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Form **990** 

Department of the Treasury

Internal Revenue Service

# 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. ► Information about Form 990 and its instructions is at www.irs.gov/form990. 2023 Open to Public Inspection

OMB No. 1545-0047

A	For tl	ne 2023 calendar year, or tax year beginning 04/01/2023	and er	nding		03	/31/2024
_		C Name of organization AMERICAN CIVIL LIBERTIES UNIO			D Employer id	entific	ation number
в	Check if a	INC.	100	NDIII 10	,		
	Addr	ess Daing Rupinges As			10	62.	12510
			Room/su	ite	E Telephone n		13516
	-	1 return 125 BROAD STREET, 18TH FLOOR	100111/00	110	· · · ·		
		City or town, state or province, country, and ZIP or foreign postal code			(2	12)	549-2500
-							
-	retur Appl						280,525,995.
L	pend				H(a) Is this a group subordinates		m for Yes X No
		SAME AS "C" ABOVE			H(b) Are all subord	linates ir	cluded? Yes No
		xempt status: X 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) o	or	527	If "No," attac	ch a list	. (see instructions)
<u> </u>		ite:  WWW.ACLUFOUNDATION.ORG			H(c) Group exem		F
K	and the second second	of organization: X Corporation Trust Association Other	L Ye	ear of format	tion: 1966 <b>M</b>	State	of legal domicile: NY
P	artl	Summary		-			
	1	Briefly describe the organization's mission or most significant activities: PRESE	RVATI	ON AND	PROMOTIO	N OI	7
ce Ce		CIVIL RIGHTS AND CIVIL LIBERTIES.					
nar							
Governance	2	Check this box 🕨 🔄 if the organization discontinued its operations or disposed	d of more	e than 25%	of its net assets	 S.	
പ	3	Number of voting members of the governing body (Part VI, line 1a)				3	13
රං ග	4	Number of independent voting members of the governing body (Part VI, line 1b)				4	13
itie	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)				5	483
Activities &	6	Total number of volunteers (estimate if necessary)				6	13
Ac	7a	Total unrelated business revenue from Part VIII, column (C), line 12		•••••		7a	-36,308.
	b	Net unrelated business taxable income from Form 990-T, line 34				7b	<u></u>
				· · · · ·	Prior Year		Current Year
	8	Contributions and grants (Part VIII, line 1h)		_ 1		-	
Revenue	9	Program service revenue (Part VIII, line 2g)	FOR		184,197,45		169,102,497.
vel	10	PUBLIC IN:	SPECTIC	л.		ONE	NONE
Re					8,216,52		7,226,828.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			8,767,66		8,817,663.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12).		•• 2	201,181,63		185,146,988.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	• • • • •	••-	16,074,76		24,396,593.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	,			ONE	NONE
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)			77,878,05		89,716,391.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		••	359,65	52.	350,259.
- Å	b	Total fundraising expenses (Part IX, column (D), line 25)18,440,562					
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			92,031,71		87,221,342.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			86,344,19	0.	201,684,585.
	19	Revenue less expenses. Subtract line 18 from line 12			14,837,44	5.	-16,537,597.
s ol				Begin	ning of Current Y	'ear	End of Year
set	20	Total assets (Part X, line 16)			85,630,15	8.	828,604,389.
Net Assets or Fund Balances	21	Total liabilities (Part X, line 26)			45,527,05	3.	148,492,194.
N <sup>n</sup>	22	Net assets or fund balances. Subtract line 21 from line 20			540,103,10	5.	680,112,195.
Pa	irt II	Signature Block					
Un	der per	nalties of perjury, I declare that I have examined this return, including accompanying schedul	les and st	atements, a	and to the best of	my k	nowledge and belief, it is
	e, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of which	h prepare	er has any kr	nowledge.		
		1 Light			12	15	124
Sig		Signature of officer			Date		
He	re	CNARIZMA T. WILLIAMS COO					
		Type or print name and title		1774 or 201 201 201 10 10 10 10 10 10 10 10 10 10 10 10 1			
-		Print/Type preparer's name Preparer's signature	Date	-	Check	if P	TIN
Paic		TARA COOKE TARA COOKE	111/1	L8/2024			
	parer	Firm's name BDO USA	/				P01281186
Use	Only	Firm's address ▶ 200 PARK AVENUE 38TH FLOOR NEW YORK, NY	7 1017	56	Firm's EIN		3-5381590
Мач	the II	RS discuss this return with the preparer shown above? (see instructions)	L TOTE	00	Phone no.	۷.	L2-885-8000
-		work Reduction Act Notice, see the separate instructions.	<u></u>			• •	X Yes No
- or	rapei	work Reduction Act Notice, see the separate instructions.					Form <b>990</b> (2023)

Fo	rm 990 (2023) Page <b>2</b>
P	Statement of Program Service Accomplishments           Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	SEE SCHEDULE O
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes X No If "Yes." describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section $501(c)(3)$ and $501(c)(4)$ organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

<b>a</b> (Code:	) (Expenses \$	75,699,505. including gran	ts of \$ 13,065,738.	_) (Revenue \$	7,009,067.)
LEGAL -	THE ACLU FOUNDA	TION'S LITIGATION PR	OGRAM IS THE		
CORNERST	ONE OF ITS CIVI	L LIBERTIES PROGRAM.	THE ACLU TODAY	IS THE	
NATION'S	PREEMINENT CIV	IL LIBERTIES ORGANIZ	ATION, WITH A SI	AFF OF	
ATTORNEY	S IN THE NATION	AL OFFICE WORKING IN	COLLABORATION W	ITH	
ATTORNEY	S AT AFFILIATE	OFFICES NATIONWIDE T	O ADDRESS CASES		
INVOLVIN	G A WIDE RANGE	OF CIVIL LIBERTIES I	SSUES. THE ACLU	APPEARS	
BEFORE T	HE U.S. SUPREME	COURT MORE THAN ANY	OTHER LEGAL SEF	RVICES	
ORGANIZA	TION OR GOVERNM	ENTAL AGENCY EXCEPT	THE U.S. DEPARTM	IENT OF	
JUSTICE.					

4b (Code:         ) (Expenses \$ 62,661,615. including grants of \$ 11,165,401. ) (Revenue \$ NONE	)
AFFILIATE SUPPORT - THE ACLU HAS AN AFFILIATE OR CHAPTER IN EVERY	
STATE, THE DISTRICT OF COLUMBIA, AND IN PUERTO RICO. AFFILIATES	
HANDLE REQUESTS FOR LEGAL ASSISTANCE, LOBBY STATE LEGISLATURES AND	
HOST EDUCATIONAL FORUMS THROUGHOUT THE YEAR. THE NATIONAL ACLU	
COORDINATES FUNDRAISING EFFORTS WITH ITS AFFILIATES AND SHARES THE	
PROCEEDS OF FUNDRAISING EFFORTS WITH AFFILIATES IN ACCORDANCE WITH	
A DETAILED POLICY. THROUGH ITS AFFILIATE SUPPORT AND NATIONWIDE	
INITIATIVES DEPARTMENT (ASNI), THE NATIONAL ACLU ALSO PROVIDES	
GRANTS AND SUPPORT TO AFFILIATES ON SPECIFIC INITIATIVES AND	
PROJECTS THAT HAVE BEEN IDENTIFIED AS INVOLVING MATTERS OF BOTH	
(CONTINUED ON SCHEDULE O)	

<b>c</b> (Code:	) (Expenses \$	18,968,802. including grants of §	40,000. ) (Revenue \$	598,066. <b>)</b>
EDUCATIO	N - THROUGH NEW	NSLETTERS, ITS WEBSITE, A	DVERTISEMENTS,	
OP-ED AF	RTICLES, MEDIA I	INTERVIEWS, PUBLICATIONS,	SOCIAL MEDIA, AND	
NUMEROUS	MEETINGS AND V	WORKSHOPS CONDUCTED IN CO	LLABORATION WITH	
ITS AFFI	LIATES THROUGHO	OUT THE US, THE ACLU FOUN	DATION PROVIDES	
ONGOING	EDUCATION TO TH	HE ACLU'S APPROXIMATELY 1	,000,000 SUPPORTERS	
NATIONWI	DE AND TO THE P	PUBLIC AT LARGE WITH RESE	ECT TO A WIDE RANGE	
OF CIVII	LIBERTIES ISSU	JES AND CONCERNS. A CORE	COMPONENT OF THE	
ORGANIZA	TION'S EDUCATION	ONAL CAMPAIGNS IS THE EMP	HASIS ON KEY	
RIGHTS,	INCLUDING FIRST	I AMENDMENT RIGHTS TO FRE	E SPEECH,	
ASSOCIAT	ION AND ASSEMBI	LY; THE RIGHT TO EQUAL PE	OTECTION UNDER THE	
LAW; THE	RIGHT TO DUE H	PROCESS AND TO (CONTINUEI	ON SCHEDULE O)	

4d Other program services (Describe on Schedule O.)

(Expenses \$	6,982,849.	including grants of \$	125,454.	) (Revenue \$	NONE )	
4e Total program	service expen	ses 164,312,77	1.			

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Part	V Checklist of Required Schedules			
	= 1000000000000000000000000000000000000		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions.	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	-	Λ	
v	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		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		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40	37	
44	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
-	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
a	complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more	114	21	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
с	Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12 a	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	<u> </u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b		v
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	140		X
15	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		Х
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
16.4	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
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			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24b		
C	to defease any tax-exempt bonds?	24c		
h	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	2.70		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		Х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L,	21		
	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? <i>If "Yes," complete Schedule L, Part IV</i>	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		v
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		XX
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	-		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33	Х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34	Х	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	350		
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	Х	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Part				
	Check if Schedule O contains a response or note to any line in this Part V	•••	Yes	. No
1 ล	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable <b>1b</b> NONE			
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	Х	
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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 483			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
3a	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	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	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 any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	<b>C</b> h		
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	7a		Х
h	and services provided to the payor?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	10		
U	required to file Form 8282?	7c		Х
Ь	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
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 10b			
11	Section 501(c)(12) organizations. Enter:			
	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.)	40-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	TJa		
h	Enter the amount of reserves the organization is required to maintain by the states in which			
U	the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, 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.			

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Part	VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below	, and	for a	"No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.			tions.
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sect	ion A. Governing Body and Management			
			Yes	No
19	Enter the number of voting members of the governing body at the end of the tax year   1a   13			
Ia	If there are material differences in voting rights among members of the governing body, or	1		
	if the governing body delegated broad authority to an executive committee or similar			
L	committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent. 13			
		1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	2		х
-	any other officer, director, trustee, or key employee?	-		Λ
3	Did the organization delegate control over management duties customarily performed by or under the direct	2		37
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Х	
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
~	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
11a		11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a		12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
D		12b	X	
_	rise to conflicts?	120		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12c	v	
	describe on Schedule O how this was done		X	
13	Did the organization have a written whistleblower policy?	13 14	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filedSEE_SCHEDULE_O			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-	T (sec	tion 5	01(c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			. /
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of	of inte	rest r	olicv
	and financial statements available to the public during the tax year.			2.1 <b>0</b> y,
20	State the name, address, and telephone number of the person who possesses the organization's books and record	ls.		
	CHARIZMA WILLIAMS, COO 125 BROAD STREET, 18TH FLOOR NEW YORK, NY 10004			
	212-549-2500	Form	990	(2023)
JSA				( = = = = = = = = = = = = = = = = = = =

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(0) any for related organizations for dotted line)         0 mode organizations (W-2) related organizations (W-2) 1099-MEC)         organizations (W-2) 10000-ME         organizations (W-2) 1000-ME	(A) Name and title	<b>(B)</b> Average hours per week	box,	not ch unles	Pos neck is pe	rson	e than c is both or/trust	an		(E) Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
EXECUTIVE DIRECTOR/CEO         26.00         X         NONE         1,320,302.         58,263.           (2) TERENCE R. DOUGHERTY         14.00         X         NONE         553,182.         66,754.           (3) KARY L. MOSS         34.00         X         NONE         553,182.         66,754.           (4) AJ HIKES         14.00         X         491,101.         NONE         124,101.           (4) AJ HIKES         14.00         X         NONE         543,532.         30,884.           (5) MARK V. WIER         34.00         X         NONE         504,111.         NONE         50,124.           (6) DAVID D. COLE         34.00         X         492,089.         NONE         25,314.           (7) CHARIZMA T. WILLIAMS         14.00         X         492,089.         NONE         25,314.           (7) CHARIZMA T. WILLIAMS         14.00         X         NONE         467,980.         33,571.           (6) DEIDRE SCHIFELING         14.00         X         NONE         467,980.         33,571.           (7) CHARIZMA T. WILLIAMS         14.00         X         NONE         401,409.         24,143.           (10) N.J. AKBAR         14.00         X         NONE         400.00		related organizations below	Individual trustee or director	-ormer Highest compensated amployee (ey employee Officer nstitutional trustee ndividual trustee or director		1099-MISC/		0			
EXECUTIVE DIRECTOR/CEO         26.00         X         NONE         1,320,302.         58,263.           (2) TERENCE R. DOUGHERTY         14.00         X         NONE         553,182.         66,754.           (3) KARY L. MOSS         34.00         X         NONE         553,182.         66,754.           (4) AJ HIKES         14.00         X         491,101.         NONE         124,101.           (4) AJ HIKES         14.00         X         NONE         543,532.         30,884.           (5) MARK V. WIER         34.00         X         NONE         504,111.         NONE         50,124.           (6) DAVID D. COLE         34.00         X         492,089.         NONE         25,314.           (7) CHARIZMA T. WILLIAMS         14.00         X         NONE         467,980.         33,571.           (8) DEIDRE SCHIFELING         14.00         X         NONE         430,114.         33,792.           (9) LOUISE MELLING         40.00         X         NONE         79,118.         110.00         24,143.           (10) N.J. AKBAR         14.00         X         NONE         4401,409.         24,143.           (11) ELIZABETH FITZGERALD         40.00         X         NONE <t< td=""><td>(1) ANTHONY D. ROMERO</td><td>14.00</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	(1) ANTHONY D. ROMERO	14.00									
(2) TERENCE R. DOUGHERTY         14.00         X         NONE         553,182         66,754.           (3) KARY L. MOSS         34.00         X         NONE         553,182         66,754.           (3) KARY L. MOSS         34.00         X         491,101         NONE         124,101.           (4) AJ HIKES         14.00         X         NONE         543,532         30,884.           (5) MARK V. WIER         34.00         X         NONE         543,532         30,884.           (6) DAVID D. COLE         34.00         X         504,111         NONE         50,124.           (6) DAVID D. COLE         34.00         X         492,089.         NONE         25,314.           (7) CHARIZMA T. WILLIAMS         14.00         X         NONE         467,980.         33,571.           (8) DEIDRE SCHIFELING         14.00         X         NONE         430,114.         33,792.           (9) LOUISE MELLING         40.00         X         NONE         401,409.         24,143.           (10) N.J. AKBAR         14.00         X         NONE         401,409.         24,143.           (11) ELIZABETH FITZGERALD         40.00         X         NONE         401,409.         24,143.					Х				NONE	1,320,302.	58,263.
DEP EXEC DIR. OPS/GEN. COUNSEL         26.00         X         NONE         553,182.         66,754.           (3) KARY L. MOSS         34.00         X         491,101.         NONE         124,101.           (4) AJ HIKES         14.00         X         NONE         543,532.         30,884.           (5) MARK V. WIER         26.00         X         NONE         543,532.         30,884.           (6) DAVID D. COLE         34.00         X         504,111.         NONE         50,124.           (6) DAVID D. COLE         34.00         X         492,089.         NONE         50,124.           (6) DAVID D. COLE         34.00         X         492,089.         NONE         25,314.           (7) CHARIZMA T. WILLIAMS         14.00         X         NONE         467,980.         33,571.           (8) DEIDRE SCHIFELING         14.00         X         NONE         400,114.         33,792.           (9) LOUISE MELLING         40.00         X         NONE         430,114.         33,792.           (9) N.J. AKBAR         14.00         X         NONE         401,409.         24,143.           (10) N.J. AKBAR         14.00         X         NONE         401,409.         24,143.										, ,	
(3) KARY L. MOSS         34.00         X         491,101.         NONE         124,101.           DIR AFF SUPPORT & NATION. INIT         6.00         X         491,101.         NONE         124,101.           (4) AJ HIKES         14.00         X         NONE         543,532.         30,884.           (5) MARK V. WIER         34.00         X         S04,111.         NONE         50,124.           (6) DAVID D. COLE         34.00         X         492,089.         NONE         25,314.           (7) CHARIZMA T. WILLIAMS         14.00         X         492,089.         NONE         25,314.           (7) CHARIZMA T. WILLIAMS         14.00         X         NONE         467,980.         33,571.           (8) DEIDRE SCHIFELING         14.00         X         NONE         430,114.         33,792.           (9) LOUISE MELLING         40.00         X         NONE         X         354,111.         NONE         79,118.           (10) N.J. AKBAR         14.00         X         NONE         X         343,414.         NONE         79,118.           (11) ELIZABETH FITZGERALD         40.00         X         NONE         X         343,414.         NONE         80,613.           (12) SOPH					Х				NONE	553,182.	66,754.
(4) AJ HIKES         14.00         X         NONE         543,532.         30,884.           (5) MARK V. WIER         34.00         X         S04,111.         NONE         504,131.         NONE         50,124.           (6) DAVID D. COLE         34.00         X         492,089.         NONE         25,314.           (7) CHARIZMA T. WILLIAMS         14.00         X         492,089.         NONE         25,314.           (7) CHARIZMA T. WILLIAMS         14.00         X         NONE         467,980.         33,571.           (8) DEIDRE SCHIFELING         14.00         X         NONE         430,114.         33,792.           (9) LOUISE MELLING         40.00         X         NONE         430,114.         33,792.           (10) N.J. AKBAR         14.00         X         NONE         401,409.         24,143.           (11) ELIZABETH FITZGERALD         40.00         X         NONE         401,409.         24,143.           (12) SOPHIA K. GOLDMACHER         14.00         X         NONE         343,414.         NONE         80,613.           (13) CECILLIA D. WANG         40.00         X         NONE         343,244.         NONE         52,580.           (14) KRISTON ALFORD MCINTOSH	(3) KARY L. MOSS	34.00									· · ·
DEP.         EXEC         DIR STRATEGY&CULTURE         26.00         X         NONE         543,532.         30,884.           (5) MARK V. WIER         34.00         X         504,111.         NONE         50,124.           (6) DAVID D. COLE         34.00         X         492,089.         NONE         25,314.           (7) CHARIZMA T. WILLIAMS         14.00         X         492,089.         NONE         25,314.           (7) CHARIZMA T. WILLIAMS         14.00         X         NONE         430,114.         33,571.           (8) DEIDRE SCHIFELING         14.00         X         NONE         430,114.         33,792.           (9) LOUISE MELLING         40.00         X         NONE         430,114.         33,792.           (10) N.J. AKBAR         14.00         X         NONE         401,409.         24,143.           (11) ELIZABETH FITZGERALD         40.00         X         NONE         40,613.           (12) SOPHIA K. GOLDMACHER         14.00         X         343,414.         NONE         348,573.         59,581.           (13) CECILLIA D. WANG         40.00         X         352,060.         X         NONE         52,580.           (14) KRISTON ALFORD MCINTOSH         26.00	DIR AFF SUPPORT & NATION. INIT	6.00				X			491,101.	NONE	124,101.
(5) MARK V. WIER         34.00         X         504,111.         NONE         50,124.           (6) DAVID D. COLE         34.00         X         492,089.         NONE         25,314.           (7) CHARIZMA T. WILLIAMS         14.00         X         492,089.         NONE         25,314.           (7) CHARIZMA T. WILLIAMS         14.00         X         NONE         467,980.         33,571.           (8) DEIDRE SCHIFELING         14.00         X         NONE         430,114.         33,792.           (9) LOUISE MELLING         40.00         X         NONE         401,409.         24,143.           (10) N.J. AKBAR         14.00         X         NONE         401,409.         24,143.           (11) ELIZABETH FITZGERALD         40.00         X         NONE         401,409.         24,143.           (11) ELIZABETH FITZGERALD         40.00         X         NONE         343,414.         NONE         80,613.           (12) SOPHIA K. GOLDMACHER         14.00         X         NONE         X         352,060.         NONE         52,580.           (13) CECILLIA D. WANG         40.00         X         NONE         352,060.         NONE         52,580.           (14) KRISTON ALFORD MCINTOSH		14.00									
CHIEF DEVELOPMENT OFFICER         6.00         X         504,111.         NONE         50,124.           (6) DAVID D. COLE         34.00         X         492,089.         NONE         25,314.           (7) CHARIZMA T. WILLIAMS         14.00         X         492,089.         NONE         25,314.           (7) CHARIZMA T. WILLIAMS         14.00         X         NONE         467,980.         33,571.           (8) DEIDRE SCHIFELING         14.00         X         NONE         430,114.         33,792.           (9) LOUISE MELLING         40.00         X         NONE         430,114.         33,792.           (10) N.J. AKBAR         14.00         X         NONE         401,409.         24,143.           (11) ELIZABETH FITZGERALD         40.00         X         NONE         401,409.         24,143.           (11) ELIZABETH FITZGERALD         40.00         X         NONE         4343,414.         NONE         80,613.           (12) SOPHIA K. GOLDMACHER         14.00         X         NONE         348,573.         59,581.           (13) CECILLIA D. WANG         40.00         X         NONE         348,573.         59,581.           (14) KRISTON ALFORD MCINTOSH         26.00         X         3	DEP. EXEC DIR STRATEGY&CULTURE	26.00			Х				NONE	543,532.	30,884.
(6) DAVID D. COLE         34.00         x         492,089.         NONE         25,314.           (7) CHARIZMA T. WILLIAMS         14.00         x         NONE         467,980.         33,571.           (6) DEIDRE SCHIFELING         14.00         x         NONE         467,980.         33,571.           (6) DEIDRE SCHIFELING         14.00         x         NONE         467,980.         33,571.           (6) DEIDRE SCHIFELING         14.00         x         NONE         430,114.         33,792.           (9) LOUISE MELLING         40.00         x         NONE         430,114.         33,792.           (9) LOUISE MELLING         40.00         x         354,111.         NONE         79,118.           (10) N.J. AKBAR         14.00         x         354,111.         NONE         79,118.           (11) ELIZABETH FITZGERALD         40.00         x         NONE         401,409.         24,143.           (11) ELIZABETH FITZGERALD         40.00         x         343,414.         NONE         80,613.           (12) SOPHIA K. GOLDMACHER         14.00         x         343,414.         NONE         348,573.         59,581.           (13) CECILLIA D. WANG         40.00         x         352,060.	(5) MARK V. WIER	34.00									
NATIONAL LEGAL DIRECTOR         6.00         X         492,089.         NONE         25,314.           (7) CHARIZMA T. WILLIAMS         14.00         X         NONE         467,980.         33,571.           (8) DEIDRE SCHIFELING         14.00         X         NONE         467,980.         33,571.           (9) LOUISE MELLING         14.00         X         NONE         430,114.         33,792.           (9) LOUISE MELLING         40.00         X         NONE         79,118.         14.00           CHF. EQ., DIVERSTY & INCL. OFF.         26.00         X         NONE         401,409.         24,143.           (11) ELIZABETH FITZGERALD         40.00         X         NONE         343,414.         NONE         80,613.           (12) SOPHIA K. GOLDMACHER         14.00         X         NONE         348,573.         59,581.           (13) CECILLIA D. WANG         40.00         X         NONE         352,060.         NONE         52,580.           (14) KRISTON ALFORD MCINTOSH         26.00         X         352,060.         NONE         52,580.	CHIEF DEVELOPMENT OFFICER	6.00				X			504,111.	NONE	50,124.
(7) CHARIZMA T. WILLIAMS       14.00       X       NONE       467,980.       33,571.         (8) DEIDRE SCHIFELING       14.00       X       NONE       467,980.       33,571.         (9) LOUISE MELLING       26.00       X       NONE       430,114.       33,792.         (9) LOUISE MELLING       40.00       X       354,111.       NONE       79,118.         (10) N.J. AKBAR       14.00       X       NONE       401,409.       24,143.         (11) ELIZABETH FITZGERALD       40.00       X       NONE       401,409.       24,143.         (12) SOPHIA K. GOLDMACHER       14.00       X       NONE       348,573.       59,581.         (13) CECILLIA D. WANG       40.00       X       NONE       X       352,060.       NONE       52,580.         (14) KRISTON ALFORD MCINTOSH       26.00       X       352,060.       NONE       52,580.	(6) DAVID D. COLE	34.00									
CO         26.00         X         NONE         467,980.         33,571.           (8) DEIDRE SCHIFELING         14.00         X         NONE         430,114.         33,792.           (9) LOUISE MELLING         40.00         X         NONE         430,114.         33,792.           (9) LOUISE MELLING         40.00         X         NONE         X         354,111.         NONE         79,118.           (10) N.J. AKBAR         14.00         X         NONE         X         NONE         401,409.         24,143.           (11) ELIZABETH FITZGERALD         40.00         X         NONE         X         343,414.         NONE         80,613.           (12) SOPHIA K. GOLDMACHER         14.00         X         NONE         X         343,414.         NONE         80,613.           (13) CECILLIA D. WANG         40.00         X         NONE         X         352,060.         NONE         52,580.           (14) KRISTON ALFORD MCINTOSH         26.00         X         352,060.         NONE         52,580.	NATIONAL LEGAL DIRECTOR	6.00				Х			492,089.	NONE	25,314.
(8) DEIDRE SCHIFELING       14.00       x       NONE       430,114.       33,792.         (9) LOUISE MELLING       40.00       x       NONE       430,114.       33,792.         (9) LOUISE MELLING       40.00       x       354,111.       NONE       79,118.         (10) N.J. AKBAR       14.00       x       NONE       401,409.       24,143.         (11) ELIZABETH FITZGERALD       40.00       x       NONE       80,613.         DIRECTOR OF DEVELOPMENT       NONE       x       343,414.       NONE       80,613.         (12) SOPHIA K. GOLDMACHER       14.00       x       NONE       348,573.       59,581.         (13) CECILLIA D. WANG       40.00       x       352,060.       NONE       52,580.         (14) KRISTON ALFORD MCINTOSH       26.00       x       352,060.       NONE       52,580.	(7) CHARIZMA T. WILLIAMS	14.00									
NATIONAL POLITICAL DIRECTOR26.00XNONE430,114.33,792.(9) LOUISE MELLING40.00X354,111.NONE79,118.(10) N.J. AKBAR14.00X354,111.NONE79,118.(10) N.J. AKBAR14.00XNONE401,409.24,143.(11) ELIZABETH FITZGERALD40.00XNONE40,409.24,143.(12) SOPHIA K. GOLDMACHER14.00X343,414.NONE80,613.(13) CECILLIA D. WANG40.00XNONE348,573.59,581.(14) KRISTON ALFORD MCINTOSH26.00X352,060.NONE52,580.	C00	26.00			Х				NONE	467,980.	33,571.
(9) LOUISE MELLING       40.00         DEPUTY LEGAL DIRECTOR       NONE         (10) N.J. AKBAR       14.00         CHF. EQ., DIVERSTY & INCL. OFF.       26.00         X       NONE         MONE       X         NONE       X         DIRECTOR OF DEVELOPMENT       NONE         NONE       X         SOPHIA K. GOLDMACHER       14.00         CHIEF PEOPLE OFFICER       26.00         X       NONE         DEPUTY LEGAL DIRECTOR       NONE         DEPUTY LEGAL DIRECTOR       NONE         X       352,060.       NONE         (14) KRISTON ALFORD MCINTOSH       26.00	(8) DEIDRE SCHIFELING	14.00									
DEPUTY LEGAL DIRECTORNONEX354,111.NONE79,118.(10) N.J. AKBAR14.00 </td <td>NATIONAL POLITICAL DIRECTOR</td> <td>26.00</td> <td></td> <td></td> <td></td> <td>Х</td> <td></td> <td></td> <td>NONE</td> <td>430,114.</td> <td>33,792.</td>	NATIONAL POLITICAL DIRECTOR	26.00				Х			NONE	430,114.	33,792.
(10) N.J. AKBAR       14.00         CHF. EQ., DIVERSTY & INCL. OFF.       26.00         X       NONE         (11) ELIZABETH FITZGERALD       40.00         DIRECTOR OF DEVELOPMENT       NONE         X       343,414.         NONE       80,613.         (12) SOPHIA K. GOLDMACHER       14.00         CHIEF PEOPLE OFFICER       26.00         X       NONE         MANG       40.00         DEPUTY LEGAL DIRECTOR       NONE         X       352,060.         NONE       52,580.	(9) LOUISE MELLING	40.00									
CHF. EQ., DIVERSTY & INCL. OFF.       26.00       X       NONE       401,409.       24,143.         (11) ELIZABETH FITZGERALD       40.00       X       343,414.       NONE       80,613.         DIRECTOR OF DEVELOPMENT       NONE       X       343,414.       NONE       80,613.         (12) SOPHIA K. GOLDMACHER       14.00       X       NONE       X       NONE       348,573.       59,581.         (13) CECILLIA D. WANG       40.00       X       352,060.       NONE       52,580.         (14) KRISTON ALFORD MCINTOSH       26.00       X       352,060.       NONE       52,580.	DEPUTY LEGAL DIRECTOR	NONE					Х		354,111.	NONE	79,118.
(11) ELIZABETH FITZGERALD40.00X343,414.NONEDIRECTOR OF DEVELOPMENTNONEX343,414.NONE80,613.(12) SOPHIA K. GOLDMACHER14.00XNONE348,573.59,581.(13) CECILLIA D. WANG40.00X352,060.NONE52,580.(14) KRISTON ALFORD MCINTOSH26.00X352,060.NONE52,580.	(10) N.J. AKBAR	14.00									
DIRECTOR OF DEVELOPMENTNONEX343,414.NONE80,613.(12) SOPHIA K. GOLDMACHER14.00 </td <td>CHF. EQ., DIVERSTY &amp; INCL. OFF.</td> <td>26.00</td> <td></td> <td></td> <td></td> <td></td> <td>Х</td> <td></td> <td>NONE</td> <td>401,409.</td> <td>24,143.</td>	CHF. EQ., DIVERSTY & INCL. OFF.	26.00					Х		NONE	401,409.	24,143.
(12) SOPHIA K. GOLDMACHER       14.00       X       NONE       348,573.       59,581.         (13) CECILLIA D. WANG       40.00       X       352,060.       NONE       52,580.         (14) KRISTON ALFORD MCINTOSH       26.00       X       352,060.       NONE       52,580.	(11) ELIZABETH FITZGERALD	40.00									
CHIEF PEOPLE OFFICER         26.00         X         NONE         348,573.         59,581.           (13) CECILLIA D. WANG         40.00         X         352,060.         NONE         52,580.           DEPUTY LEGAL DIRECTOR         NONE         X         352,060.         NONE         52,580.           (14) KRISTON ALFORD MCINTOSH         26.00         Image: Content of the second s	DIRECTOR OF DEVELOPMENT	NONE					Х		343,414.	NONE	80,613.
(13) CECILLIA D. WANG       40.00         DEPUTY LEGAL DIRECTOR       NONE         (14) KRISTON ALFORD MCINTOSH       26.00	(12) SOPHIA K. GOLDMACHER	14.00									
DEPUTY LEGAL DIRECTORNONEX352,060.NONE52,580.(14) KRISTON ALFORD MCINTOSH26.00 </td <td>CHIEF PEOPLE OFFICER</td> <td>26.00</td> <td></td> <td></td> <td></td> <td></td> <td>Х</td> <td></td> <td>NONE</td> <td>348,573.</td> <td>59,581.</td>	CHIEF PEOPLE OFFICER	26.00					Х		NONE	348,573.	59,581.
(14) KRISTON ALFORD MCINTOSH 26.00	(13) CECILLIA D. WANG	40.00									
	DEPUTY LEGAL DIRECTOR	NONE					Х		352,060.	NONE	52,580.
CHIEF COMMUNICATIONS OFFICER 14.00 X 334,893. NONE 19,838.	(14) KRISTON ALFORD MCINTOSH	26.00									
	CHIEF COMMUNICATIONS OFFICER	14.00				Х			334,893.	NONE	19,838.

#### Form 990 (2023)

(A)	(B)			(C	C)			(D)	(E)	(F)
Name and title	Average hours per week (list any hours for related	box, office	not ch unles er and	Posi ieck s pei	ition more rson irect	e than c is both or/trust em	an	Reportable compensation from the organization	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional trustee	cer	Key employee	Highest compensated employee	mer	(W-2/1099-MISC)		organization and related organizations
15) LARISA MUELLER	14.00									
CFO	26.00			Х				NONE	323,421.	18,720
16) DEBORAH ARCHER	3.00									
DIRECTOR/PRESIDENT	3.00	Х		Х				NONE	NONE	NON
17) ROBERT REMAR	5.00									
DIRECTOR/VP, TREASURER	4.50	Х		Х				NONE	NONE	NON
18) CHARU VERMA	3.00									
DIRECTOR/VP	2.00	Х		Х				NONE	NONE	NON
19) GRACE CHAN	3.50									
DIRECTOR/SEC. (THRU 10/15/23)	2.00	Х		Х				NONE	NONE	NON
20) DAX GOLDSTEIN	2.50									
DIRECTOR/SEC. (AS OF 01/28/24)	2.50	Х		Х				NONE	NONE	NON
21) SHAAKIRRAH SANDERS	2.00									
DIRECTOR/GENERAL COUNSEL	2.00	Х		Х				NONE	NONE	NON
22) RONALD TYLER	3.00									
DIRECTOR/GENERAL COUNSEL	2.50	Х		Х				NONE	NONE	NON
23) WILLIAM ACEVES	3.00									
DIRECTOR (THRU 01/28/24)	3.00	X						NONE	NONE	NON
24) MICHELLE BROWN-YAZZIE	3.50									
DIRECTOR	2.50	Х						NONE	NONE	NON
25) RUTH COLKER	2.50									
DIRECTOR (AS OF 01/01/24)	2.50	X						NONE	NONE	NON
1b Sub-total								2,871,779.	4,388,513.	757,396
c Total from continuation sheets to Part VII,	Section A			• • •	•••		•	NONE		NON
d Total (add lines 1b and 1c)								2,871,779.	4,388,513.	757,396

reportable compensation from the organization ► 222

_		
3	Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such	
	individual	4
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
_		

#### 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	<b>(C)</b> Compensation
2	Total number of independent contractors (including but not limited to those more than \$100,000 in compensation from the organization ►	e listed above) who received	

Yes No

#### Form 990 (2023)

(A)	(B)	<b>_</b>		- (C			Ŭ	(D)	ed Employees ( (E)		(F)	
Name and title	Average			Posi	-			Reportable	Reportable	E	Estimated	
	hours per	(do not check more than box, unless person is both							compensation from	ar	amount of	
	week (list any hours for		r and	ladi	irector	r/trustee		from the	related organizations	com	other pensatio	on
	related	Indi or d	Inst	Highest compensated employee Key employee Officer			Former	organization	(W-2/1099-MISC)		om the	
	organizations below dotted	vidu	itutio	cer	emp	nest	ner	(W-2/1099-MISC)		-	anizatio d related	
	line)	for tr	onal		Key employee	ë com					anizatior	
		Individual trustee or director	Institutional trustee		ŏ	pens						
			ee			satec						
26) CHERIE-DAWSON EDWARDS	2.50											
DIRECTOR (AS OF 01/28/24)	2.50	Х						NONE	NONE	2		NOI
27) JEFFREY HONG	3.00											-
DIRECTOR (THRU 01/28/24)	3.00	Х						NONE	NONE	3		NON
28) DONITA JUDGE	2.50											
DIRECTOR	2.50	Х						NONE	NONE	2		NON
29) SHARON KYLE	2.50											
DIRECTOR (THRU 06/11/23)	2.50	Х						NONE	NONE	2		NOI
30) ANIL MUJUMDAR	2.50											-
DIRECTOR	2.00	Х						NONE	NONE	3		NOI
31) CONNIE TCHENG	3.00											
DIRECTOR	2.50	Х						NONE	NONE	2		NOI
32) YOMI WRONG	2.50											
DIRECTOR	2.50	Х						NONE	NONE	2		NO
	[											
	[											
1b Sub-total												
c Total from continuation sheets to Part VII, S	ection A						▶					
d Total (add lines 1b and 1c)							▶					
2 Total number of individuals (including but not							reo	ceived more than	\$100,000 of			
reportable componentian from the organization	n 🕨				-							
reportable compensation from the organization											Yes	No
· · · · · · · · · · · · · · · · · · ·	er, directo	or, or	tru	stee	e, ke	ev en	npl	ovee, or highes	t compensated			
										3		2
3 Did the organization list any former office employee on line 1a? If "Yes," complete Schedel	ule J for su	ch ind	ividu	ıal ,		• • •	• •			3		2
<ul> <li>3 Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu</li> <li>4 For any individual listed on line 1a, is the second second</li></ul>	ule J for suc sum of rep	ch ind oortab	ividu le c	<i>ial</i> om∣	 pens	ation	an	d other compens	sation from the	3		2
<ul> <li>3 Did the organization list any former office employee on line 1a? If "Yes," complete Schedu</li> <li>4 For any individual listed on line 1a, is the organization and related organizations groups</li> </ul>	ule J for suc sum of rep eater than	ch ind oortab \$15	<i>ividu</i> le c 60,00	ial omj 00?	 pens <i>If</i>	ation "Yes,"	an ″c	d other compensions of the second sec	sation from the le J for such	3	X	:
<ul> <li>3 Did the organization list any former office employee on line 1a? <i>If "Yes," complete Schede</i></li> <li>4 For any individual listed on line 1a, is the organization and related organizations grain individual</li></ul>	ule J for suc sum of rep eater than •••••	ch ind oortab \$15 	<i>ividu</i> le c 0,00	<i>ial</i> omj 00?	pens <i>If</i>	ation "Yes,"	an ″c	d other compension of the complete schedu	sation from the le J for such		X	:
<ul> <li>3 Did the organization list any former office employee on line 1a? <i>If "Yes," complete Schedu</i></li> <li>4 For any individual listed on line 1a, is the organization and related organizations graindividual.</li> </ul>	ule J for suc sum of rep eater than  accrue co	ch ind oortab \$15 • • • mpen	<i>ividu</i> le c 0,00	omj 00? 00 f	pens <i>If</i> rom	ation <i>"Yes,"</i>	an ″c	d other compens complete Schedu elated organizatio	sation from the le J for such		X	
<ul> <li>B Did the organization list any former office employee on line 1a? <i>If "Yes," complete Schedu</i></li> <li>For any individual listed on line 1a, is the sorganization and related organizations grain <i>individual</i></li></ul>	ule J for suc sum of rep eater than  accrue co	ch ind oortab \$15 • • • mpen	<i>ividu</i> le c 0,00	omj 00? 00 f	pens <i>If</i> rom	ation <i>"Yes,"</i>	an ″c	d other compens complete Schedu elated organizatio	sation from the le J for such	4	X	
<ul> <li>3 Did the organization list any former office employee on line 1a? <i>If "Yes," complete Schedu</i></li> <li>4 For any individual listed on line 1a, is the sorganization and related organizations graindividual</li></ul>	ule J for suc sum of rep eater than  accrue co es," comple	ch ind portab \$15  mpen <u>te Sch</u> ndepe	ividu le c 0,00 satio edu ende	ompoor on f <i>le J</i>	pens <i>If</i> rom <i>for s</i>	ation "Yes," any u such p	an " c unr ers	elated organization	sation from the le J for such on or individual	4 5		
<ul> <li>3 Did the organization list any former office employee on line 1a? <i>If "Yes," complete Schedu</i></li> <li>4 For any individual listed on line 1a, is the organization and related organizations graindividual.</li> <li>5 Did any person listed on line 1a receive or for services rendered to the organization? <i>If "Yes</i></li> <li>5 Section B. Independent Contractors</li> <li>1 Complete this table for your five highest complete the section of the section</li></ul>	ule J for suc sum of rep eater than  accrue co es," comple	ch ind portab \$15  mpen <u>te Sch</u> ndepe	ividu le c 0,00 sationedu ende	ompoor on f <i>le J</i>	pens <i>If</i> rom <i>for s</i>	ation "Yes," any u such p	an " c unr ers	elated organization	sation from the le J for such on or individual	4 5		:
<ul> <li>B Did the organization list any former office employee on line 1a? <i>If "Yes," complete Schedu</i></li> <li>For any individual listed on line 1a, is the sorganization and related organizations graindividual</li> <li>Did any person listed on line 1a receive or for services rendered to the organization? <i>If "Yes</i></li> <li>Section B. Independent Contractors</li> <li>Complete this table for your five highest com compensation from the organization. Report of year.</li> </ul>	ule J for suc sum of rep eater than accrue co es," comple pensated in compensated	ch ind portab \$15  mpen <u>te Sch</u> ndepe	ividu le c 0,00 sationedu ende	ompoor on f <i>le J</i>	pens <i>If</i> rom <i>for s</i>	ation "Yes," any u such p	an " c unr ers	elated organization	sation from the le J for such on or individual than \$100,000 on in the organizatio	4 5		
<ul> <li>3 Did the organization list any former office employee on line 1a? <i>If "Yes," complete Schedu</i></li> <li>4 For any individual listed on line 1a, is the sorganization and related organizations graindividual</li></ul>	ule J for suc sum of rep eater than accrue co es," comple pensated in compensated	ch ind portab \$15  mpen <u>te Sch</u> ndepe	ividu le c 0,00 sationedu ende	ompoor on f <i>le J</i>	pens <i>If</i> rom <i>for s</i>	ation "Yes," any u such p	an " c unr ers	elated organization complete Schedu elated organization nat received more nding with or with (B)	sation from the le J for such on or individual than \$100,000 on in the organizatio	4 5 of on's tax (C)		
<ul> <li>3 Did the organization list any former office employee on line 1a? <i>If "Yes," complete Schedu</i></li> <li>4 For any individual listed on line 1a, is the sorganization and related organizations graindividual</li></ul>	ule J for suc sum of rep eater than accrue co es," comple pensated in compensated	ch ind portab \$15  mpen <u>te Sch</u> ndepe	ividu le c 0,00 sationedu ende	ompoor on f <i>le J</i>	pens <i>If</i> rom <i>for s</i>	ation "Yes," any u such p	an " c unr ers	elated organization complete Schedu elated organization nat received more nding with or with (B)	sation from the le J for such on or individual than \$100,000 on in the organizatio	4 5 of on's tax (C)		
<ul> <li>3 Did the organization list any former office employee on line 1a? <i>If "Yes," complete Schedu</i></li> <li>4 For any individual listed on line 1a, is the sorganization and related organizations graindividual</li></ul>	ule J for suc sum of rep eater than accrue co es," comple pensated in compensated	ch ind portab \$15  mpen <u>te Sch</u> ndepe	ividu le c 0,00 sationedu ende	ompoor on f <i>le J</i>	pens <i>If</i> rom <i>for s</i>	ation "Yes," any u such p	an " c unr ers	elated organization complete Schedu elated organization nat received more nding with or with (B)	sation from the le J for such on or individual than \$100,000 on in the organizatio	4 5 of on's tax (C)		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► 37

Form	990	(2023)

Part VIII	Statement of	Revenue
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		Check if Schedule O contains a respor		(A)	(B)	(C)	(D)
				(A) Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue exclude from tax under sections 512-514
and Other Similar Amounts	1a	Federated campaigns	2,648,505.				
b	b	Membership dues					
<b>₽</b> 2	с	Fundraising events					
ar	d	Related organizations 1d					
l i (	е	Government grants (contributions) 1e					
Sie	f	All other contributions, gifts, grants,					
Jer 1		and similar amounts not included above <b>1</b>	166,453,992.				
3	g	Noncash contributions included in					
פ		lines 1a-1f	\$ 4,400,000.				
9 (9	h	Total. Add lines 1a-1f		169,102,497.			
			Business Code				
	2a						
e	b						
en	с						
se l	d						
Revenue	е						
•	f	All other program service revenue					
	g	Total. Add lines 2a-2f		NONE			
	3	Investment income (including dividends,	interest, and				
		other similar amounts)		7,724,066.		-36,308.	7,760,37
	4	Income from investment of tax-exempt bond	•	NONE			
	5	Royalties		163,206.			163,20
		(i) Real	(ii) Personal				
	6a	Gross rents 6a 717,155.					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c 717,155.					
	d	Net rental income or (loss)		717,155.			717,15
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets					
		other than inventory 7a 94,881,769.					
en	b	Less: cost or other basis					
evenue		and sales expenses 7b 95,379,007.					
		Gain or (loss) 7c -497,238.					
Other R	d	Net gain or (loss)		-497,238.			-497,23
년 년	8a	Gross income from fundraising					
		events (not including \$					
		of contributions reported on line					
		1c). See Part IV, line 18	NONE				
	b	Less: direct expenses	NONE				
	С	Net income or (loss) from fundraising events		NONE			
	9a	Gross income from gaming					
		activities. See Part IV, line 19 9a	NONE				
	b	Less: direct expenses	NONE				
	С	Net income or (loss) from gaming activities.		NONE			
	10a	Gross sales of inventory, less					
		returns and allowances 10a	NONE				
	b	Less: cost of goods sold	NONE				
	С	The mean of the states of inventory.		NONE			
8	• •		Business Code	7 000 077	7 000 007		
lue	11a	LEGAL AWARD, NET	541100	7,009,067.	7,009,067.		
Ver	b	MERCHANDISE AND BOOK SALES	452000	598,066.	598,066.		105.05
S&	c	TUITION & FEES	900099	185,850.			185,85
	d	All other revenue					144,319
	e						8,473,666
Miscellaneous Revenue		All other revenue		144,319. 7,937,302. 185,146,988.	7,607,133.	-36,308.	

Form **990** (2023)

## Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a response or note to any line in this Part IX						
Do	not include amounts reported on lines 6b, 7b,	<b>(A)</b> Total expenses	(B) Program service	(C) Management and	<b>(D)</b> Fundraising		
8b,	9b, and 10b of Part VIII.	rotal expenses	expenses	general expenses	expenses		
1	Grants and other assistance to domestic organizations						
	and domestic governments. See Part IV, line 21	24,396,593.	24,396,593.				
2	Grants and other assistance to domestic						
	individuals. See Part IV, line 22	NONE					
3	Grants and other assistance to foreign						
	organizations, foreign governments, and						
	foreign individuals. See Part IV, lines 15 and 16	NONE					
4	Benefits paid to or for members	NONE					
5	Compensation of current officers, directors,						
	trustees, and key employees	4,162,145.	2,362,869.	1,190,780.	608,496.		
6	Compensation not included above to disqualified						
	persons (as defined under section 4958(f)(1)) and						
	persons described in section 4958(c)(3)(B)	NONE					
7	Other salaries and wages	66,259,935.	48,849,361.	7,331,960.	10,078,614.		
	Pension plan accruals and contributions (include	3,987,328.	3,005,130.	482,220.	499,978.		
-	section 401(k) and 403(b) employer contributions)				•		
9	Other employee benefits	10,317,272.	7,540,679.	1,415,239.	1,361,354.		
10	Payroll taxes	4,989,711.	3,492,797.	748,457.	748,457.		
	Fees for services (nonemployees):	, ,	. ,		-,		
	Management	NONE					
		1,253,750.	453,760.	652,651.	147,339.		
	Accounting	289,750.		289,750.			
	Lobbying	390,005.		390,005.			
	Professional fundraising services. See Part IV, line 17	350,259.			350,259.		
	Investment management fees	2,127,086.		2,127,086.			
		2/12//0001		2,12,,0000			
y	Other. (If line 11g amount exceeds 10% of line 25, column	10,502,554.	8,562,533.	1,361,984.	578,037.		
12	(A), amount, list line 11g expenses on Schedule O.)	4,397,642.	3,623,338.	510,935.	263,369.		
12	Advertising and promotion	2,794,356.	2,090,576.	251,429.	452,351.		
14		5,723,914.	3,892,262.	858,587.	973,065.		
	Information technology.		5,052,202.	0.00,007.	575,005.		
15	Royalties	3,815,709.	2,307,574.	823,323.	684,812.		
16	Occupancy	1,441,090.	1,291,433.	8,521.	141,136.		
17		1,441,090.	1,291,433.	0, 521.	141,130.		
18	Payments of travel or entertainment expenses	NONE					
	for any federal, state, or local public officials		2 220 505	104 074	10 201		
19	Conferences, conventions, and meetings	3,391,673.	3,238,505.	104,874.	48,294.		
20		NONE					
21	Payments to affiliates	NONE	1 461 420	270 020	E10 E10		
22	Depreciation, depletion, and amortization	2,281,816.	1,461,439.	270,828.	549,549.		
23		749,876.	532,412.	82,486.	134,978.		
24	Other expenses. Itemize expenses not covered						
	above. (List miscellaneous expenses on line 24e. If						
	line 24e amount exceeds 10% of line 25, column						
	(A), amount, list line 24e expenses on Schedule O.)						
	SHARED PORTION OF CONTR.	32,802,410.	32,802,410.				
	SPECIAL AFFILIATE SUBSIDIES	6,569,000.	6,569,000.				
	SHARED PORTION OF BEQUEST	6,535,702.	6,535,702.				
	POSTAGE	1,627,524.	899,003.	11,747.	716,774.		
	All other expenses	527,485.	405,395.	18,390.	103,700.		
	Total functional expenses. Add lines 1 through 24e	201,684,585.	164,312,771.	18,931,252.	18,440,562.		
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)				- 000 (000)		

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orm 990			Page 1
Part X	Balance Sheet Check if Schedule O contains a response or note to any line in this Pa	ort V	
		(A) Beginning of year	(B) End of year
1	Cash - non-interest-bearing	75,967,503. <b>1</b>	62,593,511
2	Savings and temporary cash investments	62,108,681. 2	
3	Pledges and grants receivable, net	48,044,523. 3	
4	Accounts receivable, net	505,384. 4	
5	Loans and other receivables from any current or former officer, director,		,,,,
-	trustee, key employee, creator or founder, substantial contributor, or 35%		
	controlled entity or family member of any of these persons	NONE 5	5 NOI
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).	NONE 6	NOI
2 7	Notes and loans receivable, net	NONE 7	
7 7 8 0 8 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Inventories for sale or use	NONE 8	
ξ g	Prepaid expenses and deferred charges	448,057.9	
-	Land, buildings, and equipment: cost or other	110,007.0	
	basis. Complete Part VI of Schedule D <b>10a</b> 72,085,935.		
F	Decision of the second depreciation         100         12,000,000         100         12,000,000         100	21,766,258.10	<b>C</b> 25,013,157
11	Investments - publicly traded securities.	237,570,483. 1	
12	Investments - other securities. See Part IV, line 11	335,844,810. 12	
13	Investments - program-related. See Part IV, line 11	NONE 1	
14		128,381. 14	
15	-	3,246,078. 1	
16	Other assets. See Part IV, line 11		
	Total assets. Add lines 1 through 15 (must equal line 33)		- , ,
17	Accounts payable and accrued expenses.		
18	Grants payable		
19		33,242. <b>1</b>	
20	Tax-exempt bond liabilities	NONE 2	
21	Escrow or custodial account liability. Complete Part IV of Schedule D	NONE 2'	1 NO
22	Loans and other payables to any current or former officer, director,		
	trustee, key employee, creator or founder, substantial contributor, or 35%		•
	controlled entity or family member of any of these persons	NONE 22	
23	Secured mortgages and notes payable to unrelated third parties	NONE 2	-
24 25	Unsecured notes and loans payable to unrelated third parties	NONE 24	4 NO
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X		
		124 022 044	<b>-</b> 122 001 170
20	of Schedule D	134,032,844. 2	
26	Total liabilities. Add lines 17 through 25         Organizations that follow FASB ASC 958. check here       X	145,527,053. 20	6 148,492,194
ŝ	Organizations that follow FASB ASC 958, check here X and complete lines 27, 28, 32, and 33.		
27	Net assets without donor restrictions	274 512 522	7 410 000 010
28	Net assets with donor restrictions.	374,512,532. 2	
20	Organizations that do not follow FASB ASC 958, check here	265,590,573. 2	8 267,190,180
5	and complete lines 29 through 33.		
27 28 29 30 31 32	Capital stock or trust principal, or current funds		0
29	Paid-in or capital surplus, or land, building, or equipment fund	2	
2 31	Retained earnings, endowment, accumulated income, or other funds	-	-
5 32	Total net assets or fund balances	<b>3</b> 640 102 105 <b>3</b>	
D 32 Z 33		640,103,105. <b>3</b>	
2 33	Total liabilities and net assets/fund balances	785,630,158. <b>3</b>	<u>3 828,604,389</u>

Form **990** (2023)

Form 99	90 (2023)				Pa	ge <b>12</b>
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					.Χ
1	Total revenue (must equal Part VIII, column (A), line 12)	1	18	5 <b>,</b> 1	46,	<u>988</u> .
2	Total expenses (must equal Part IX, column (A), line 25)	2	20	1,6	84,	<u>585</u> .
3	Revenue less expenses. Subtract line 2 from line 1	3	-1	6 <b>,</b> 5	37,	<u>597</u> .
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	64	0,1	03,	<u>105</u> .
5	Net unrealized gains (losses) on investments	5	5	9,7	28,	<u>445</u> .
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	-	3 <b>,</b> 1	81,	<u>758</u> .
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10	68	0,1	12,	<u>195</u> .
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			,		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain	on			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Χ
	If "Yes," check a box below to indicate whether the financial statements for the year were con	npiled	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 audi					
	separate basis, consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	ersight	of			
	the audit, review, or compilation of its financial statements and selection of an independent accounta	nt?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, ex	kplain	on			
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	th in t	he			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	ergo	the			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such au	udits .		3b		
				Form	990	(2023)

SCHE	DU	LE	Α
(Form	990	)	

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

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service			Go to www.irs.gov/Form990 for instructions and the latest information.					
Name of the organization AMERICAN		MERICAN C	CIVIL LIBERTI	ES UNION FOUNDA	TION,		Employer identifi	cation number
INC							13-6	213516
Par	rt I Reason fo	r Public Ch	arity Status. (All	organizations must	comple	ete this p	part.) See instructior	IS.
The	organization is not	a private fou	ndation because it	is: (For lines 1 throug	gh 12, ch	eck only	one box.)	
1	A church, con	vention of ch	urches, or associa	tion of churches desc	ribed in <b>s</b>	ection 1	70(b)(1)(A)(i).	
2				. (Attach Schedule E				
3	A hospital or a	a cooperative	hospital service o	rganization described	in <b>sectio</b>	n 170(b)	(1)(A)(iii).	
4	A medical res	earch organiz	zation operated in	conjunction with a hos	spital de	scribed in	n section 170(b)(1)(A)	(iii). Enter the
	hospital's nam	-						
5	•	•	for the benefit of Complete Part II.)	a college or universit	y ownee	d or ope	rated by a governme	ental unit described in
6			. ,	rnmental unit describe	d in sect	tion 170(	b(1)(A)(v)	
7		•	•					om the general public
-			)(1)(A)(vi). (Compl	-		ge		sin the general passe
8				<b>b)(1)(A)(vi).</b> (Complete	Part II.)			
9							I in conjunction with a	land-grant college
•			-			•	name, city, and state o	• •
	university:		grant conege of ag		юпо). Е		namo, ory, and orato o	
10	An organization receipts from support from g	activities rela gross investm	ited to its exempt f nent income and u	functions, subject to c	ertain ex able inco	ceptions	ntributions, membersh s; and (2) no more thar s section 511 tax) from e Part III.)	n 331/3 % of its
11				usively to test for publi				
12	An organizatio	on organized a	and operated exclu	sively for the benefit of	of, to per	form the	functions of, or to car	ry out the purposes of
		-			-			ction 509(a)(3). Check
							and complete lines 1	
а	Tvpe I. A su	pporting org	anization operated	. supervised. or contr	olled by	its supp	orted organization(s),	typically by giving
	• •						the directors or truste	
		-		e Part IV, Sections A		, ,		
b		-	-			n with its	supported organizati	on(s). bv having
	• •		•				is that control or man	
		-		, Sections A and C.				5 11
с		. ,	•		ated in c	onnectio	n with, and functional	lly integrated with,
		-		s). You must comple				, ,
d		-					ection with its suppor	ted organization(s)
		-			-		oution requirement and	
		-		omplete Part IV, Sect	-			
е			,	•			hat it is a Type I, Type I	I. Type III
		-		ionally integrated sup			•• ••	, ,,
f		-						
g	Provide the follow	ing information	on about the supp	orted organization(s).				
	(i) Name of supported of		(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount of
				(described on lines 1-10		ur governing	support (see	other support (see
				above (see instructions))	Yes	ment? No	instructions)	instructions)
(A)								
(B)								
(C)								
(D)								
(E)								
Tota	al							
				fan Fann 000 an 000 F7				· · · · · /= · · · · · · ·

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. JSA 3E1210 1.000

### Schedule A (Form 990) 2023

Part II

### Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	176,437,112.	227,368,352.	213,682,199.	184,197,455.	169,102,497.	970,787,615.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						NONE
3	The value of services or facilities furnished by a governmental unit to the organization without charge						NONE
4	Total. Add lines 1 through 3	176,437,112.	227,368,352.	213,682,199.	184,197,455.	169,102,497.	970,787,615.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						59,897,253.
6	Public support. Subtract line 5 from line 4						910,890,362.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	176,437,112. 6,692,573.	227,368,352. 4,199,925.	213,682,199. 4,667,409.	184,197,455. 7,734,307.	169,102,497. 8,640,735.	970,787,615. 31,934,949.
9	Net income from unrelated business activities, whether or not the business is regularly carried on			332,236.	21,601.		353,837.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	NONE	NONE	NONE	1,730,785.	330,169.	2,060,954.
11	Total support. Add lines 7 through 10						1,005,137,355.
12	Gross receipts from related activities, etc. (s	ee instructions) .				12	29,012,857.
13	First 5 years. If the Form 990 is for organization, check this box and stop here		<u></u>	, third, fourth,	or fifth tax yea	ar as a section	501(c)(3)
Sec	tion C. Computation of Public Supp		•				
14	Public support percentage for 2023 (lin					14	90.62 %
15	Public support percentage from 2022					15	92.74 <b>%</b>
16a	331/3% support test - 2023. If the org						
	box and stop here. The organization qu						
b	331/3% support test - 2022. If the org						
	this box and <b>stop here</b> . The organization	-		-			
17a	10%-facts-and-circumstances test - 2	-					
	10% or more, and if the organization					-	
	Part VI how the organization meets t			-	-		
	organization						
D	10%-facts-and-circumstances test - 2						
	15 is 10% or more, and if the organization meets					-	
	in Part VI how the organization meets			-	-		
18	organization Private foundation. If the organizatio						
10	-						
	instructions						<u>••••</u>

Schedule A (Form 990) 2023

#### If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support (b) 2020 (e) 2023 (f) Total Calendar year (or fiscal year beginning in) (a) 2019 (c) 2021 (d) 2022 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 . 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . . . . 5 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . . . 6 Total. Add lines 1 through 5.... 7a Amounts included on lines 1, 2, and 3 received from disqualified persons . . . **b** Amounts included on lines 2 and 3 received from other than disgualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b. . . . . . . . . . . . Public support. (Subtract line 7c from 8 line 6.) . . . . . . . . . Section B. Total Support (c) 2021 (e) 2023 (a) 2019 (b) 2020 (d) 2022 (f) Total Calendar year (or fiscal year beginning in) 9 Amounts from line 6. 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources..... b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . . c Add lines 10a and 10b . . . . . . . . Net income from unrelated business 11 activities not included on line 10b, whether or not the business is regularly carried on. 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 14 organization, check this box and **stop here** Section C. Computation of Public Support Percentage Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f)) % 15 15 Public support percentage from 2022 Schedule A, Part III, line 15..... 16 16 % Section D. Computation of Investment Income Percentage Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))..... % 17 17 Investment income percentage from 2022 Schedule A, Part III, line 17 % 18 18

19a 331/3% support tests - 2023. If the organization did not check the box on line 14, and line 15 is more than 331/3%, and line 17 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization . . . b 331/3% support tests - 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization . .

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

20

## Schedule A (Form 990) 2023

Part III

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.

### Part IV Supporting Organizations

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

## Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- **c** Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in Part VI.*
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*
- **c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in Part VI.*
- **10 a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below.* 
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Schedu	le A (Form 990) 2023		I	Page <b>5</b>
Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in <b>Part VI.</b>	11c		
Sect	on B. Type I Supporting Organizations			
			Yes	No

1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

#### Section C. Type II Supporting Organizations

 Yes
 No

 1
 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).
 Image: Control organization was vested in the same persons that controlled or managed the support of the support of

### Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in <b>Part VI</b> how</i>			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization</i> 's			
	supported organizations played in this regard.	3		

### Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).						
а	The organization satisfied the Activities Test. Complete line 2 below.						
b	The organization is the parent of each of its supported organizations. Complete line 3 below.						
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	e instru	ctions	s).			
•	A stratility of Taraka American Kings On and Ok to Jaco	١	Yes	N			
2	Activities Test. Answer lines 2a and 2b below.						

а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify
	those supported organizations and explain how these activities directly furthered their exempt purposes,
	how the organization was responsive to those supported organizations, and how the organization determined
	that these activities constituted substantially all of its activities.

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

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

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

2a

2b

3a

2

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

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990) 2023

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Schedu	le A (Form 990) 2023				Page <b>7</b>
Part	V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizat	ions (continued)		
Sect	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish ex			1	
2	Amounts paid to perform activity that directly furthers exer	npt purposes of support	ed		
	organizations, in excess of income from activity			2	
3				3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - p	rovide details in <b>Part VI</b> )		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which	the organization is resp	onsive		
	(provide details in <b>Part VI</b> ). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023	IS	(iii) Distributable Amount for 2023
_1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023				
	(reasonable cause required - <i>explain in <b>Part VI</b>).</i> See				
	instructions.				
3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
C	From 2020				
d	From 2021				
e	From 2022				
f	Total of lines 3a through 3e				
<u>g</u>	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from				
	Section D, line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, explain in <b>Part VI.</b> See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, <i>explain in</i>				
	Part VI. See instructions.			_	
7	Excess distributions carryover to 2024. Add lines 3j				
0	and 4c. Breakdown of line 7:				
8	Excess from 2019				
 	Excess from 2020				
<u>р</u> С	Excess from 2021				
d	Excess from 2022				
e	Excess from 2022				
6					

Schedule A (Form 990) 2023

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

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2019	2020	2021	2022	2023	TOTAL
LEGAL SETTLEMENT TUITION & FEES MISCELLANEOUS INCOME	NONE NONE NONE	NONE NONE NONE	NONE	1,006,583. NONE 724,202.	NONE 185,850. 144,319.	1,006,583. 185,850. 868,521.
MISCHIRAGOS INCOM	NONE	NONE	NONE	124,202.	144,010.	000,021.
TOTALS	NONE	NONE	NONE	1,730,785.	330,169.	2,060,954.

#### Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

## Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2023

Name of the organization

AMERICAN	CIVIL	LIBERTIES	UNION	FOUNDATION,

INC.

13-6213516

Employer identification number

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

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

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

#### General Rule

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

### **Special Rules**

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

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

**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).

Schedule B (Form 990) (2023) Name of organization AMERICAN CIVIL LIBERTIES UNION FOUNDATION,

INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
	N/A	\$20,000,000.	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		
2	N/A	\$12,500,000.	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		
3	N/A	\$4,400,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
4	N/A	\$4,000,000.	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		
5	N/A	\$3,992,989.	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		

Schedule B (Form 990) (2023)

Schedule B (F	Form 990) (2023)		Page <b>3</b>		
Name of organization AMERICAN CIVIL LIBERTIES UNION FOUNDATION,		ON, Employer id	entification number		
	INC.	13-	-6213516		
Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.					
(a) No.	(b)	(c)	(d)		

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
3	REAL PROPERTY		
		<b>\$</b> \$	01/16/2024
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Schedule B (Form 990) (2023)

Schedule B ( Name of or	(Form 990) (2023)	TEO INTON FOUNDA	T ON	Page 4 Employer identification number
	ganization AMERICAN CIVIL LIBERT INC.	IES UNION FOUNDA	IIION,	13-6213516
Part III	<b>Exclusively</b> religious, charitable, etc. (10) that total more than \$1,000 for the following line entry. For organizati contributions of \$1,000 or less for the Use duplicate copies of Part III if additi	<b>the year from any o</b> ons completing Part I e year. (Enter this info	ne contributor. Co II, enter the total o prmation once. Se	<b>bed in section 501(c)(7), (8), or</b> omplete columns <b>(a)</b> through <b>(e) and</b> f <i>exclusively</i> religious, charitable, etc.,
(a) No. from Part I	(b) Purpose of gift	(c) Use of		(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer and ZIP + 4	-	ip of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of	f gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer and ZIP + 4	-	ip of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of	f gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer and ZIP + 4	-	ip of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of	f gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer and ZIP + 4	-	ip of transferor to transferee

am	e of organization	ganizations: Complete Part III.		Employer ide	entification number
INC		CAN CIVIL LIBERTIES UNIC	IN FOUNDATION,		213516
		organization is exempt under	section 501(c) or		
1	-	the organization's direct and ind			
•	definition of "political camp	•		aigh doimide in Fait	
2		expenditures. See instructions		\$	
3	Volunteer hours for politica	l campaign activities. See instructio	ns	· · · · · · · · · · · · · · · ·	
Pai	t I-B Complete if the	organization is exempt under	section 501(c)(3).		
1	Enter the amount of any ex	cise tax incurred by the organization	on under section 495	5\$	
2	Enter the amount of any ex	cise tax incurred by organization m	anagers under sect	ion 4955 \$	
3		a section 4955 tax, did it file Form			
					Yes No
	If "Yes," describe in Part IV.				
Pa	•	organization is exempt under		• • • • • •	3).
1		expended by the filing organizatior			
2		ng organization's funds contributed	0		
3 4 5	line 17b Did the filing organization fi Enter the names, addresses organization made paymen	enditures. Add lines 1 and 2. En le <b>Form 1120-POL</b> for this year? s and employer identification numb its. For each organization listed, er	ber (EIN) of all section the the amount pair	on 527 political organiz from the filing organiz	A Section Action
		Itributions received that were pron ind or a political action committee ( (b) Address			
1)	as a separate segregated fu	nd or a political action committee (	PAC). If additional sp	(d) Amount paid from filing organization's	information in Part IV. (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
	as a separate segregated fu	nd or a political action committee (	PAC). If additional sp	(d) Amount paid from filing organization's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
(1) (2) (3)	as a separate segregated fu	nd or a political action committee (	PAC). If additional sp	(d) Amount paid from filing organization's	information in Part IV. (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
2)	as a separate segregated fu	nd or a political action committee (	PAC). If additional sp	(d) Amount paid from filing organization's	information in Part IV. (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.
2) 3)	as a separate segregated fu	nd or a political action committee (	PAC). If additional sp	(d) Amount paid from filing organization's	information in Part IV. (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.

**Political Campaign and Lobbying Activities** For Organizations Exempt From Income Tax Under Section 501(c) and Section 527

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

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

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

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

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

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

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

SCHEDULE C (Form 990)

Department of the Treasury

JSA 3E1264 1.000

1347VD 702V

OMB No. 1545-0047

ഹ 12 **Open to Public** Inspection

Page **2** Schedule C (Form 990) 2023 Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)). Check Α if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures). **B** Check if the filing organization checked box A and "limited control" provisions apply. Limits on Lobbying Expenditures (b) Affiliated (a) Filing (The term "expenditures" means amounts paid or incurred.) organization's totals group totals 1a Total lobbying expenditures to influence public opinion (grassroots lobbying) . . . . 119,151. **b** Total lobbying expenditures to influence a legislative body (direct lobbying) 553,537. 672,688. d Other exempt purpose expenditures ..... 180,444,249. e Total exempt purpose expenditures (add lines 1c and 1d)..... 181,116,937. f Lobbying nontaxable amount. Enter the amount from the following table in both columns. 1,000,000. If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: not over \$500,000, 20% of the amount on line 1e. over \$500,000 but not over \$1,000,000, \$100,000 plus 15% of the excess over \$500,000. over \$1,000,000 but not over \$1,500,000, \$175,000 plus 10% of the excess over \$1,000,000 over \$1,500,000 but not over \$17,000,000, \$225,000 plus 5% of the excess over \$1,500,000. over \$17,000,000, \$1,000,000. g Grassroots nontaxable amount (enter 25% of line 1f) 250,000. i Subtract line 1f from line 1c. If zero or less, enter -0-\_\_\_\_\_ j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 No Yes

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

	Lobbying Expenditures During 4-Year Averaging Period							
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2020	<b>(b)</b> 2021	<b>(c)</b> 2022	<b>(d)</b> 2023	<b>(e)</b> Total		
2a	Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.		
b	Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.		
с	Total lobbying expenditures	702,973.	779 <b>,</b> 636.	919,039.	672,688.	3,074,336.		
d	Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.		
e	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.		
f	Grassroots lobbying expenditures	227,570.	242,321.	199,671.	119,151.	788,713.		

Schedule C (Form 990) 2023

or	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	, (a)		) (b)			
	cription of the lobbying activity.	Yes	No	Å	Amo	unt	
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:						
а	Volunteers?						
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?						
С	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 h	Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
h i	Other activities?						
i	Total. Add lines 1c through 1i						
J 2a	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?						
b	If "Yes," enter the amount of any tax incurred under section 4912						
ĉ	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?						
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).	(c)(5)	, or s	ection			
						Yes	No
	Were substantially all (90% or more) dues received nondeductible by members?				1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2		
}	Did the organization agree to carry over lobbying and political campaign activity expenditures from				3		
Pa	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" ( answered "Yes."				ne :	3, is	
1	Dues, assessments and similar amounts from members			1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amou	nts o	of				
	political expenses for which the section 527(f) tax was paid).						
а	Current vear			2a			

2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Supplemental Information

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

excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying

and political expenditures next year?.....

Taxable amount of lobbying and political expenditures. See instructions.....

С

3

4

5 Taxa Part IV

Schedule C (Form 990) 2023

2b

2c

3

4

5

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and

-	HEDULE D rm 990)		ental Financia		6		OMB No. 1545-0047
(. <b>•</b>		Complete if th		2023			
		Part IV, line 6, 7,	8, 9, 10, 11a, 11b, 11c, Attach to Form 99		120.		Open to Public
	artment of the Treasury nal Revenue Service	Go to www.irs.gov/l	Form990 for instruction		ation.		Inspection
	e of the organization	AMERICAN CIVIL LIBERT	IES UNION FOUND	DATION,	Em	ployer identificat	
INC	2.					13-62135	16
Pa	art I Organiza	tions Maintaining Donor Adv	vised Funds or Othe	r Similar Funds or	Acc	ounts	
	Complete	e if the organization answered	"Yes" on Form 990	, Part IV, line 6.			
			(a) Donor adv	ised funds		(b) Funds and	other accounts
1	Total number at e	nd of year					
2		of contributions to (during year)					
3		of grants from (during year)					
4		at end of year.					
5		ion inform all donors and donor		hat the assets held	in do	nor advised	
	-	nization's property, subject to the					Yes No
6	-	on inform all grantees, donors, a	-	-			
	only for charitable	e purposes and not for the bene	fit of the donor or do	nor advisor, or for a	ny otl	her purpose	
	conferring imperm	nissible private benefit?					Yes No
Pa	art II Conserva	tion Easements					
		e if the organization answered					
1		servation easements held by the					
	Preservatio	n of land for public use (for example	e, recreation or education)			• •	portant land area
	Protection of	of natural habitat		Preservation	of a c	ertified histor	ic structure
		n of open space					
2	-	through 2d if the organization h	eld a qualified conserv	vation contribution in	the f		
		last day of the tax year.				Held at the	End of the Tax Year
а		onservation easements			2a		
b	Total acreage res	tricted by conservation easement	s		2b		
С		vation easements on a certified			2c		
d		vation easements included on lir	-				
		tructure listed in the National Re	-		2d		
3	Number of conse	rvation easements modified, tra	insferred, released, ex	tinguished, or termi	natec	d by the orga	inization during the
	tax year						
4		where property subject to conse					
5	-	ation have a written policy reg				-	
•	,	orcement of the conservation ea					
6	Staff and volunteer	hours devoted to monitoring, insp	becting, handling of viol	ations, and enforcing	conse	ervation easem	ents during the year
-	Amount of overage		ting bandling of violati	and onforcing of	noor	vation	opto during the year
7	Amount of expens	es incurred in monitoring, inspec	ung, nanuling of violati	ons, and enforcing co	nser	vationeasem	ents during the year
8	Does each conso	rvation easement reported on lin	e 2d above satisfy the	requirements of soc	tion 1	70(h)(/)(R)(i)	
0		)(4)(B)(ii)?		-			
9		ibe how the organization reports					
5		e, if applicable, the text of the foc					
		counting for conservation easeme	0				
Pa		tions Maintaining Collections		reasures, or Other	· Sim	ilar Assets	
		e if the organization answered					
1a	If the organization of art, historical t	n elected, as permitted under FA treasures, or other similar asse Part XIII the text of the footnote	ASB ASC 958, not to	report in its revenue hibition, education,	e stat or re	tement and b search in fui	alance sheet works therance of public
b	If the organization art, historical treat	n elected, as permitted under Fa sures, or other similar assets he	ASB ASC 958, to rep eld for public exhibitio	ort in its revenue s	atem	ent and bala	
		ing amounts relating to these iter				<u>^</u>	
	(I) Revenue inclué	ded on Form 990, Part VIII, line 1			• • •	••••	
•		ed in Form 990, Part X					
2	-	n received or held works of a s required to be reported under F			ISSEIS	s ior financia	i gain, provide the
а	Revenue included	on Form 990, Part VIII, line 1.	ADD ADC 900 Telating			¢	
b	Assets included in	Form 990, Part X				····ψ. ···\$	

For Paperwork Reduction Act Notice	, see the Instructions for Form 990.
JSA	
3E1268 1.000	

Schedule D (Form 990) 2023

Sche	dule D (Form 990) 2023									Page 2
Ра	rt III Organizations Maintaini	ng Collections of	Art, Histo	rical Tre	asures, o	r Other	Similar A	Assets (d	continue	d)
3	Using the organization's acquisition	n, accession, and o	other recor	ds, checl	< any of th	e follow	ing that m	nake sigr	nificant u	se of its
	collection items (check all that apply	y).		_						
а	Public exhibition		d	Loan	or exchange	e prograr	n			
b	Scholarly research		е	Other						
С	Preservation for future gener									
4	Provide a description of the organ	ization's collections	s and expla	ain how 1	hey furthe	the org	ganization'	s exemp	t purpos	e in Part
	XIII.									
5	During the year, did the organizatio							_		
	assets to be sold to raise funds rath		ained as pa	rt of the o	organizatio	n's collec	tion?		Yes	No
Pa	rt IV Escrow and Custodial A			000 5	<b>Name (N / 1844</b> )	0				
	Complete if the organiza 990, Part X, line 21.	tion answered "Ye	es" on For	m 990, F	art IV, line	e 9, or re	eported a	n amour	nt on Fo	rm
1a	Is the organization an agent, trust	ee custodian or o	ther interm	ediary fo	or contribut	ions or	other ass	ets not		
1 a	included on Form 990, Part X?			-					Yes	No
b	If "Yes," explain the arrangement in	Part XIII and com	plete the fo	lowing tak	ole					
				io mig tai				Amount		
с	Beginning balance				1c			/ into and		
d	Additions during the year.									
e	Distributions during the year									
f	Ending balance									
2a	Did the organization include an amo					ustodial	account lia	bility?	Yes	No
b	If "Yes," explain the arrangement ir									
	rt V Endowment Funds				· · ·					
	Complete if the organiza	tion answered "Ye	es" on For	m 990, F	Part IV, line	e 10.				
		(a) Current year	<b>(b)</b> Prio	r year	(c) Two yea	irs back	(d) Three y	ears back	(e) Four	ears back
1a	Beginning of year balance	389,188,807.	409,0	38,093.	369,839,	752.	243,44	1,145.	258,9	52,515.
b	Contributions	15,258,434.	17,9	91,383.	31,778,	028.	27,72	24,448.	10,2	80,129.
c	Net investment earnings, gains,									
	and losses	45,737,309.	-22,5	98,584.	17,272,	545.	107,36	3,128.	-23,0	19,450.
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses	24,274,595.	15,2	42,085.	9,852,	232.	8,68	8,969.	2,7	72,049.
g	End of year balance	425,909,955.	389,1	38,807.	409,038,	093.	369,83	9,752.	243,4	41,145.
2	Provide the estimated percentage	of the current year	end balanc	e (line 1g,	column (a)	) held as:	:			
а	Board designated or quasi-endowm		%							
b	Permanent endowment 22.690	<u>)0</u> %								
С	Term endowment <u>12.5000</u> %									
_	The percentages on lines 2a, 2b, a									
3a	Are there endowment funds not in t	he possession of the	he organiza	ition that	are held ar	id admin	istered for	the		es No
	organization by:									
	(i) Unrelated organizations?								3a(i)	X
	(ii) Related organizations?								3a(ii)	X
	If "Yes" on line 3a(ii), are the relate	0	•			• • • • •	• • • • • •	• • • • •	3b	
4	Describe in Part XIII the intended u rt VI Land, Buildings, and Equ		ition's endo	wment iui	nas.					
Гđ	Complete if the organization	ation answered "Y	es" on Fo	m 990, l	Part IV, lin	e 11a. S	See Form	990, Pa	rt X, line	e 10.
	Description of property	(a) Cost o	r other basis	(b) Cost	or other basis	(c) Acc	cumulated		I) Book val	
1a	Land		stment)		ther) 25,713.	aepro	eciation		1 00	5,713.
b	Buildings				08,175.	10 9	99,638.			3,537.
c c	Leasehold improvements				21,896.		50,954.			),942.
d	Equipment.				30,151.		22,186.			7,965.
e	Other			1,5	,	-, / /	, _00.		20	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	I. Add lines 1a through 1e. (Column	(d) must equal For	m 000 Part	X line 1(	)c. column (	R))			25 01	3,157.

Schedule D (Form 990) 2023

#### Part VII **Investments - Other Securities**

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
<ul><li>(1) Financial derivatives</li></ul>		
(3) Other		
(A) PROPRIETARY EQUITY FUNDS	249,812,244.	FMV
(B) PRIVATE EQUITY FUNDS	135,472,708.	FMV
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, line 12, col. (B))	385,284,952.	

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

#### Part IX **Other Assets**

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

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

#### Part X **Other Liabilities**

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

1.     (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)BILL OF RIGHTS TRUST HELD FOR AFF.	54,936,948.
(3)DUE TO AFFILIATES	32,810,754.
(4)LIAB. UNDER SPLIT-INTEREST AGREEMEN	23,644,944.
(5)DUE TO ACLU	16,076,238.
(6) OPERATING LEASE LIABILITY	4,403,240.
(7)DUE TO ACLU-ACCRUED PENSION LIAB.	208,650.
(8)SECURITY DEPOSITS	10,404.
(9)	
	100 001 100

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

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII . JSA 3E1270 1.000

X

Schedu	ichedule D (Form 990) 2023 Page 4						
Part	Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return						
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.						
1	Total revenue, gains, and other support per audited financial statements	1	282,253,104.				
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:						
а	Net unrealized gains (losses) on investments						
b	Donated services and use of facilities <b>2b</b> 39,504,757.						
с	Recoveries of prior year grants						
d	Other (Describe in Part XIII.)						
е	Add lines 2a through 2d	2e	99,233,202.				
3	Subtract line 2e from line 1	3	183,019,902.				
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:						
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 2,127,086.						
b	Other (Describe in Part XIII.)	1					
C	Add lines 4a and 4b	4c	2,127,086.				
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	185,146,988.				
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu	irn					
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.						
1	Total expenses and losses per audited financial statements	1	239,899,525.				
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:						
а	Donated services and use of facilities <b>2a</b> 39,504,757.						
b	Prior year adjustments						
c	Other losses	1					
d	Other (Describe in Part XIII.) 2d 837,270.	1					
e	Add lines 2a through 2d	2e	40,342,026.				
3	Subtract line <b>2e</b> from line <b>1</b>	3	199,557,499.				
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:						
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a 2,127,086.						
b	Other (Describe in Part XIII.)	1					
~		1.					
C	Add lines <b>4a</b> and <b>4b</b>	4c	2,127,086.				
с 5	Add lines <b>4a</b> and <b>4b</b>		2,127,086.				

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

SEE SUPPLEMENTAL PAGE

#### Part XIII Supplemental Information (continued)

SCHEDULE D, PART V, LINE 4:

THE PURPOSE OF THE ENDOWMENT FUND IS TO BUILD AN ENDURING ENDOWMENT TO CARRY OUT THE WORK OF THE ACLU AND ITS AFFILIATES IN PROTECTING, PRESERVING AND EXPANDING THE CIVIL LIBERTIES OF ALL PERSONS IN THE UNITED STATES OF AMERICA.

SCHEDULE D, PART X, LINE 2:

THE ACLU FOUNDATION IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE U.S. IRC AND IS SUBJECT TO TAXES ON UNRELATED BUSINESS INCOME, AS APPLICABLE. THE 915 15TH STREET, LLC AND 104 GREENWICH AVENUE, LLC ARE TREATED AS DISREGARDED (TAX) ENTITIES.

THE ACLU FOUNDATION FILES TAX AND INFORMATION RETURNS WITH THE INTERNAL REVENUE SERVICE (IRS) AND WITH VARIOUS STATES.

MANAGEMENT EVALUATED THE FOUNDATION'S TAX POSITIONS AND CONCLUDED THAT THE ORGANIZATION HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADDITIONAL ADJUSTMENT OR DISCLOSURE TO THE ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS. GENERALLY, THE FOUNDATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY U.S. FEDERAL, STATE, OR LOCAL TAX AUTHORITIES FOR TAX YEARS BEFORE 2021, WHICH IS THE STANDARD STATUTE OF LIMITATIONS LOOK-BACK PERIOD.

## Part XIII Supplemental Information (continued)

SCHEDULE D, PART XII, LINE 2D:

BAD DEBT EXPENSES.....\$837,270

SCHEDULE G (Form 990)	Complete if t	Information Re	red "Yes" on	Form 990, F	Part IV, line 17, 18, or 1	-	omb №. 1545-0047
	-	ganization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ.				Open to Public	
Department of the Treasury Internal Revenue Service	to www.irs.gov/Form9	to www.irs.gov/Form990 for instructions and the latest information.				Inspection	
Name of the organization	AMERICAN CIV	IL LIBERTIES	UNION E	FOUNDAT	ION,	Employer identificati	on number
INC.						13-62135	
	e Activities. Comp EZ filers are not re	•			Yes" on Form 99	90, Part IV, line 1	7.
	the organization rais				activities. Check a	all that apply.	
a 🛛 Mail solicita	tions	e	X Solid	itation of	non-government g	rants	
<b>b</b> X Internet and	email solicitations	f			government grants	S	
c X Phone solic		g	Spe	cial fundra	ising events		
<b>d</b> X In-person so							
b If "Yes," list the	es listed in Form 990 10 highest paid indi least \$5,000 by the	, Part VII) or entity viduals or entities	in connec	tion with p	professional fundra	ising services?	X Yes No fundraiser is to be
<b>(i)</b> Name and add or entity (fu		(ii) Activity	custody o	draiser have or control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
SEE SUPPLEMENT	INFORMATION		Yes	No			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
		1	1	1			
					36,944,979.	350,259	. 36,594,720.
3 List all states in registration or lice	which the organiza ensing.	tion is registered c	or licensed	to solicit	contributions or	has been notified	l it is exempt from

AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN,

IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH,

OK, OR, PA, RI, SC, SD, TN, UT, VT, VA, WA, WV, WI, WY,

	edule art I	than \$15,000 of fundraising eve	ent contributions and g			
		gross receipts greater than \$5,000	0. (a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts				
Ř	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
enses	5	Noncash prizes				
	6	Rent/facility costs				
<b>Direct Expenses</b>	7	Food and beverages				
Dire	8	Entertainment				
	9	Other direct expenses				
	10	Direct expense summary. Add lir	nes 4 through 9 in colu	umn (d)		
Pa	art l	Net income summary. Subtract I Gaming. Complete if the org				reported more than
	-	\$15,000 on Form 990-EZ, lin	e 6a.			
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo		(d) Total gaming (add col. (a) through col. (c))
Re	1	Gross revenue				
enses	2	Cash prizes				
Expen	3	Noncash prizes				
Direct Exp	4	Rent/facility costs				
_	5	Other direct expenses				
	6	Volunteer labor	Yes %	bYes% No	Yes%	
	7	Direct expense summary. Add lir				
	8	Net gaming income summary. S	ubtract line / from line	e 1, column (d)	<u></u>	
	a	Enter the state(s) in which the orga Is the organization licensed to con If "No," explain:		in each of these state	es?	Yes No
10a I		Were any of the organization's gaming If "Yes," explain:	g licenses revoked, sus		ring the tax year?	Yes No

Sched	lule G (Form 990 or 990-EZ) 2023		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		
	formed to administer charitable gaming?	Yes	No
13	Indicate the percentage of gaming activity conducted in:		
а	The organization's facility 13a		%
b	An outside facility 13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address ►		
15 a	Does the organization have a contract with a third party from whom the organization receives gaming		
···u	revenue?	Yes	No
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the		
	amount of gaming revenue retained by the third party ► \$		
с	tense in the second		
	Name ►		
	Address ►		
16	Gaming manager information:		
	Name ▶		
	Gaming manager compensation ► \$		
	Description of services provided ►		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to	,	
	retain the state gaming license?	Yes	No
b			
	or spent in the organization's own exempt activities during the tax year 🕨 \$		
Par	t IV Supplemental Information. Provide the explanation required by Part I, line 2b, columns (iii) and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional infor (see instructions).		

### FORM 990, SCHEDULE G, LINE 2B - HIGHEST PAID INDIVIDUALS/ENTITIES

### \_\_\_\_\_

### NAME:

### LAUTMAN MASKA NEILL & COMPANY

### ADDRESS:

1730 RHODE ISLAND AVENUE NW, #301 WASHINGTON, DC 20036

## ACTIVITY :

FUNDRAISING CONSULTING

- CUSTODY OR CONTROL OF CONTRIBUTION?
- GROSS RECEIPTS FROM ACTIVITY : 33,606,819.
- AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER : 170,250.
- AMOUNT PAID TO (OR RETAINED BY) ORGANIZATION : 33,436,569.

### NAME :

MISSION WIRED

- ADDRESS:
  - 650 MASSACHUSETTS AVENUE NW, SUITE 505 WASHINGTON, DC 20001

### ACTIVITY :

FUNDRAISING CONSULTING

# CUSTODY OR CONTROL OF CONTRIBUTION? NO

- GROSS RECEIPTS FROM ACTIVITY : 3,078,211.
- AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER : 97,500.
- AMOUNT PAID TO (OR RETAINED BY) ORGANIZATION : 2,980,711.

### STATEMENT 1

NAME: DCM, INC.	
ADDRESS: 672 FULTON STREET, BROOKLYN, NY 11217	
ACTIVITY : FUNDRAISING CONSULTING	
CUSTODY OR CONTROL OF CONTRIBUTION? NO	
GROSS RECEIPTS FROM ACTIVITY :	180,345.
AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER :	78,877.
AMOUNT PAID TO (OR RETAINED BY) ORGANIZATION :	101,468.
NAME: GORDON & SCHWENKMEYER, INC. (GSI)	
ADDRESS: 20300 S. VERMONT AVENUE, SUITE 210 TORRANCE, CA 90502	
ACTIVITY : FUNDRAISING CONSULTING	
CUSTODY OR CONTROL OF CONTRIBUTION? NO	
GROSS RECEIPTS FROM ACTIVITY :	79,604.
AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER :	3,632.
AMOUNT PAID TO (OR RETAINED BY) ORGANIZATION :	75,972.

SCHEDULEI	U	<b>Brants</b> ar	nd Other A	Grants and Other Assistance to Organizations,	o Organiza	tions,		OMB No. 1545-0047
(Form 990)	Go	Government	nts, and Ir ganization ans	Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22	n the United orm 990, Part IV,	<b>I States</b> line 21 or 22.		2023
Department of the Treasury			Att	Attach to Form 990.	•			Open to Public
Internal Revenue Service		-	www.irs.gov/F	Go to <i>www.irs.gov/Form990</i> for the latest information.	test information.		; ; ; ;	Inspection
Name of the organization AMERICAN	MERICAN CIVIL LIBERTIES	TIES UNION	N FOUNDATION,	, N,			Employer identification number 1 3 - んつ1 3 5 1 ん	on number
	<b>General Information on Grants and Assistance</b>	d Assistance	0					
1 Does the organiz	Does the organization maintain records to substantiate the a the selection criteria used to award the grants or assistance?	ubstantiate th s or assistanc	e amount of the	grants or assistar	nce, the grantees	amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	s or assistance, and	X Yes
2 Describe in Part	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	lures for mor	itoring the use of grant	of grant funds in the L	United States.		, , , , , ,	]
Part II Grants an Part IV. lir	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	omestic Org	<b>janizations an</b> more than \$5.	d Domestic Gov 000. Part II can b	ernments. Com be dublicated if a	plete if the organiza Idditional space is n	ation answered "Y eeded.	es" on Form 990,
<b>1 (a)</b> Name and or gor	1 (a) Name and address of organization or government	( <b>p</b> ) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of noncash assistance	(h) Purpose of grant or assistance
	נערביני					(1911)		
P.O. BOX 6179 MONTGOMERY, AL 36106	ERY, AL 36106	63-0883872	501(C)(3)	1,535,325.				AFFILIATE PROGRAM
(2) ACLU FOUNDATION OF ALASKA	f ALASKA							
1057 W. FIREWEED LN. P	ANCHORAGE, AK 99503	23-7113202	501(C)(3)	301,399.				AFFILIATE PROGRAM
(3) ACLU FOUNDATION OF	f ARIZONA							
P.O. BOX 17148 PHOENIX, AZ 85011	<pre>&lt;, AZ 85011</pre>	23-7238580	501(C)(3)	568,000.				AFFILIATE PROGRAM
(4) ACLU FOUNDATION OF ARKANSAS	f ARKANSAS							
904 W. SECOND ST., #1	#1 LITTLE ROCK, AR 72201	71-0473676	501(C)(3)	32,000.				AFFILIATE PROGRAM
(5) ACLU FOUNDATION OF COLORADO	F COLORADO							
303 E. 17TH AVENUE, #350 DENVER,	350 DENVER, CO 80203	23-7028224	501(C)(3)	50,000.				AFFILIATE PROGRAM
(6) ACLU FOUNDATION OF CONNECTICUT	F CONNECTICUT							
330 MAIN ST., 1ST FL F	FL HARTFORD, CT 06106	06-0871754	501(C)(3)	75,000.				AFFILIATE PROGRAM
(7) ACLU FOUNDATION OF DELAWARE	f DELAWARE							
100 WEST 10TH ST, #603	#603 WILMINGTON, DE 19801	51-0220856	501(C)(3)	222,000.				AFFILIATE PROGRAM
(8) ACLU FOUNDATION OF FLORIDA	FLORIDA							
4343 W. FLAGLER ST., #	#400 MIAMI, FL 33134	23-7137529	501(C)(3)	1,479,420.				AFFILIATE PROGRAM
(9) ACLU FOUNDATION OF GEORGIA	F GEORGIA							
1100 SPRING ST NW, #640 ATLANTA,	10 ATLANTA, GA 30309	23-7115937	501(C)(3)	1,350,500.				AFFILIATE PROGRAM
(10) ACLU FOUNDATION OF	OF HAWAII							
P.O. BOX 3410 HONOLULU,	J, HI 96801	99-0192064	501(C)(3)	160,470.				AFFILIATE PROGRAM
(11) ACLU FOUNDATION OF IDAHO	F IDAHO							
P.O. BOX 1897 BOISE, I	ID 83701	82-0467428	501(C)(3)	465,000.				AFFILIATE PROGRAM
(12) ACLU FOUNDATION OF INDIANA	F INDIANA							
1031 E WASHINGTON ST I	E WASHINGTON ST INDIANAPOLIS, IN 46202	23-7398358	501(C)(3)	199,200.				AFFILIATE PROGRAM
	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	government o	organizations lis	ted in the line 1 tab	Je			52
3 Enter total numb	Enter total number of other organizations listed in the line 1 table	ed in the line	1 table		•			10
For Paperwork Reductic	For Paperwork Reduction Act Notice, see the Instructions for Form 990	ons for Form 9	90.				Sc	Schedule I (Form 990) 2023

SCHEDULEI	U	<b>Brants ar</b>	nd Other A	Grants and Other Assistance to Organizations,	o Organiza	tions,		OMB No. 1545-0047
(Form 990)	GO	Government	nts, and Ir ganization ans	Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.	n the United orm 990, Part IV,	<b>States</b> line 21 or 22.		2023
Department of the Treasury Internal Revenue Service		Go to	Att www.irs.gov/F	Attach to Form 990. www.irs.gov/Form990 for the latest information.	test information.			Open to Public Inspection
Name of the organization $_{ m Al}$	AMERICAN CIVIL LIBERTIES UNION FOUNDATION,	N FOUNDATION,					Employer identification number	on number
	oformation on Cranta and	Accietation 1					13-6213516	
Part I General II	General Information on Grams and Assistance	ASSISTANCE						
1 Does the organized of	Does the organization maintain records to substantiate the	bstantiate the		e grants or assistar	ice, the grantees	amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	s or assistance, and $\lceil$	Vec
2 Describe in Part	the selection citienta used to award the grants of assistance?	s or assistance lures for mon	itoring the use	of grant funds in the	United States.	ing the use of grant funds in the United States.		
Part II Grants an	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990,	omestic Orç	janizations an	id Domestic Gov	ernments. Com	plete if the organization	ation answered "Ye	es" on Form 990,
Part IV, lir	Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	iat received	more than \$5,	000. Part II can t	e duplicated if a	additional space is n	leeded.	
1 (a) Name an	<b>1 (a)</b> Name and address of organization or government	(p) EIN	<b>(c)</b> IRC section (if applicable)	(d) Amount of cash grant	<b>(e)</b> Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	(h) Purpose of grant or assistance
(1) ACLU FOUNDATION OF IOWA	F IOWA							
505 5TH AVENUE, #905 I	#905 DES MOINES, IA 50309	42-1002093	501(C)(3)	172,000.				AFFILIATE PROGRAM
(2) ACLU FOUNDATION OF KANSAS	F KANSAS							
6701 W 64TH ST. OVERLAND PARK, KS	AND PARK, KS 66202	43-0926406	501(C)(3)	447,000.				AFFILIATE PROGRAM
(3) ACLU FOUNDATION OF LOUISIANA	F LOUISIANA							
P.O. BOX 56157 NEW ORLEANS,	LEANS, LA 70156	72-0717944	501(C)(3)	2,008,268.				AFFILIATE PROGRAM
(4) ACLU FOUNDATION OF MAINE	F MAINE							
P.O. BOX 7860 PORTLAND, ME 04101	D, ME 04101	01-0367357	501(C)(3)	160,000.				AFFILIATE PROGRAM
(5) ACLU FOUNDATION OF MARYLAND	F MARYLAND							
3600 CLIPPER MILL RD BALTIMORE,	SALTIMORE, MD 21211	23-7209538	501(C)(3)	174,000.				AFFILIATE PROGRAM
(6) ACLU FOUNDATION OF MASSACHUSETTS	F MASSACHUSETTS							
211 CONGRESS STREET BOSTON, MA 02110	SSTON, MA 02110	23-7312949	501(C)(3)	250,000.				AFFILIATE PROGRAM
(7) ACLU FOUNDATION OF MICHIGAN	F MICHIGAN							
2966 WOODWARD AVE., DF	DETROIT, MI 48201	23-7243421	501(C)(3)	308,000.				AFFILIATE PROGRAM
(8) ACLU FOUNDATION OF MINNESOTA	F MINNESOTA							
2300 MYRTLE AVE, #180 ST. PAUL, MN	ST. PAUL, MN 55414	41-6050012	501(C)(3)	600,000.				AFFILIATE PROGRAM
(9) ACLU FOUNDATION OF MISSISSIPPI	F MISSISSIPPI							
P.O. BOX 2242 JACKSON, MS 39225	, MS 39225	64-0694013	501(C)(3)	751,500.				AFFILIATE PROGRAM
(10) ACLU FOUNDATION OF MISSOURI	F MISSOURI							
906 OLIVE ST., #1130 ST. LOUIS,	ST. LOUIS, MO 63101	43-6070952	501(C)(3)	118,917.				AFFILIATE PROGRAM
(11) ACLU FOUNDATION OF MONTANA	F MONTANA							
P.O. BOX 1968 MISSOULA, MT 59806	A, MT 59806	81-0445339	501(C)(3)	187,635.				AFFILIATE PROGRAM
(12) ACLU FOUNDATION OF NEBRASKA	F NEBRASKA							
134 SOUTH 13TH ST., LINCOLN, NE 68508	INCOLN, NE 68508	23-7259984	501(C)(3)	370,000.				AFFILIATE PROGRAM
	Enter total number of section $501(c)(3)$ and government organizations listed in the line 1 table	government o	rganizations lis	ted in the line 1 tab	le			
3 Enter total numb	Enter total number of other organizations listed in the line 1	ed in the line	1 table	· · · ·	· · · ·			

Schedule I (Form 990) 2023

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

SCHEDULEI	•	Grants an	id Other A	Grants and Other Assistance to Organizations.	o Organiza	tions,		OMB No. 1545-0047
(Form 990)	Com Com	Government	its, and In ganization ansv	Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22	n the United orm 990, Part IV,	<b>J States</b> line 21 or 22.		2023
Department of the Treasury			Att	Attach to Form 990.	test information			Open to Public Inspection
Name of the organization							Emplover identification number	on number
	INGUIS ON THE OPENICATION AMERICAN CIVIL LIBERTIES UNION FOUNDATION, INC.	ON FOUNDATION,					13-6213516	
t I	General Information on Grants and Assistance	d Assistance						
<ol> <li>Does the organi: the selection crit</li> </ol>	Does the organization maintain records to substantiate the the structure content of the selection criteria used to award the grants or assistance?	ubstantiate the ts or assistance		grants or assistanc	ice, the grantees'	amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	s or assistance, and	Yes No
2 Describe in Part	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	dures for mon	itoring the use o	of grant funds in the				
Part II Grants an	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Dart IV time 21, for any recipient that received more than \$5,000. Dart II can be dunlicated if additional snace is needed.	omestic Org	Janizations an	d Domestic Gov	ernments. Com	plete if the organizational space is n	ation answered "Y	es" on Form 990,
						(f) Method of valuation	All Description of	(F) D
1 (a) Name an or	<ol> <li>(a) Name and address of organization or government</li> </ol>	( <b>p</b> ) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) ACLU FOUNDATION OF NEVADA	f NEVADA							
601 S. RANCHO DR, #B11 LAS VEGAS, NV	l LAS VEGAS, NV 89106	88-0217086	501(C)(3)	497,500.				AFFILIATE PROGRAM
(2) ACLU FOUNDATION OF NEW HAMPSHIRE	F NEW HAMPSHIRE							
18 LOW AVE., CONCORD, NH 03301	NH 03301	02-0347237	501(C)(3)	210,120.				AFFILIATE PROGRAM
(3) ACLU FOUNDATION OF NEW JERSEY	F NEW JERSEY							
P.O. BOX 32159 NEWARK, NJ 07102	, NJ 07102	22-2010593	501(C)(3)	460,000.				AFFILIATE PROGRAM
(4) ACLU FOUNDATION OF NEW MEXICO	F NEW MEXICO							
P.O. BOX 566 ALBUQUERQUE, NM 87103	QUE, NM 87103	85-0275276	501(C)(3)	435,000.				AFFILIATE PROGRAM
(5) ACLU FOUNDATION OF NORTH CAROLINA	F NORTH CAROLINA							
P.O. BOX 28004 RALEIGH, NC 27611	H, NC 27611	56-1019644	501(C)(3)	707,960.				AFFILIATE PROGRAM
(6) ACLU FOUNDATION O.	(6) ACLU FOUNDATION OF NORTHERN CALIFORNIA							
39 DRUMM STREET SAN FRANCISCO,	RANCISCO, CA 94111	94-0279770	501(C)(3)	125,000.				AFFILIATE PROGRAM
(7) ACLU FOUNDATION OF OHIO	E OHIO							
4506 CHESTER AVE., CLH	CLEVELAND, OH 44103	23-7137105	501(C)(3)	375,000.				AFFILIATE PROGRAM
(8) ACLU FOUNDATION OF OKLAHOMA	F OKLAHOMA							
P.O. BOX 13327 OKLAHOMA CITY,	4A CITY, OK 73113	73-1003205	501(C)(3)	97,000.				AFFILIATE PROGRAM
(9) ACLU FOUNDATION OF OREGON	F OREGON							
506 SW 6TH AVE., #700 PORTLAND,	PORTLAND, OR 97204	23-7048829	501(C)(3)	100,000.				AFFILIATE PROGRAM
(10) ACLU FOUNDATION OF FENNSYLVANIA	F PENNSYLVANIA							
P.O. BOX 60173 PHILADELPHIA, PA 19102	ELPHIA, PA 19102	23-1742013	501(C)(3)	932,000.				AFFILIATE PROGRAM
(11) ACLU FDN. OF SAN DIEGO &	DIEGO & IMPERIAL COUNTIES							
P.O. BOX 87131 SAN DIEGO, CA	EGO, CA 92138	33-0325791	501(C)(3)	431,264.				AFFILIATE PROGRAM
(12) ACLU FOUNDATION OF SOUTH CAROLINA	F SOUTH CAROLINA							
P.O. BOX 1668 COLUMBIA, SC 29202	A, SC 29202	27-1942832	501(C)(3)	390,000.				AFFILIATE PROGRAM
	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	government o	rganizations list	ted in the line 1 tab	le			
3 Enter total numb	Enter total number of other organizations listed in the line 1	ted in the line	1 table					
For Paperwork Reductiv	For Paperwork Reduction Act Notice, see the Instructions for Form 990	ions for Form 99	.0				Sc	Schedule I (Form 990) 2023

SCHEDULE I	U	<b>Grants</b> ar	nd Other A	Grants and Other Assistance to Organizations,	o Organiza	tions,		OMB No. 1545-0047
(Form 990)	GO Comp	Government complete if the org	nts, and In ganization ans	Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.	n the United orm 990, Part IV,	I States line 21 or 22.		2023
Department of the Treasury Internal Revenue Service		Go to	Att www.irs.gov/F	Attach to Form 990. www.irs.gov/Form990 for the latest information.	test information.			Open to Public Inspection
	AMERICAN CIVIL LIBERTIES UNION FOUNDATION,	ON FOUNDATION,					Employer identification number	n number
INC.							13-6213516	
Part I General In	General Information on Grants and Assistance	d Assistance	C)					
1 Does the organiz	Does the organization maintain records to substantiate the	ubstantiate th		e grants or assista	nce, the grantees'	amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	s or assistance, and $_{\Gamma}$	
the selection crite 2 Describe in Part I	the selection criteria used to award the grants or assistance?	s or assistano dures for mon	e?	of grant funds in the	• United States.			Yes
Part II Grants an	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990,	omestic Orç	ganizations an	id Domestic Gov	ernments. Com	plete if the organiza	ation answered "Ye	ss" on Form 990,
Part IV, lin	Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	nat received	more than \$5,	000. Part II can t	be duplicated if a	dditional space is n	eeded.	
1 (a) Name and or g	<b>1 (a)</b> Name and address of organization or government	(p) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	(h) Purpose of grant or assistance
(1) ACLU FOUNDATION OF	' SOUTHERN CALIFORNIA							
1313 W 8TH STREET LOS	LOS ANGELES, CA 90017	95-2673361	501(C)(3)	640,000.				AFFILIATE PROGRAM
(2) ACLU FOUNDATION OF TEXAS	' TEXAS							
P.O. BOX 8306 HOUSTON, TX 77288	TX 77288	76-0343171	501(C)(3)	811,000.				AFFILIATE PROGRAM
(3) ACLU FOUNDATION OF THE DISTRICT	' THE DISTRICT OF COLUMBIA							
P.O. BOX 11637 WASHINGTON, DC	TON, DC 20008	52-6070446	501(C)(3)	50,000.				AFFILIATE PROGRAM
(4) ACLU FOUNDATION OF UTAH	' UTAH							
355 NORTH 300 WEST SALT LAKE CITY, UT 84103	T LAKE CITY, UT 84103	87-0439810	501(C)(3)	25,000.				AFFILIATE PROGRAM
(5) ACLU FOUNDATION OF VERMONT	' VERMONT							
P.O. BOX 277 MONTFELIER, VT 05601	R, VT 05601	23-7123046	501(C)(3)	165,000.				AFFILIATE PROGRAM
701 E. FRANKLIN ST., R	RICHMOND, VA 23219	52-1283242	501(C)(3)	347,221.				AFFILIATE PROGRAM
(7) ACLU FOUNDATION OF	OF WASHINGTON							
901 5TH AVE., SUITE 630	0 SEATTLE, WA 98164	23-7076867	501(C)(3)	50,000.				AFFILIATE PROGRAM
(8) ACLU FOUNDATION OF WEST VIRGINIA	' WEST VIRGINIA							
P.O. BOX 3952 CHARLESTON,	ON, WV 25339	55-0681531	501(C)(3)	600, 500.				AFFILIATE PROGRAM
(9) ACLU FOUNDATION OF WISCONSIN	WISCONSIN							
207 E. BUFFALO ST, #325 MILWAUKEE,	5 MILWAUKEE, WI 53202	39-6057574	501(C)(3)	460,800.				AFFILIATE PROGRAM
(10) ACLU OF ALABAMA								CHARITABLE
P.O. BOX 6179 MONTGOMERY,	RY, AL 36106	23-7093412	501(C)(4)	262,500.				ACTIVITIES
(11) ACLU OF ILLINOIS								CHARITABLE
150 N. MICHIGAN AVE, #	#600 CHICAGO, IL 60601	27-1629328	501(C)(4)	150,000.				ACTIVITIES
(12) ACLU OF KENTUCKY								CHARITABLE
315 GUTHRIE STREET LOU	STREET LOUISVILLE, KY 40202	61-0597514	501(C)(4)	992,000.				ACTIVITIES
	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	government c	rganizations lis	ted in the line 1 tab	le			
3 Enter total numbe	Enter total number of other organizations listed in the line 1	ted in the line	1 table					

Schedule I (Form 990) 2023

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

SCHEDULEI		Grants an	d Other A	Grants and Other Assistance to Organizations,	o Organiza	tions,		OMB No. 1545-0047
(Form 990)	<b>G</b> <sup>B</sup>	Government	its, and In ganization ansv	Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22	n the United orm 990, Part IV,	<b>I States</b> line 21 or 22.		2023
Department of the Treasury			Att.	Attach to Form 990.	test information			Open to Public Inspection
Name of the organization			1/106-01-010				Emnlover identification number	on number
	NAME OF A CONTRACTOR CIVIL LIBERTIES UNION FOUNDATION,	ON FOUNDATION,					13-6213516	
ţ	General Information on Grants and Assistance	d Assistance					_	
<ol> <li>Does the organi: the selection crit</li> </ol>	Does the organization maintain records to substantiate the the structure selection criteria used to award the grants or assistance?	ubstantiate the ts or assistance	amount of the	grants or assistar	ce, the grantees' eligibility	amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	or assistance, and	Yes No
2 Describe in Part	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	dures for moni	toring the use c	of grant funds in the	United States.			
Part II Grants an	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Dort 1/1 Jing 21. for any regiment that received more than #5,000. Dort II and to duninated if additional encode	Domestic Org	anizations an	d Domestic Gov	ernments. Com	plete if the organiza	ation answered "Y	es" on Form 990,
		וומו וברבואבח		חחח. רמו וו המוו ה	e auplicated II a	indianal space is n	cenen.	
<b>1 (a)</b> Name an or or	<b>1 (a)</b> Name and address of organization or government	( <b>b</b> ) EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	( <b>h</b> ) Purpose of grant or assistance
(1) ACLU OF NORTH CAROLINA	DLINA							CHARITABLE
P.O. BOX 28004 RALEIGH, NC	H, NC 27611	56-0863265	501(C)(4)	1,097,000.				ACTIVITIES
(2) ACLU OF OHIO								CHARITABLE
4506 CHESTER AVENUE CLEVELAND,	LEVELAND, OH 44103	34-0700606	501(C)(4)	17,500.				ACTIVITIES
(3) ACLU OF SOUTH CAROLINA	ALINA							CHARITABLE
P.O. BOX 1668 COLUMBIA,	A, SC 29202	27-1942885	501(C)(4)	790,000.				ACTIVITIES
(4) ACLU OF TENNESSEE								CHARITABLE
P.O. BOX 120160 NASHV	120160 NASHVILLE, TN 37212	62-0790133	501(C)(4)	400,000.				ACTIVITIES
(5) ACLU OF THE DISTR.	DISTRICT OF COLUMBIA							CHARITABLE
915 15TH ST. NW, WASHINGTON, DC 20005	INGTON, DC 20005	45-2857664	501(C)(4)	90,000.				ACTIVITIES
(6) ACLU OF UTAH								CHARITABLE
355 N. 300 W., #1 SALT LAKE CITY, UT	r lake city, ut 84103	27-1307106	501(C)(4)	5,567.				ACTIVITIES
(7) DRAG STORY HOUR								
584 CASTRO ST #2097 SI	SAN FRANCISCO, CA 94114	86-2721367	501(C)(3)	50,000.				AFFILIATE PROGRAM
(8) FRED T. KOREMATSU INSTITUTE	INSTITUTE							
P.O. BOX 29527 SAN FRANCISCO, CA	ANCISCO, CA 94129	81-3400947	501(C)(3)	15,000.				AFFILIATE PROGRAM
(9) HUMAN RIGHTS CAMPAIGN FOUNDATION	AIGN FOUNDATION							
1640 RHODE ISLAND AVE, WASHINGTON,	, WASHINGTON, DC 20036	52-1481896	501(C)(3)	25,000.				AFFILIATE PROGRAM
(10) HUMAN RIGHTS FIRST	6							
75 BROAD ST., 31ST FL NEW YORK, NY 10004	NEW YORK, NY 10004	13-3116646	501(C)(3)	14,476.				AFFILIATE PROGRAM
(11) JUSTICE IN MOTION, INC.	, INC.							
P.O. BOX 160128 BROOKLYN, NY 11216	LYN, NY 11216	72-1597864	501(C)(3)	50,000.				AFFILIATE PROGRAM
(12) NEW YORK CIVIL LI.	(12) NEW YORK CIVIL LIBERTIES UNION FOUNDATION							
125 BROAD ST., 19TH FL NEW YORK, NY 10004	L NEW YORK, NY 10004	13-6167267	501(C)(3)	250,000.				AFFILIATE PROGRAM
	Enter total number of section $501(c)(3)$ and government organizations listed in the line 1 table	government o	rganizations list	ted in the line 1 tab	le			
3 Enter total numb	Enter total number of other organizations listed in the line 1	ted in the line	1 table					
For Paperwork Reductive	For Paperwork Reduction Act Notice, see the Instructions for Form 990	tions for Form 99	0.				Sc	Schedule I (Form 990) 2023

SCHEDULE I	U	<b>Brants ar</b>	id Other A	Grants and Other Assistance to Organizations,	o Organiza	tions,		OMB No. 1545-0047
(Form 990)	Go	Government	its, and In ganization ansv	Governments, and Individuals in the United States complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.	n the United orm 990, Part IV,	<b>I States</b> line 21 or 22.		2023
Department of the Treasury Intemal Revenue Service		Go to	Att www.irs.gov/F	Attach to Form 990. Go to <i>www.irs.gov/Form990</i> for the latest information.	test information.			Open to Public Inspection
Name of the organization $_{ m Ah}$	Name of the organization AMERICAN CIVIL LIBERTIES UNION FOUNDATION,	N FOUNDATION,					Employer identification number	on number
INC.							13-6213516	
Part I General Ir	General Information on Grants and Assistance	d Assistance						
<ol> <li>Does the organiz the selection crite</li> </ol>	Does the organization maintain records to substantiate the the selection criteria used to award the grants or assistance?	ubstantiate the sor assistance	e amount of the	grants or assista	nce, the grantees'	amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	or assistance, and	Yes No
2 Describe in Part	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	lures for mon	toring the use o	of grant funds in the	e United States.			
Part I Grants an	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV line 21 for any recipient that received more than \$5 000 Part II can be duplicated if additional space is needed	omestic Orç	Janizations an	d Domestic Gov	<b>ernments.</b> Com	plete if the organiza dditional space is ne	ation answered "Y	es" on Form 990,
<b>1 (a)</b> Name and	1 (a) Name and address of organization	(p) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of	(f) Method of valuation (book, FMV, appraisal,	(g) Description of	(h) Purpose of grant
5				Alain		other)		
(1) OHIOANS UNITED FOR REPRODUCTIVE RIGHTS 545 EAST TOWN ST., COLUMBUS, OH 43215	R REPRODUCTIVE RIGHTS LUMBUS, OH 43215	92-2433361	501(C)(4)	280,000.				CHARITABLE ACTIVITIES
(2) ROGER BALDWIN FOUNDATION OF ACLU								
150 NORTH MICHIGAN AVE., CHICAGO,	3., CHICAGO, IL 60601	36-2682569	501(C)(3)	25,000.				AFFILIATE PROGRAM
(3)								
(4)								
(5)								
(6)								
(2)								
(0)								
(0)		-1						
(6)								
(10)								
(11)								
(12)								
		-	- - -	-				
2 Enter total number	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table	government o	rganizations lis <sup>.</sup> 1 tabla	led in the line 1 tat	Je	•		
For Paperwork Reductic	For Paperwork Reduction Act Notice, see the Instructions for Form 990	ons for Form 9	0.	•	•	•	Sc	Schedule I (Form 990) 2023

Schedule I (	Schedule I (Form 990) (2023)					Page 2
Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.	ic Individuals	. Complete if th	ie organization	answered "Yes" on F	orm 990, Part IV, line 22.
	(a) Type of grant or assistance	<b>(b)</b> Number of recipients	<b>(c)</b> Amount of cash grant	<b>(d)</b> Amount of non-cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
<del>.</del>						
7						
ო						
4						
<b>ں</b>						
9						
~						
Part IV	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.	nformation re	quired in Part I, I	line 2, Part III, c	olumn (b); and any c	ther additional

SCHEDULE I, PART I, LINE 2:

A PARTICULAR GRANT AWARD HAVE BEEN MET. WHILE THE PRIMARY GRANTMAKING THE THE FURTHERANCE OF ITS MISSION. GRANT AWARDS ARE CONFIRMED IN WRITING AND GRANTS TO OTHER ORGANIZATIONS WHEN IT DETERMINES THAT DOING SO WILL BE IN THE ACLU FOUNDATION HAS ESTABLISHED PROCEDURES FOR THE RELEASE OF GRANTS, SUPPORTED BY A WRITTEN AGREEMENT THAT SPECIFIES THE PURPOSE OF THE GRANT, THE SPECIFIC OUTCOMES TO BE ACHIEVED, AND, IF APPLICABLE, THE INDICATORS AS WELL AS FOR MONITORING OF OUTCOMES, TO DETERMINE WHETHER THE GOALS OF ORGANIZATION DOES IS TO ITS AFFILIATES, THE ORGANIZATION ALSO MAKES

Schedule I (Form 990) (2023)

Schedule I (Form 990) (2023) Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.	stic Individuals	. Complete if th	ne organization	answered "Yes" on F	Page 2 orm 990, Part IV, line 22.
(a) Type of grant or assistance	(b) Number of recipients	<b>(c)</b> Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(1) Description of non-cash assistance
-					
2					
3					
4					
a					
9					
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.	e information re	quired in Part I, I	line 2, Part III, c	olumn (b); and any of	her additional
THAT THE PARTIES AGREE WILL BE USED TO	MEASURE	PROGRESS TOWARDS	RDS AGREED		
UPON GOALS. WRITTEN AGREEMENTS DETAIL	THE	SPECIFIC ACTIVITIES	5 FOR WHICH		
FUNDING IS TO BE PROVIDED AND DOCUMENT	T THE COMMITMENT	MENT TO USING THE	NG THE FUNDS		
PROVIDED TO PURSUE SPECIFIC STRATEGIES	S IN ADDRESSING	ING PROGRAM GOALS	GOALS AND		
TARGET OUTCOMES. AFFILIATES AND OTHER	ORGANIZATIONS	NS WHO RECEIVE	IVE GRANT		
AWARDS MAY BE REQUIRED TO PROVIDE QUAN	QUANTITATIVE AND	ID QUALITATIVE	/E REPORTS,		
AND THESE REPORTS MAY BE USED TO DETER	DETERMINE WHETHE	HETHER ADDITIONAL FUNDING MAY	FUNDING MA	Л	
BE REQUIRED AND/OR TO ENHANCE FUTURE G	GRANT PROGRAMS.	. SM			

Schedule I (Form 990) (2023)

(Forn	EDULE J n 990) nent of the Treasury Revenue Service	For certain Officers, Dire Cor Complete if the organization A	ISation Information Inctors, Trustees, Key Employees, and Highest Inpensated Employees In answered "Yes" on Form 990, Part IV, line 23 Attach to Form 990. 90 for instructions and the latest information.		<sup>MB No.</sup> 20 pen te	23	olic
	of the organization			Employer identification			
INC		AMERICAN CIVIL LIBERTIE	S UNION FOUNDATION,	13-621351			
Part		ns Regarding Compensation		13-021331	5		
rait	Questio					Yes	No
1a	990, Part VII, First-cla Travel fo Tax inde		ovided any of the following to or for a pers         provide any relevant information regarding         Housing allowance or residence for         Payments for business use of person         Health or social club dues or initiation         Personal services (such as maid, character)	these items. personal use nal residence on fees			
b	or reimburse	ement or provision of all of the ex	ne organization follow a written policy re penses described above? If "No," com	plete Part III to	1b		
2	Did the orga directors, trus	anization require substantiation prior	to reimbursing or allowing expenses D/Executive Director, regarding the items	incurred by all	2		
3	Indicate which organization's related organ Comper Indepen	n, if any, of the following the organizations CEO/Executive Director. Check all that	on used to establish the compensation of t at apply. Do not check any boxes for metho e CEO/Executive Director, but explain in Pa Written employment contract Compensation survey or study Approval by the board or compensation	ds used by a art III.			
4 a b	organization of Receive a sev	or a related organization: verance payment or change-of-control p	Part VII, Section A, line 1a, with respect to ayment?		4a 4b	XX	
c	Participate in	or receive payment from an equity-bas	rovide the applicable amounts for each it		4c		X
5	For persons		rganizations must complete lines 5-9. on A, line 1a, did the organization pa	y or accrue any			
а	The organizat	ion?			5a		Х
b		rganization?			5b		X
6	compensation	n contingent on the net earnings of:	on A, line 1a, did the organization pa				
a b	Any related o				6a 6b		X X
7 8	payments not Were any am to the initia	: described on lines 5 and 6? If "Yes," d ounts reported on Form 990, Part VII, I contract exception described in I	n A, line 1a, did the organization prov escribe in Part III	at was subject "Yes," describe	7	X	v
9	If "Yes" on I	ine 8, did the organization also fol	low the rebuttable presumption proced	ure described in	8		X
For Pa		ction Act Notice, see the Instructions for Fo			ule J (Fo	orm 990	0) 2023

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

Schedule J (Form 990) 2023 Part II Officers, Directors, Trustees, Key Employees, and Hi	lste	es. Kev Emplovees	s. and Highest Con	npensated Employ	ghest Compensated Employees. Use duplicate copies if additional space is needed	copies if addition	al space is needed	Page <b>2</b> d.
	satio ny in ach li	on must be reported on idividuals that aren't li sted individual must equ	ule J orm (	rt compensation froi art VII. orm 990, Part VII, Sect	, report compensation from the organization on row (i) and from related organizations, described in the 390, Part VII. Int of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.	n row (i) and from column (D) and (E) a	related organizatior amounts for that individ	s, described in the lual.
		(B) Breakdown of W-2 and/or 1099-	ind/or 1099-MISC and/or	-MISC and/or 1099-NEC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
ANTHONY D. ROMERO	Ξ	) NONE	NONE	NONE	NONE	NONE	NONE	NONE
1 EXECUTIVE DIRECTOR/CEO	1	710,802.	4,000.	605,500.	48,538.	9,725.	1,378,565.	237,180.
TERENCE R. DOUGHERTY	Ξ		NONE	NONE	NONE	NONE	NONE	NONE
2 DEP EXEC DIR. OPS/GEN. COUNSEL	(ii)	<pre>534,311.</pre>	4,500.	14,371.	38,464.	28,290.	619,936.	NONE
CHARIZMA T. WILLIAMS	Ξ	) NONE	NONE	NONE	NONE	NONE	NONE	NONE
<b>3</b> COO	Ē	458,105.	2,000.	7,875.	18,918.	14,653.	501,551.	NONE
AJ HIKES	Ξ	) NONE	NONE	NONE	NONE	NONE	NONE	NONE
4 DEP. EXEC DIR STRATEGY&CULTURE	1	<pre>1) 534,945.</pre>	4,500.	4,087.	16,231.	14,653.	574,416.	NONE
LARISA MUELLER	Ξ	) NONE	NONE	NONE	NONE	NONE	NONE	NONE
5 CFO	(ii)	i) 320,421.	3,000.	NONE	16,593.	2,127.	342,141.	NONE
DAVID D. COLE	Ξ	479,265.	3,000.	9,824.	21,661.	3,653.	517,403.	NONE
6 NATIONAL LEGAL DIRECTOR	(ii)	I) NONE	NONE	NONE	NONE	NONE	NONE	NONE
KARY L. MOSS	Ξ	475,160.	4,000.	11,941.	101,468.	22,633.	615,202.	NONE
7 DIR AFF SUPPORT & NATION. INIT	(ii)	I) NONE	NONE	NONE	NONE	NONE	NONE	NONE
MARK V. WIER	Ξ	489,453.	3,000.	11,658.	22,625.	27,499.	554,235.	NONE
8 CHIEF DEVELOPMENT OFFICER	(ii)	I) NONE	NONE	NONE	NONE	NONE	NONE	NONE
DEIDRE SCHIFELING	Ξ	) NONE	NONE	NONE	NONE	NONE	NONE	NONE
<b>9</b> NATIONAL POLITICAL DIRECTOR	(ii)	i) 426, 114.	4,000.	NONE	20,911.	12,881.	463,906.	NONE
TOUISE MELLING	Ξ	349,680.	2,500.	1,931.	65,205.	13,913.	433,229.	NONE
10 DEPUTY LEGAL DIRECTOR	(ii)	I) NONE	NONE	NONE	NONE	NONE	NONE	NONE
CECILLIA D. WANG	Ξ	346,129.	4,000.	1,931.	38,667.	13,913.	404,640.	NONE
11 DEPUTY LEGAL DIRECTOR	Ē	I) NONE	NONE	NONE	NONE	NONE	NONE	NONE
ELIZABETH FITZGERALD	Ξ	338,483.	3,000.	1,931.	38,667.	41,946.	424,027.	NONE
12 DIRECTOR OF DEVELOPMENT	(ii)	I) NONE	NONE	NONE	NONE	NONE	NONE	NONE
N.J. AKBAR	Ξ	) NONE			NONE	NONE	NONE	NONE
13 CHF. EQ., DIVERSTY & INCL. OFF.	≘	1) 232,964.	2,000.	166,445.	11,519.	12,624.	425,552.	NONE
SOPHIA K. GOLDMACHER	Ξ	) NONE	NONE	NONE	NONE	NONE	NONE	NONE
14 CHIEF PEOPLE OFFICER	(ii)	344, 573.	4,000.	NONE	17,577.	42,004.	408,154.	NONE
KRISTON ALFORD MCINTOS	Ξ	331,393.	3,500.	NONE	17,387.	2,451.	354,731.	NONE
15 CHIEF COMMUNICATIONS OFFICER	(ii)	I) NONE	NONE	NONE	NONE	NONE	NONE	NONE
	Ξ							
16	<b>(ii)</b>							

54

Schedule J (Form 990) 2023

for any additional information.
SCHEDULE J, PART I, LINE 3:
AMERICAN CIVIL LIBERTIES UNION FOUNDATION, INC. DOES NOT PAY COMPENSATION
TO THE ORGANIZATION'S EXECUTIVE DIRECTOR/CEO. ALTHOUGH IT DOES PAY THE
COMPENSATION OF SOME KEY EMPLOYEES. AMERICAN CIVIL LIBERTIES UNION, INC.
(ACLU), AN AFFILIATE OF THE REPORTING ORGANIZATION, PAID COMPENSATION TO
THE EXECUTIVE DIRECTOR/CEO, SOME KEY EMPLOYEES, AND CERTAIN OFFICERS OF
THE REPORTING ORGANIZATION. ACLU AND AMERICAN CIVIL LIBERTIES UNION
FOUNDATION HAVE ESTABLISHED THE FOLLOWING PROCEDURES TO DETERMINE THE
COMPENSATION OF THESE INDIVIDUALS:
THE BOARD OF THE ORGANIZATION AND THE EXECUTIVE COMMITTEE OF THE ACLU
BOARD ESTABLISH THE EXECUTIVE DIRECTOR/CEO'S COMPENSATION, AND EACH
ORGANIZATION'S AUDIT COMMITTEE APPROVES THE COMPENSATION OF ITS OTHER KEY
EMPLOYEES OR OFFICERS, AS RECOMMENDED BY THE EXECUTIVE DIRECTOR/CEO. NO
MEMBER OF THE BOARD OF THE ORGANIZATION, THE EXECUTIVE COMMITTEE OF THE
ACLU OR EITHER ORGANIZATION'S AUDIT COMMITTEE (EACH A "LAY LEADER BODY")
HAS A CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT.
EACH LAY LEADER BODY REVIEWS COMPENSATION STUDIES AND COMPARABLE

Provide the information, explanation, or descriptions required for Farth, intes 1a, 1b, 5, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 6, and for Farth. Also complete this part for any additional information.
COMPENSATION DATA FOR FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY
SITUATED ORGANIZATIONS. EACH LAY LEADER BODY CONTEMPORANEOUSLY DOCUMENTS
AND RECORDS, IN ITS MINUTES, ITS DELIBERATIONS AND DECISIONS. NO ACLU
OFFICER RECEIVES COMPENSATION IN THEIR CAPACITY AS A DIRECTOR.
SCHEDULE J, PART I, LINES 4A AND 4B:
ONE INDIVIDUAL RECEIVED SEVERANCE PAYMENTS DURING THE CALENDAR YEAR ENDED
DECEMBER 31, 2023 FROM AMERICAN CIVIL LIBERTIES UNION, INC., A RELATED
501(C)(4) ORGANIZATION. THE AMOUNTS ARE REPORTED IN FORM 990 PART VII AND
IN PART II OF THIS SCHEDULE J. FOR PURPOSES OF CONFIDENTIALITY, THE NAME
OF THE INDIVIDUAL AND AMOUNT IS NOT DISCLOSED. THE DETAILED INFORMATION
IS AVAILABLE TO THE IRS UPON REQUEST.
THE EXECUTIVE DIRECTOR/CEO PARTICIPATES IN A NONQUALIFIED SUPPLEMENTAL
RETIREMENT PLAN. ACCORDING TO THE TERMS OF THIS RETIREMENT BENEFIT,
AMOUNTS ACCRUED ON A CALENDAR YEAR BASIS FOR THREE YEARS AND AT THE END
OF CALENDAR YEAR 2023, THE FULL AMOUNT WAS PAID BY AMERICAN CIVIL

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 for any additional information.	vlso complete this part
LIBERTIES UNION, INC, A RELATED 501C(4) ORGANIZATION. ALL OF THIS AMOUNT	
IS INCLUDED IN COMPENSATION FROM A RELATED ORGANIZATION REPORTED IN FORM	
990, PART VII, AND SCHEDULE J, PART II, COLUMN B(III). IN THE FORM 990	
SCHEDULE J FOR 2021 AND THE FORM 990 SCHEDULE J FOR 2022, THE AMOUNTS	
THAT ACCRUED ALSO WERE REPORTED AS DEFERRED COMPENSATION FROM A RELATED	
ORGANIZATION IN SCHEDULE J.	
SCHEDULE J, PART I, LINE 7:	
BONUS ELIGIBILITY IS DISCRETIONARY.	
SCHEDULE J, PART II:	
PART II: COLUMN B(I) INCLUDES BASE COMPENSATION, COLUMN B(II) INCLUDES	
BONUS PAYMENTS AND COLUMN B(III) INCLUDES ALL OTHER REPORTABLE	
COMPENSATION. COLUMN C INCLUDES EMPLOYER CONTRIBUTIONS TO THE DEFINED	
BENEFIT PENSION PLAN OR, FOR EMPLOYEES HIRED ON OR AFTER APRIL 1, 2009,	
TO THE DEFINED CONTRIBUTION PLAN, IF ANY, TO THE 457(B) PLAN; THE TOTALS	

Schedule J (Form 990) 2023 Part III Supplemental Information	Page 3
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, for any additional information.	art I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part
SHOWN REFLECT AMOUNTS EARNED DURING THE YEAR, WHETHER	THER OR NOT THE EMPLOYEE
IS FULLY VESTED. COLUMN D INCLUDES NON-TAXABLE BENE	BENEFITS, SUCH AS HEALTH
AND OTHER INSURANCE.	
	Schedule J (Form 990) 2023
AS.	

### SCHEDULE M (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047 20 23

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

Name of the organization

Go to www.irs.gov/Form990 for instructions and the latest information. AMERICAN CIVIL LIBERTIES UNION FOUNDATION,

Employer identification number

13-6213516

Ι	Ν	С	•

Par	t Types of Property							
		<b>(a)</b> Check if applicable	<b>(b)</b> Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash cont			
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		392	5,365,367.	SALES PRI	CE		
10	Securities - Closely held stock			, ,				
11	Securities - Partnership, LLC,							
	or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation							
	contribution - Historic							
	structures							
14	Qualified conservation							
	contribution - Other							
15	Real estate - Residential		1	4,400,000.	FMV			
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts.							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()							
28	Other ( )							
29	Number of Forms 8283 received	by the org	anization during the tax y	ear for contributions for				
	which the organization completed I	Form 8283,	Part V, Donee Acknowledge	ement	29		N	ONE
							Yes	No
30a	During the year, did the organizat				-			
	28, that it must hold for at least 3	years from	the date of the initial contr	ibution, and which isn't re	quired to be			
	used for exempt purposes for the e		ı period?			30a		Х
b	If "Yes," describe the arrangement	in Part II.						
31	Does the organization have a	gift accept	tance policy that require	es the review of any	nonstandard			
	contributions?					31	Х	
32a	Does the organization hire or use	e third parti	es or related organization	s to solicit, process, or s	sell noncash			
	contributions?					32a	Х	
b	If "Yes," describe in Part II.							
33	If the organization didn't report an	amount in c	olumn (c) for a type of pro	perty for which column (a)	) is checked,			
	describe in Part II.							
For Pa	aperwork Reduction Act Notice, see the Inst	ructions for Fo	rm 990.		Schedule	M (Fo	rm 990	) 2023

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

SCHEDULE M, PART I, COLUMN (B):

THE NUMBER OF CONTRIBUTIONS ABOVE REPRESENTS THE TOTAL NUMBER OF STOCK

GIFTS DURING THE YEAR.

SCHEDULE M, PART I, LINE 32B:

WE ENGAGE BROKERS, WITH EXPERTISE SELLING PROPERTY CONTRIBUTED TO THE ORGANIZATION, TO FACILITATE SALES OF NONCASH PROPERTY ON OUR BEHALF. Department of the Treasury

### 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 990-EZ.



Internal Revenue Service Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form			Inspection
Name of the organization		Employer identificat	tion number
AMERICAN CIVIL LIE	BERTIES UNION FOUNDATION,	13-62135	16

### FORM 990, PART III, LINE 4B:

LOCAL/REGIONAL AND NATIONAL SIGNIFICANCE. ASNI OFFERS TRAINING AND TECHNICAL ASSISTANCE TO AFFILIATES ACROSS THE COUNTRY ON A VARIETY OF TOPICS OF RELEVANCE.

### FORM 990, PART III, LINE 4C:

FAIR TREATMENT WHEN THE LOSS OF LIBERTY OR PROPERTY IS AT STAKE; AND THE RIGHT TO PRIVACY AND FREEDOM FROM UNWARRANTED GOVERNMENT INTRUSION INTO PERSONAL AND PRIVATE AFFAIRS.

### FORM 990, PART III, LINE 4D:

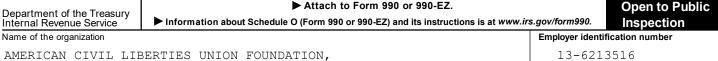
OTHER PROGRAM SERVICES:

LEGISLATIVE ADVOCACY - THE ACLU SEEKS TO IMPACT CIVIL LIBERTIES THROUGH WORK ON LEGISLATION AT THE FEDERAL AND STATE LEVEL, AS APPROPRIATE. THE ORGANIZATION'S LEGISLATIVE ADVOCATES ARE A CONSTANT PRESENCE ON FEDERAL AND STATE CIVIL LIBERTIES LEGISLATIVE ISSUES. UPDATES ON KEY LEGISLATIVE ISSUES IMPACTING CIVIL LIBERTIES ARE INCLUDED IN MAIL, EMAIL, AND OTHER COMMUNICATIONS TO ACLU MEMBERS NATIONWIDE, AS WELL AS IN PUBLIC EDUCATION CAMPAIGNS. IN ADDITION, THE ACLU DEVELOPS POLICY RELATING TO POSITIONS ON CIVIL LIBERTIES ISSUES.

EXPENSES \$5,186,580. INCLUDING GRANTS OF \$125,454. REVENUE \$0. CIVIL LIBERTIES POLICY FORMULATION - THE BOARD OF DIRECTORS OF THE ACLU WORKS THROUGH ITS STANDING AND SPECIAL COMMITTEES TO ANALYZE CIVIL LIBERTIES ISSUES AND, WHERE APPROPRIATE, TO DEVELOP POLICIES THAT WILL SERVE AS THE FRAME OF REFERENCE FOR LEGISLATIVE, EDUCATIONAL AND

### 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 990-EZ.



CASE-SPECIFIC WORK AT THE NATIONAL LEVEL, AND THE ORGANIZATION IMPLEMENTS

AND ASSISTS IN THE DEVELOPMENT OF POLICY GOALS THROUGH ITS AFFILIATES.

EXPENSES \$1,796,269. INCLUDING GRANTS OF \$0. REVENUE \$0.

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

ACLU FOUNDATION'S MEMBERS ELECT THE BOARD DIRECTORS OF ACLU FOUNDATION.

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

ACLU HAS THE AUTHORITY TO AMEND ITS BYLAWS, AND UNDER NEW YORK LAW, ACLU HAS THE RIGHT TO APPROVE A DECISION BY THE BOARD TO DISSOLVE, MERGE/CONSOLIDATE WITH ANOTHER ORGANIZATION OR DISPOSE OF ALL OR SUBSTANTIALLY ALL OF THE ORGANIZATION'S ASSETS.

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

THE FORM 990 WAS PREPARED BY MANAGEMENT IN CONSULTATION WITH THE ORGANIZATION'S OUTSIDE ACCOUNTANTS. THE ORGANIZATION'S AUDIT COMMITTEE REVIEWED A DRAFT OF THE 990 AND PROVIDED COMMENTS. A COMPLETE COPY OF THE FORM 990 WAS PROVIDED TO THE ORGANIZATION'S GOVERNING BODY BEFORE IT WAS FILED.

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

THE ORGANIZATION DISTRIBUTES ITS CONFLICT OF INTEREST POLICY ON AN ANNUAL BASIS TO EVERY KEY EMPLOYEE, OFFICER, BOARD DIRECTOR AND STANDING COMMITTEE MEMBER AND REQUESTS DISCLOSURE OF ANY POTENTIAL CONFLICTS OF INTEREST. THE CHIEF OPERATING OFFICER OF THE ORGANIZATION REVIEWS ANY

OMB No. 1545-0047

### 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 990-EZ.



 Department of the Treasury Internal Revenue Service
 ► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.
 Inspection

 Name of the organization
 Employer identification number

 AMERICAN CIVIL LIBERTIES UNION FOUNDATION,
 13-6213516

DISCLOSURES MADE DURING THIS ANNUAL REVIEW. IF A MATTER IS RAISED THAT MAY BE A CONFLICT OF INTEREST INVOLVING A BOARD MEMBER, AN OFFICER OR A STANDING COMMITTEE MEMBER, SHE REFERS THE MATTER TO THE BOARD PRESIDENT AND APPROPRIATE FOLLOW UP IS UNDERTAKEN AS SET FORTH IN THE POLICY. IF A MATTER IS RAISED THAT MAY BE A CONFLICT OF INTEREST INVOLVING A KEY EMPLOYEE, SHE REFERS THE MATTER TO THE EXECUTIVE DIRECTOR OR HER DESIGNEE AND APPROPRIATE FOLLOW UP IS UNDERTAKEN AS SET FORTH IN THE POLICY. BOARD DIRECTORS, OFFICERS, STANDING COMMITTEE MEMBERS AND KEY EMPLOYEES ALSO MAY REPORT TO THE BOARD ANY POTENTIAL CONFLICTS OF INTEREST THAT ARISE DURING THE YEAR. THE ORGANIZATION'S CONFLICT OF INTEREST POLICY REQUIRES, AMONG OTHER THINGS, THAT INDIVIDUALS WITH CONFLICTS OF INTEREST WITH RESPECT TO A TRANSACTION OR ACTION MAY NOT PARTICIPATE IN THE DECISION-MAKING WITH RESPECT TO THAT TRANSACTION OR ACTION AND IN SOME CIRCUMSTANCES MAY NOT PARTICIPATE IN THE DISCUSSION.

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

AMERICAN CIVIL LIBERTIES UNION FOUNDATION, INC. DOES NOT PAY COMPENSATION TO THE ORGANIZATION'S EXECUTIVE DIRECTOR/CEO. ALTHOUGH IT DOES PAY THE COMPENSATION OF SOME KEY EMPLOYEES. AMERICAN CIVIL LIBERTIES UNION, INC. (ACLU), AN AFFILIATE OF THE REPORTING ORGANIZATION, PAID COMPENSATION TO THE EXECUTIVE DIRECTOR/CEO, SOME KEY EMPLOYEES, AND CERTAIN OFFICERS OF THE REPORTING ORGANIZATION. ACLU AND AMERICAN CIVIL LIBERTIES UNION FOUNDATION HAVE ESTABLISHED THE FOLLOWING PROCEDURES TO DETERMINE THE COMPENSATION OF THESE INDIVIDUALS:

THE BOARD OF THE ORGANIZATION AND THE EXECUTIVE COMMITTEE OF THE ACLU

Department of the Treasury

### 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 990-EZ.



Internal Revenue Service Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs		s.gov/form990.	Inspection
Name of the organization		Employer identif	ication number
AMERICAN CIVIL LIE	BERTIES UNION FOUNDATION,	13-6213	3516

BOARD ESTABLISH THE EXECUTIVE DIRECTOR/CEO'S COMPENSATION, AND EACH ORGANIZATION'S AUDIT COMMITTEE APPROVES THE COMPENSATION OF ITS OTHER KEY EMPLOYEES OR OFFICERS, AS RECOMMENDED BY THE EXECUTIVE DIRECTOR/CEO. NO MEMBER OF THE BOARD OF THE ORGANIZATION, THE EXECUTIVE COMMITTEE OF THE ACLU OR EITHER ORGANIZATION'S AUDIT COMMITTEE (EACH A "LAY LEADER BODY") HAS A CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT. EACH LAY LEADER BODY REVIEWS COMPENSATION STUDIES AND COMPARABLE COMPENSATION DATA FOR FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS. EACH LAY LEADER BODY CONTEMPORANEOUSLY DOCUMENTS AND RECORDS, IN ITS MINUTES, ITS DELIBERATIONS AND DECISIONS. NO ACLU OFFICER RECEIVES COMPENSATION IN THEIR CAPACITY AS A DIRECTOR.

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

UPON REQUEST, THE ORGANIZATION WILL MAKE AVAILABLE ONLY THOSE DOCUMENTS REQUIRED TO BE DISCLOSED UNDER THE PUBLIC INSPECTION LAWS.

### FORM 990, PART VII, SECTION A, LINE LA, COLUMN B:

THE NUMBER OF HOURS REPORTED FOR THOSE INDIVIDUALS RECEIVING COMPENSATION IS BASED ON WEEKLY HOURS FOR PAYROLL PURPOSES. THE ACTUAL NUMBER OF HOURS WORKED IS CONSIDERABLY HIGHER.

### FORM 990, PART XI, LINE 9:

Department of the Treasury

### 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 990-EZ. OMB No. 1545-0047

nternal Revenue Service Information about Schedule O (Porm 990 of 990-EZ) and its instructions is at www.ins.gov/io/m990.			
Name of the organization	Employer identification number		
AMERICAN CIVIL LIBERTIES UNION FOUNDATION,	13-6213516		
CHANGES IN BENEFIT OBLIGATION OTHER THAN			
NET PERIODIC COST(\$1,630	,436)		
NET PERIODIC COST OTHER THAN SERVICE COSTS\$1,553	,791		

TOTAL TO FORM 990, PART XI, LINE 9:

(\$3,181,758)

Schedule O (Form 990 or 990-EZ) 2023		
Name of the organization Employer identifica		
AMERICAN CIVIL LIBERTIES UNION FOUNDATION,	13-6213516	

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

AS NOTED IN ITS ARTICLES OF INCORPORATION, THE MISSION OF THE ACLU FOUNDATION IS "TO ENCOURAGE, SPONSOR, AND FACILITATE THE CULTIVATION AND DIFFUSION OF KNOWLEDGE AND UNDERSTANDING OF THE VARIOUS CIVIL LIBERTIES AND CIVIL RIGHTS WHICH ARE PROTECTED BY THE CONSTITUTION AND LAWS OF THE UNITED STATES OR OF THE VARIOUS STATES TO PERSONS INVOLVED IN ACTIVITIES WHEREIN THEIR CIVIL RIGHTS AND LIBERTIES ARE THREATENED OR INFRINGED." THE ACLU FOUNDATION TODAY REMAINS FOCUSED ON THE OVERARCHING GOALS SET BY ITS FOUNDERS, SERVING AS THE NATION'S GUARDIAN OF LIBERTY, WORKING DAILY IN COURTS, LEGISLATURES AND COMMUNITIES TO DEFEND AND PRESERVE THE INDIVIDUAL RIGHTS AND LIBERTIES THAT THE CONSTITUTION AND LAWS OF THE US GUARANTEE. THE ACLU ALSO WORKS TO EXTEND RIGHTS TO SEGMENTS OF THE POPULATION THAT HAVE TRADITIONALLY BEEN DENIED THEIR RIGHTS, INCLUDING PEOPLE OF COLOR; WOMEN; LESBIANS, GAY MEN, BISEXUALS AND TRANSGENDER AND GENDER NONBINARY PEOPLE; PRISONERS; AND PERSONS WITH DISABILITIES.

Schedule O (Form 990 or 990-EZ) 2023		
Name of the organization	Employer identification number	
AMERICAN CIVIL LIBERTIES UNION FOUNDATIO	DN, 13-6213516	

FORM 990, PART VI, LINE 17 - STATES

AK, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, WA, WV, WI, WY

Name of the organization	Employer ide	entification number
AMERICAN CIVIL LIBERTIES UNION F	OUNDATION, 13-621	13516
FORM 990, PART VII-COMPENSATION OF THE 5 HI		
IAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
MSP-COMMUNICATIONS		
220 S. 6TH STREET, SUITE 500		
MINNEAPOLIS, MN 55402	PRINTING&PRODUCTION	1,157,160
PRODUCTION SOLUTIONS, INC.		
1953 GALLOWS ROAD, SUITE 500		
VIENNA, VA 22182	PRINTING&PUBLISHING	654 <b>,</b> 477
NEW YORK INTERIOR CONCEPTS, INC.		
315 MADISON AVENUE, SUITE 209		
NEW YORK, NY 10017	RENOVATION & REPAIRS	465,107
EARTH CLASS MAIL, INC.		
122 E. HOUSTON		
SAN ANTONIO, TX 78205	MAIL PROCESSING	335,413
ON SERVICES, LLC		
6779 CRESCENT DRIVE		
NORCROSS, GA 30071	AUDIO VISUAL PROD.	319,327

SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service	<b>Related Organizations and Unrelated Partnerships</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990. Go to <i>www.irs.gov/Form990</i> for instructions and the latest information.	ed Organizations and Unrelated Partnerships the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or Attach to Form 990. Go to <i>www.irs.gov/Form990</i> for instructions and the latest information.	Ins and Unrelated ed "Yes" on Form 990, Part IV Attach to Form 990. 190 for instructions and the lat	Partnershi ', line 33, 34, 35b, 3 est information.	<b>ips</b> 6, or 37.		OMB No. 1545-0047 20 <b>23</b> Open to Public Inspection	0047 C
Name of the organization $\mbox{I}{\rm NC}$ .	AMERICAN CIVIL LIBERTIES UNION	FOUNDATION,				Employer identification 13-6213516	Employer identification number $13-6213516$	л.
Part I Identific	Identification of Disregarded Entities. Complete if th	Complete if the organization answered "Yes" on Form 990, Part IV, line 33	swered "Yes" on F	orm 990, Part IV	V, line 33.			
	(a) Name, address, and EIN (if applicable) of disregarded entity		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity	DE DE
(1) 915 15TH STREET 915 15TH STREET NW	, LLC WASHINGTON, DC 3	L3- 6213516 20005 RE	REAL ESTATE I	DC	717,106.	6,636,176.	ACLUF	
	AVE, LLC , 18TH FLOOR NEW YORK, NY 10	32270	ESTATE	ЛY	4,400,000.	400,	ACLUF	
(3)								
(4)								
(5)								
(6)								
Part II one or n	Identification of Related Tax-Exempt Organizations. one or more related tax-exempt organizations during t	Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had the tax year.	rganization answe	ered "Yes" on Fo	orm 990, Part IV,	line 34, because	e it had	
Nan	<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	(13)
							Yes No	0
(1) AMERICAN CIVIL LI 125 BROAD STREET,	LIBERTIES UNION, INC. 13-3871360 5T, 18TH FLOOR NEW YORK, NY 10004	SEE PART VII	DC	501(C)(4)		N/A	×	
(2) RBSO, INC. 125 BROAD STREET,	04-3730759 , 18TH FLOOR NEW YORK, NY 10004	SUPPORT ORG	DE	501(C)(3)	LINE 12B	N/A	×	
(3) ACLU VOTERS EDUCATION FUND 125 BROAD STREET, 18TH FLOOR	ATION FUND 93-4643886 , 18TH FLOOR NEW YORK, NY 10004	SEE PART VII	ΧN	527		ACLU	×	
(4)								
(5)								
(9)								
(2)								
For Paperwork Redu	For Paperwork Reduction Act Notice, see the Instructions for Form 9	990.				Schedule R	Schedule R (Form 990) 2023	:023

JSA 3E1307 1.000

Preventioner frequencies         Prevent	Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization because it had one or more related organizations treated as a partnership during the tax year.	i <b>ted Organization</b> more related org	s Taxable anizations		<b>iip.</b> Com artnershi	plete if t p during	he organizati the tax year.	<b>Partnership.</b> Complete if the organization answered "Yes" (ted as a partnership during the tax year.	s" on Form	on Form 990, Part IV, line 34	line 34,	-	1 ada L
$ \frac{1}{10000000000000000000000000000000000$	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Pred income untre excluor tax	(e) ominant > (related, elated, ded from under 512 - 514)				(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)		(k) Percent owners	ship
Image: constraint of the	(1)												
Image: constraint of the	(2)												
Image: constraint of the constr	(3)												
Identification of Related Organizations Taxable as a Corporation of Related Organizations Taxable as a Corporation of Trust. Complete if the organization answered "Yes" on Form 990. Part IV.         Identification of Related Organizations Taxable as a Corporation of Related Organizations Taxable as a Corporation of Trust. Complete if the organization answered "Yes" on Form 990. Part IV.         Ime 34. because in had one or more related organizations transform fine 34. because in had one or more related organizations transformered as a Corporation of trust during the tax year.       Ime 34. because in had one or more related organizations transformered as a Corporation of transformered as a Corporatin of transtrate as a Corporation of transformered as a	(4)												
Image: Signature stands and stands       Image: Signature stands       Image: Signatur	(5)												
Image: Contraction 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.     Image: 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.       Image: Complete if the organization of Related organizations treated as a corporation or trust during the tax year.     Primary activity     Image: Complete if the organization answered "Yes" on Form 990, Part IV, non-part IV,	(6)												
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Name, address, and ENG feladed ogarization         Primary activity (asso controlling county)         Dire (d) (conc, s corp, or trues)         State (f) (conc, s corp, or true		ad one or more re	lated orga	anizations treate	ed as a co	orporatio	n or trust dur	ing the tax year.				-	
CHARTFABLE FRMATNDER FRUST CHARTFABLE TRUST CHARTFABLE REMAINDER TRUST CHARTFABLE R	(a Name, address, and Ell	l) N of related organization		(b) Primary ac		(c) gal domicile ite or foreign country)	(d) Direct controlling entity		(f) Share of tota income			) ntage 512 rship cor e	(i) section 2(b)(13) introlled entity?
CHARITABLE REMAINDER TRUST       CHARITABLE TR       AL       TRUST       TRUST         CHARITABLE REMAINDER TRUST       CHARITABLE TR       GARITABLE TR       GA       MCUF       TRUST         CHARITABLE REMAINDER TRUST       CHARITABLE TR       GARITABLE TR       GA       MCUF       TRUST         CHARITABLE REMAINDER TRUST       CHARITABLE TR       MA       ACUF       TRUST       PRUST         CHARITABLE REMAINDER TRUST       CHARITABLE TR       MA       ACUF       TRUST       PRUST         CHARITABLE REMAINDER TRUST       CHARITABLE TR       MA       ACUF       PRUST       PRUST         CHARITABLE REMAINDER TRUST       CHARITABLE TR       NA       ACUF       PRUST       PRUST         CHARITABLE REMAINDER TRUST       MA       MCUF       PRUST       PRUST       PRUST       PRUST         CHARITABLE REMAINDER TRUST       MA       MCUF       PRUST       P													
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					TR		CLUF	TRUST				×	
	(1)												
										Schor	Inte R (For	000	2023

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Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36	s" on Form 990, Part	t IV, line 34, 35b, or 36.		
Note: 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?	elated organizations list	ted in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.	-		<b>1</b> a	×
<b>b</b> Gift, grant, or capital contribution to related organization(s)	-		1p	×
c Gift, grant, or capital contribution from related organization(s).			- 1c	×
d Loans or loan guarantees to or for related organization(s)				×
:				×
			Y	
f Dividends from related organization(s)		· · · · · · · · · · · · · · · · · · ·	⊨ ,	≺ :
	· · · · · · · · · · · · · · · · · · ·			
h Purchase of assets from related organization(s)			<b>ب</b> ب ب	×
i Exchange of assets with related organization(s)			<b>;</b>	×
j Lease of facilities, equipment, or other assets to related organization(s)			- <b>-</b>	×
			÷	>
k Lease of facilities, equipment, or other assets from related organization(s)			×	< >
I Performance of services or membership or fundraising solicitations for related organization(s)			-	< ;
			E ,	×   ;
			<b>-</b>	×
o Sharing of paid employees with related organization(s)			10	×
Doint the second to related argumentation for some one			<u>,</u>	~
Doimbursettiette paid to related organization(s) for expenses.	· · · · · · · · · · · · · · · · · · ·		2 7	*
d Relitiouseritent paid by related organization(s) for expenses	· · · ·	•	- - -	4
<b>r</b> Other transfer of cash or property to related organization(s).			1r	×
			1s	×
or information	is line, including cover	on who must complete this line, including covered relationships and transaction thresholds	action thresholds	
(a)	(q)	(c)	(q)	
Name of related organization	Transaction type (a - s)	Amount involved	Method of determining amount involved	rmining Nved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
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# Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Part VI

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 aross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

	(k) Percentage ownership																		
	) ral or iging ier?	No																	
	() General or managing partner?	Yes												 					_
	(I) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)																		
	) ertionate tions?	No																	
	(h) Disproportionate allocations?	Yes																	
.edii ie	(g) Share of end-of-year assets																		
חווכווו המוחוכו	(f) Share of total income																		
	artners on (3) tions?	No																	
	(e) Are all partners section 501(c)(3) organizations?	Yes																	
	(d) (e) Predominant Are all partners income (related, section unrelated, sectuded 501(c)(3) from tax under organizations?	sections 512 - 514)																	
nunus regaran	(c) Legal domicile (state or foreign country)																		
	<b>(b)</b> Primary activity																		
	(a) Name, address, and EIN of entity		(1)	(2)	(3)	(4)	(5)	(6)	(2)	(8)	(6)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	

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Part VII Supplemental Information Provide additional information for responses to questions on Schedule R. See instructions.

SCHEDULE R, PART II, LINE 1:

NAME OF RELATED TAX EXEMPT ORGANIZATION: AMERICAN CIVIL LIBERTIES UNION,

INC.

PRIMARY ACTIVITY: PRESERVATION AND PROMOTION OF CIVIL RIGHTS AND LIBERTIES.

SCHEDULE R, PART II, LINE 3:

NAME OF RELATED TAX-EXEMPT ORGANIZATION: ACLU VOTER EDUCATION FUND PRIMARY ACTIVITY: MAKING IRC 527 EXPENDITURES IN ORDER TO EDUCATE THE PUBLIC ON CRITICAL CIVIL LIBERTIES POSITIONS OF FEDERAL, STATE AND LOCAL CANDIDATES IN A MANNER THAT IS CONSISTENT WITH AMERICAN CIVIL LIBERTIES UNION, INC.'S POLICIES

THE ACLU VOTER EDUCATION FUND AND THE AMERICAN CIVIL LIBERTIES FOUNDATION, INC. ARE BOTH CONTROLLED BY THE AMERICAN CIVIL LIBERTIES UNION, INC. THE ACLU VOTER EDUCATION FUND IS NOT CONTROLLED BY, NOR DOES IT CONTROL, THE AMERICAN CIVIL LIBERTIES UNION FOUNDATION.