BY THE NRDC ACTION FUND MEMBERS.

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

Schedule O (Form 990) 2022

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

Name of the organization **Employer identification number** NRDC ACTION FUND INC. 13-3976062 FORM 990, PART VI, SECTION A, LINE 7B: SEE FORM 990, PART VI, SECTION A, LINE 7A FORM 990, PART VI, SECTION B, LINE 11B: THE FORM 990 WAS PREPARED BY A NATIONALLY RECOGNIZED ACCOUNTING FIRM IN CONJUNCTION WITH THE ORGANIZATION'S SENIOR MANAGEMENT. A COPY OF THE DRAFT FORM 990 WAS PRESENTED TO THE FINANCE & AUDIT COMMITTEE OF THE BOARD OF DIRECTORS FOR DISCUSSION AND COMMENT. ONCE THE AUDIT COMMITTEE APPROVED THE FORM 990 FOR FILING. A COPY WAS CIRCULATED TO THE FULL BOARD OF DIRECTORS. EACH BOARD MEMBER WAS PROVIDED OPPORTUNITY TO COMMENT ON THE INFORMATION CONTAINED IN THE FORM 990 PRIOR TO ITS FILING WITH THE INTERNAL REVENUE SERVICE. FORM 990, PART VI, SECTION B, LINE 12C: CONFLICT OF INTEREST POLICY MONITORING & ENFORCEMENT EACH OFFICER DIRECTOR AND KEY EMPLOYEE IS REQUIRED TO ANNUALLY DISCLOSE ANY CONFLICTS OF INTEREST THAT ARISE BY VIRTUE OF THEIR RELATIONSHIP TO THE ORGANIZATION, BOARD SERVICE, OR POSITION WITH EITHER NRDC ACTION FUND OR NRDC. NRDC ACTION FUND MONITORS COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICY THROUGH AN ANNUAL QUESTIONNAIRE/DISCLOSURE STATEMENT THAT IS DISTRIBUTED TO THESE INDIVIDUALS. POTENTIAL CONFLICTS ARE INVESTIGATED IMMEDIATELY. FORM 990, PART VI, SECTION B, LINE 15: PROCESS TO DETERMINE COMPENSATION NRDC ACTION FUND DOES NOT DIRECTLY COMPENSATE ANY OFFICERS, DIRECTORS AND/OR EMPLOYEES. ALL COMPENSATION IS PAID BY THE PARENT ORGANIZATION,

Schedule O (Form 990) 2022 Page 2 **Employer identification number** Name of the organization 13-3976062 NRDC ACTION FUND INC. NATURAL RESOURCES DEFENSE COUNCIL, AND IS REIMBURSED BY NRDC ACTION FUND TO NRDC. THE PROCESSES USED FOR DETERMINING COMPENSATION AS PAID BY THE PARENT ENTITY ARE DESCRIBED ON THAT ORGANIZATION'S FORM 990. FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC ND,OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,WI FORM 990, PART VI, SECTION C, LINE 19: AVAILABILITY OF DOCUMENTS NRDC ACTION FUND MAKES ITS FORM 990 AVAILABLE TO THE PUBLIC BY RETAINING A COPY AT ITS PLACE OF BUSINESS. THE ACTION FUND ALSO MAKES THE 990 AVAILABLE ON THE ACTION FUND WEBSITE AT WWW.NRDCACTIONFUND.ORG (AND ON WWW.GUIDESTAR.ORG). THE ORGANIZATION'S FINANCIAL STATEMENTS, GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT ORDINARILY MADE AVAILABLE TO THE PUBLIC, BUT, IF REQUESTED, WILL BE PROVIDED AT MANAGEMENT'S DISCRETION. FORM 990, PART XII, LINE 2C: THE NRDC ACTION FUND DOES NOT RECEIVE STANDALONE FINANCIAL STATEMENTS; FOR AUDIT PURPOSES ITS OPERATIONS ARE CONSOLIDATED WITH AN AFFILIATED ORGANIZATION, THE NATURAL RESOURCES DEFENSE COUNCIL, INC.

#### **SCHEDULE R** (Form 990)

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. OMB No. 1545-0047

Open to Public Inspection

Name of the organization NRDC ACTION FUND INC	E	Employer identification number 13-3976062						
Part I Identification of Disregarded Entities. Comple	ete if the organization answered "Y	es" on Form 990, Part IV, line 3	3.					
(a)	(b)	(c)	(d)	(e)			(f)	
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state of foreign country)	or Total inco	ome End-of-yea	r assets		Direct controlling entity	
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ations. Complete if the organization	on answered "Yes" on Form 990	D, Part IV, line 34,	because it had one	or more	e related tax-exer	npt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity		(g) Section 512(b)(1 controlled entity?	
		,,		501(c)(3))			Yes	No
NATURAL RESOURCES DEFENSE COUNCIL, INC - 13-2654926, 40 WEST 20TH STREET, NEW YORK,								
NY 10011	ENVIRONMENTAL	NEW YORK	501(C)(3)	LINE 7	N/A			Х
NRDC ACTION FUND INC., PAC - 32-0413564								
40 WEST 20TH STREET NEW YORK, NY 10011	 ENVIRONMENTAL	NEW YORK	527	N/A	NRDC	ΔE	х	
NRDC ACTION VOTES - 84-4788745	ENVIRONMENTAL	NEW TORK	527	N/A	INKDC	Ar	A	+
40 WEST 20TH STREET	7							
NEW YORK, NY 10011	ENVIRONMENTAL	NEW YORK	527	N/A	NRDC	AF	х	

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

Schedule R (Form 990) 2022

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	Legal domicile (state or foreign country)	(d) (e) (f) (g) (h) (i)  Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) (f) (g) (h) (i)  Share of total income end-of-year assets (h) Disproportionate end-of-year assets (h) Disproportionate allocations?  Yes No		(j) General emanaging partner	(k) Percentage ownership		

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	ent	tion b)(13) rolled iity?
NRDC INDIA PRIVATE LIMITED A-24/9 MOHAN CO-OP., INDUSTRIAL EST., MATHURA									
BADAPUR, NEW DELHI, INDIA 110044	PUBLIC HEALTH	INDIA	NRDC	C CORP	0.	0.	.00%		X

Schedule R (Form 990) 2022 NRDC ACTION FUND INC. 13-3976062 Page 3

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х
	Gift, grant, or capital contribution to related organization(s)	1b	Х	
	Gift, grant, or capital contribution from related organization(s)	1c	Х	
	Loans or loan guarantees to or for related organization(s)	1d		Х
	Loans or loan guarantees by related organization(s)	1e		Х
f	Dividends from related organization(s)	1f		Х
	Sale of assets to related organization(s)	1g		Х
	Purchase of assets from related organization(s)	1h		Х
i	Exchange of assets with related organization(s)	1i		Х
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		Х
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		Х
-1	Performance of services or membership or fundraising solicitations for related organization(s)	11		Х
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		Х
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Х	
	Sharing of paid employees with related organization(s)	10	Х	
р	Reimbursement paid to related organization(s) for expenses	1p	Х	
	Reimbursement paid by related organization(s) for expenses	1q		Х
r	Other transfer of cash or property to related organization(s)	1r		Х
s	Other transfer of cash or property from related organization(s)	1s	Х	
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) NRDC ACTION VOTES	В	2,080,000.	COST
(2) NATURAL RESOURCES DEFENSE COUNCIL, INC.	В	140,431.	COST
(3) NATURAL RESOURCES DEFENSE COUNCIL, INC.	С	125,000.	COST
(4) NATURAL RESOURCES DEFENSE COUNCIL, INC.	N	524,838.	COST
(5) NATURAL RESOURCES DEFENSE COUNCIL, INC.	0	3,076,858.	COST
(6) NATURAL RESOURCES DEFENSE COUNCIL, INC.	P	1,353,455.	COST

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Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2) (c) (d) Method of determining Transaction Amount involved Name of other organization type (a-s) amount involved (7) NATURAL RESOURCES DEFENSE COUNCIL, INC. 1,500,000.cosT (8) (10) (11) \_\_(12) (13) (14) (15) (16) (17) (18) (19) (20) (21) (22) (23)

(24)

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Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.?  Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocation Yes N	General of managing partner?  Yes No	(k) r Percentage ownership

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